

## FDA-approved birth control includes sterilization

Nancy Frazier O'Brien Catholic News Service | Aug. 25, 2011

**WASHINGTON** -- If the Department of Health and Human Services proceeds with its plan to include contraceptives and sterilization among the mandated preventive services for women under the new health reform law, what exactly will that entail?

The Aug. 1 announcement by HHS Secretary Kathleen Sebelius said all health plans, except those subject to a narrow religious exemption, would have to cover without co-payment or deductible "all Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling for all women with reproductive capacity."

A 20-page "birth control guide" published by the FDA Office of Women's Health lists six categories of FDA-approved medicines and devices for birth control -- barrier methods, hormonal methods, emergency contraception, implanted devices, permanent sterilization methods for women and permanent sterilization surgery for men.

The guide opens with a simple sentence: "If you do not want to get pregnant, do not have sex." It also notes that "the best way to avoid pregnancy and sexually transmitted infections is to practice total abstinence (do not have any sexual contact)."

The Catholic Church is opposed to all artificial forms of birth control and supports natural family planning as the only method of birth regulation that does not interfere with the unitive and procreative aspects of marriage.

Among the barrier methods explained in the FDA guide are several available without a prescription -- male and female condoms, the sponge with spermicide and spermicide alone. It is not yet clear whether over-the-counter items such as these will have to be made available for free to those enrolled in health plans under the HHS proposal.

Prescription-only barrier methods in the FDA guide include the diaphragm and the cervical cap, both used with spermicide.

Hormonal methods of birth control include oral contraceptives that combine estrogen and progestin, progestin-only oral contraceptives, continuous-use oral contraceptives taken every day, a skin patch that uses estrogen and progestin to stop ovulation, a vaginal contraceptive ring or an injection of progestin that lasts three months.

All of the hormonal contraceptives are available only by prescription, as is the "morning-after pill" for those 16 and under. Women 17 and up can buy emergency contraception over the counter.

Implanted devices for birth control that have received FDA approval include the IUD, a T-shaped device inserted into a woman's uterus that can last five to 10 years, and an implantable rod containing progestin that is put under the skin on a woman's upper arm and can last up to three years.

The three methods of sterilization -- trans-abdominal surgical sterilization and trans-cervical surgical sterilization implant for women and vasectomy for men -- all are listed as an option only for people "who are sure they never want to have a child or do not want any more children, because they cannot be changed back."

For each birth-control method or device, the FDA guide at [www.fda.gov/downloads/ForConsumers/ByAudience/ForWomen/FreePublications/UCM207070.pdf](http://www.fda.gov/downloads/ForConsumers/ByAudience/ForWomen/FreePublications/UCM207070.pdf) includes information about how to use it, how to get it, the possibility of getting pregnant while using it, potential risks and whether it protects the user from sexually transmitted infections.

Only the male condom made of latex is identified as providing any protection from sexually transmitted infections. The female condom "may give some protection," the guide says, but "more research is needed."

The chances of getting pregnant while using the various birth control methods ranged from 30 out of 100 for spermicide alone to 1 out of 100 for sterilization.

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