



"The Pill"

The birth control pill is used by over 10 million women in the US today and about 4 million of those are under age 25. The Pill consists of a combination of two types of artificial hormones called estrogens and progestins. It works by inhibiting ovulation and sperm transport and by changing the lining of the inside of a woman's uterus (called the endometrium) so that if the woman does conceive she will often have an early abortion.

Ethical side effects: It is estimated that women experience at least one very early abortion for every year that they are on the Pill. Both pro-abortion and pro-life groups acknowledge that the Pill causes early abortions.³

Medical side effects: The birth control pill increases the risk of breast cancer by over 40% if it is taken before a woman delivers her first baby. This risk increases by 70% if the Pill is used for four or more years before the woman's first child is born. Other side effects that women have experienced include the development of high blood pressure, blood clots, stroke, heart attack, depression, weight gain, migraine, dark spots on the skin and difficulty with breast-feeding. Diabetics who take oral contraceptives may note increased sugar levels. Some women who stop taking the Pill do not have a return of their fertility (menstrual cycles) for a year or longer. Although the Pill decreases ovarian and some uterine cancers, it increases breast, liver, and cervical cancer. At least three studies have noted that the AIDS virus is transmitted more easily to women who are taking the Pill and whose partner(s) has the HIV virus. The cost of using the Pill for five years is over \$1,000.

"The Shot" and Norplant

Commonly known as "the shot," Depo-Provera, a long acting progestin hormone, is injected into a woman's muscle every three months. It works by decreasing ovulation, by inhibiting sperm transport and by changing the lining of a woman's uterus. Norplant is another progestin that is placed into silastic (rubber-like) tubes and placed under the skin of a woman and left there for up to five years.

Ethical side effects: By changing the lining of the uterus, Norplant and Depo-Provera both can cause an early abortion when conception does occur. Women who use Norplant will probably experience more than one abortion each year since the average woman ovulates in more than 40% of her cycles while using Norplant. Depo-Provera may theoretically cause just as many abortions as Norplant since it is also a type of progestin.

Medical side effects: The results of two major world studies have shown that women who take Depo-Provera for two years or more before age 25 have at least a 190% increased risk of developing breast cancer. In addition, Depo-Provera may reduce a woman's bone density, and worsen a woman's cholesterol level. One study found that women who had received injectable progestins (i.e., usually Depo-Provera or norethisterone enanthate) for at least five years and who had used them at least five years prior, suffered a 430% increased risk of developing cervical cancer. Several studies have shown that women who receive injectable progestins have a much higher rate of contracting the AIDS virus if their partner is infected, with one study showing a 240% increased risk. Norplant, which was developed later than Depo-Provera, has received less scrutiny, but may carry just as high a risk as Depo-Provera. In addition, over 50,000 women have participated in law suits against the manufacturer of Norplant, citing complaints of irregular bleeding, scarring, painful muscles, and headaches.¹³

Other Hormonal Contraceptives

The same artificial hormones used in the Pill, Depo-Provera, and Norplant are packaged in a variety of other delivery systems: the Patch, the "Morning after Pill," the monthly injection Lunelle, hormone impregnated IUDs and vaginal inserts, and others. More are in development. Most are so new that