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**DEPARTMENT:PHARMACHOLOGY**

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**Contraception** in human physiology, [birth control](https://www.britannica.com/science/birth-control) through the deliberate prevention of [conception](https://www.merriam-webster.com/dictionary/conception) or impregnation.Birth control (contraception) is designed to interfere with the normal process and prevent the pregnancy that could result. There are different kinds of birth control that act at different points in the process, from ovulation, through fertilization, to implantation. Each method has its own side effects and risks. Some methods are more reliable than others.

There are more different types of birth control available today than ever. They can be divided into a few groups based on how they work;

* **Barrier Methods**

**Male:**Condoms

**Female:**Condoms ,Diaphragms,Cervical cap,Contraceptive Sponge

* **Hormonal Methods**

Inhibits ovulation by preventing release of LH and FSH from the pituitary gland, which thickens cervical mucus

Intrauterine Device (IUD) – hormonal or copper type

Emergency Contraceptive Pills (Progestin and/or Oestrogen)

* **Sterilization**

Vasectomy

Tubal ligation

1. **Spermicides;**A spermicide can kill sperm cells. A spermicide can be used alone or in combination with a diaphragm or cervical cap. The most common spermicidal agent is a chemical called nonoxynol-9 (N-9). It is available in several concentrations and forms, including foam, jelly, cream, suppository, and film. A spermicide should be inserted into the vagina close to the uterus no more than 30 minutes prior to intercourse and left in place 6 to 8 hours after intercourse to prevent pregnancy. Spermicides do not prevent the transmission of STDs and may cause allergic reactions or [vaginitis](https://www.nichd.nih.gov/health/topics/vaginitis/Pages/default.aspx)
2. **Male condom;**This condom is athin sheath that covers the penis to collect sperm and prevent it from entering the woman's body. Male condoms are generally made of latex or polyurethane, but a natural alternative is lambskin (made from the intestinal membrane of lambs). Latex or polyurethane condoms reduce the risk of spreading [sexually transmitted diseases (STDs)](https://www.nichd.nih.gov/health/topics/stds/Pages/default.aspx). Lambskin condoms do not prevent STDs. Male condoms are disposed of after a single use.
3. **An intrauterine device (IUD**); also known as an intrauterine system (IUS), is a small, T-shaped device that is inserted into the uterus to prevent pregnancy. A health care provider inserts the device. An IUD can remain in place and function effectively for many years at a time. After the recommended length of time, or when the woman no longer needs or desires contraception, a health care provider removes or replaces the device.

* A**hormonal IUD or IUS**releases a progestin hormone (levonorgestrel) into the uterus. The released hormone causes thickening of the cervical mucus, inhibits sperm from reaching or fertilizing the egg, thins the uterine lining, and may prevent the ovaries from releasing eggs. The failure rate of a hormonal IUS is less than 1%; however, a small percentage of women may experience expulsion of the device and have to have it reinserted. Some research also suggests that these IUDs maintain their effectiveness up to a year beyond their recommended use period. This method may also be used to treat heavy menstrual bleeding because the hormone often reduces or eliminates uterine bleeding.
* A **copper IUD** prevents sperm from reaching and fertilizing the egg, and it may prevent the egg from attaching in the womb. If fertilization of the egg does occur, the physical presence of the device prevents the fertilized egg from implanting into the lining of the uterus. The failure and expulsion/reinsertion rates of a copper IUD is similar to those of a hormonal IUD. Copper IUDs may remain in the body for 10 years. A copper IUD is not recommended for women who may be pregnant, have pelvic infections, or had uterine perforations during previous IUD insertions. It also is not recommended for women who have cervical cancer or cancer of the uterus, unexplained vaginal bleeding, or pelvic tuberculosis.

1. **Vasectomy;** is a surgical procedure that cuts, closes, or blocks the vas deferens This procedure blocks the path between the testes and the urethra  The sperm cannot leave the testes and cannot reach the egg. It can take as long as 3 months for the procedure to be fully effective. A backup method of contraception is used until tests confirm that there is no sperm in the semen.
2. **Emergency contraceptive pills (ECPs)**;are hormonal pills, taken either as a single dose or two doses 12 hours apart, that are intended for use in the event of unprotected intercourse. If taken prior to ovulation, the pills can delay or inhibit ovulation for at least 5 days to allow the sperm to become inactive. They also cause thickening of cervical mucus and may interfere with sperm function. ECPs should be taken as soon as possible after semen exposure and should not be used as a regular contraceptive method. Pregnancy can occur if the pills are taken after ovulation or if the woman has unprotected sex in the same cycle.