Chapter 11
The Nurse's Role
in Women's
Health Care
Niomi Quinteros,
BSN, RN



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Family Planning

Influenced by:

- Cultural practices
- Religious beliefs
- Personal preference
- Cost
- Knowledge of methods
- Laws of human rights



Contraception

- Also known as birth control
- Does not always prevent pregnancy
- May fail because the method is ineffective or the user is using the method inappropriately

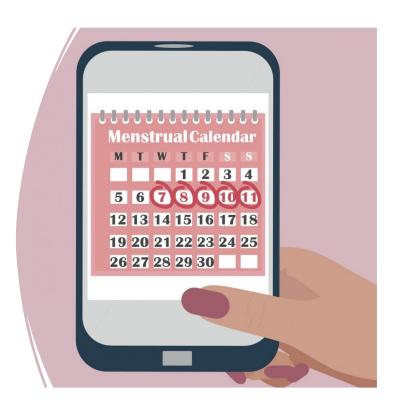


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Natural Family Planning – Fertility Awareness

Involves learning to identify the signs and symptoms associated with ovulation

- Basal Body Temperature
- Cervical Mucous
- Calendar (Rhythm) Method



Temporary Contraception

Reversible contraception

- Abstinence
- Hormonal Contraceptives
- Barrier Methods







Hormonal Contraceptives

- Prevent ovulation
- Make the cervical mucus thick and resistant to sperm
- Make the uterine endometrium less hospitable for a fertilized ovum
- Do not protect against STI's
 - Oral contraceptives
 - · Hormone implants
 - Medroxyprogesterone acetate (Depo-Provera)
 - Intrauterine devices
 - · Transdermal patch
 - · Vaginal ring



Oral Contraceptives

- "The Pill" is popular, highly effective, and reversible
- Contains either combined hormones (estrogen and progestin) or progestin alone
- Requires a prescription
- Monthly contraception
- Extended dose contraception



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Oral Contraceptives

Side Effects

- Nausea
- Headache
- Breast tenderness
- Weight gain
- Spotting
- Amenorrhea

Contraindications

- Thromboembolic disorder (blood clots)
- Cerebrovascular accident or heart disease
- Estrogen dependent cancer or breast cancer
- Smoking more than 15 cigarettes a day for women older than 35
- Impaired liver function
- · Confirmed or possible pregnancy
- · Undiagnosed vaginal bleeding

Oral Contraceptives

Nursing Care

- Teaching
 - How to take the pill
 - What to do if a dose is missed or if she decides to stop using it and does not want to get pregnant
 - Common side effects and signs/symptoms that should be reported promptly
 - Backup contraceptive methods
 - Supplemental barrier methods to use to reduce the risk of STI's
 - Antibiotics can decrease the effectiveness

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Hormone Implants

- Implanon: A single rod that is placed under the skin of the upper, nondominant arm
- Provides contraception for 3 years
- · Does not affect bone mineral density
- · Can be used during lactation
- · Rapid return to fertility after removal
- · Removed in the outpatient clinic



Medroxyprogesterone Acetate (Depo-Provera)

- Injectable form of slow releasing progestin given every 3 months
- Provides 3 months of highly effective contraception
- Fertility returns about 1 year after stopping the injections
- Does not protect against STI's



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Medroxyprogesterone Acetate (Depo-Provera)

Side Effects

- Menstrual irregularities
- Breakthrough bleeding
- Amenorrhea

Nursing Care

- Teach side effects and problems to report
- Importance of continued injections to prevent pregnancy
- Back up contraceptive used if injections are stopped or delayed

Intrauterine Devices

IUD Insertion

- · Inserted by a healthcare provider
- · Requires a prescription
- ParaGard
 - · Does not contain hormones
 - · Effective for up to 12 years
 - Impedes sperm transport
- Mirena
 - · Contains hormones
 - · Effective for 3 to 6 years
 - Thickens cervical mucus to impede the viability of sperm
 - Can sometimes prevent ovulation



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Intrauterine Devices

Side Effects

- Cramping
- Bleeding/irregular
- Dysmenorrhea

Nursing Care

- · Teach side effects
- Instruct how to feel for strings to verify that it is in place
- Report signs and symptoms of infection
 - Fever
 - Pain
 - Change in vaginal discharge: does not protect against STI's
- Severe abdominal pain
 - · Increased risk of ectopic pregnancy

Transdermal Patch

- Ortho-Evra
- Transdermal adhesive patch
- Contains hormones
- Applied once a week for 3 weeks, followed by 1 week patch free

Vaginal Ring

Vaginal Ring

- Nuva-Ring
- Flexible, one size vaginal ring
- Contains hormones
- Worn in the vagina for 3 weeks and removed for 1 week



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Barrier Methods

- Block the entrance of semen into the woman's cervix
- · Avoid the use of systemic hormones
- · Some offer protection against STI's
- Often chosen as back up methods
 - · Diaphragm and cervical cap
 - · Vaginal sponge
 - · Male condom
 - · Female condom
 - Spermicides





Diaphragm and Cervical Cap

Diaphragm and Caps

- Rubber domes that fit over the cervix
- Reusable
- · Used with spermicides to kill sperm
- Fitted by a healthcare provider
- Check for weak spots or pinholes before insertion
- May insert several hours before intercourse and remain in place for at least 6 hours after, but not more than 24 hours
- Must be refitted yearly and after birth, abortion, surgery, or a weight change of 10 pound or more

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Vaginal Sponge

- Soft, concave sponge
- Contains spermicide
- Loop to facilitate removal
- Can be left in place for up to 24 hours after intercourse
- Fitted by a healthcare provider

Diaphragm, Cervical Cap and Vaginal Sponge

Side Effects

- Vaginal dryness
- Vaginal irritation
- Pressure on bladder may increase risk of urinary tract infection
- Allergies to latex or spermicides

 not good candidates

Nursing Care

Teach about

 Teach about the used of reapplication of spermicides for repeat intercourse. Most only effective for no more than 1 hour

Report

- Report sensitivity to product
 - · Irritation or itching

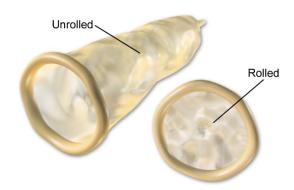
Report

- Report signs and symptoms of infection
- Uterine: pain, foul-smelling drainage, fever
- Urinary tract: fever, pain, burning with urination, urgency, frequency

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Male Condom

- Sheaths of thin latex, polyurethane, or natural membrane (skin)
- Collect semen before, during, and after ejaculation
- Various styles, some come with or without spermicides
- · Single use
- · Over the counter
- Latex condoms provide some protection from STI's, natural membrane condoms do not prevent passage of a virus
- · Nurses education to prevent condom mistakes



Birth Control Condom



Common Condom Mistakes

- Allow the penis to lose erection while in the vagina
- Opening the condom package with teeth or a sharp object can tear the condom
- · Unrolling the condom before applying
- · Using out of date condoms
- Using baby oil, cold cream, vegetable oil, or petroleum jelly to lubricate
- · Reusing the condom
- · Storing condoms in the wallet
- Not leaving space between the tip of the penis and condom



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Female Condom

- Two flexible rings, one fits inside the vagina and one remains outside
- · Polyurethane sheath
- Prelubricated
- Single use
- · Over the counter

Female Condom



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Spermicides

- Foams, creams, jellies, films, and suppository capsules
- Over the counter
- Neutralize vaginal secretions, destroy sperm, and block entrance into the vagina
- Films and suppositories must melt before they are effective, takes about 15 minutes
- · Most only effective for no more than 1 hour
- · Reapplication needed for repeated coitus
- No douching for at least 6 to 8 hours after intercourse
- · Can cause irritation

Emergency Contraception

- "Morning after pill" or Plan B used to prevent pregnancy after unprotected sexual intercourse
 - 1 dose pill available in pharmacies without a prescription
 - Most effective if taken within 72 hours after unprotected intercourse but may be effective up to 120 hours after
 - · May not be as effective in women weighing over 165 pounds
- Ella
 - Prescription, taken within 5 days to 120 hours after unprotected intercourse
- Copper IUD
 - Placement within 5 days of unprotected intercourse

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Unreliable Contraceptive Methods

- Withdrawal
- Douching
- Breastfeeding



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Permanent Contraception

Male Sterilization

- Vasectomy
- Sterility is not immediate, back up birth control used for about 1 to 3 months after
- Will still have erections, ejaculation, and pleasure with intercourse
- Outpatient surgery takes about 20 minutes
- Complications: Bleeding, suture separation, and infection

Female Sterilization

- Tubal ligation
- Blocking or ligating the fallopian tubes
- Minilaparotomy "Band-Aid surgery" done postpartum
- Laparoscopic surgery



A-

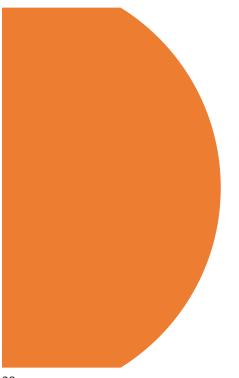
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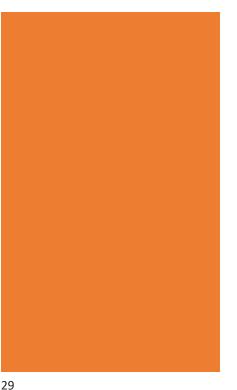
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When teaching about the use of tampons, the nurse should emphasize replacing them at least every 4 hours to prevent:

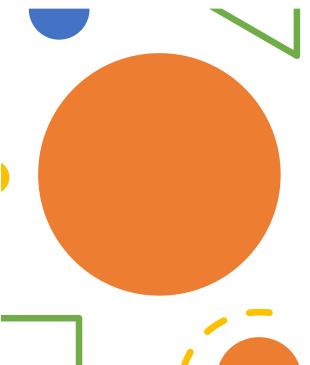
- A. Pelvic inflammatory disease
- B. Vasomotor symptoms
- C. STIs
- D. Toxic shock syndrome

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Which woman should not take oral contraceptives?

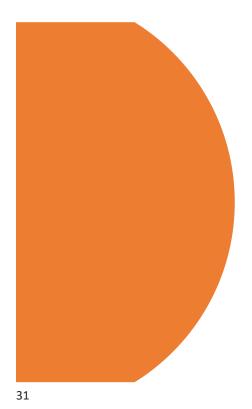
- A. A woman who has multiple sexual partners
- B. A 38-year old woman who smokes a pack of cigarettes daily
- C. A 19-year old woman who is formulafeeding her 2-month old baby
- D. A woman who is being discharged after a spontaneous abortion



Choose the correct client teaching about the IUD.

- A. You should not use this contraception if you smoke or are older than age 35
- B. Check for the strings weekly for the first 4 weeks, then monthly
- C. Do not use tampons when you have your menstrual period
- D. Use another form of contraception for the first month after insertion

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When teaching a woman, the cervical mucus method to identify ovulation, the nurse teaches her that the normal character of the mucus near ovulation is:

- A. Thin and slippery
- B. Yellowish with a distinct odor
- C. Cloudy and sticky
- D. Thick, sticky, and clear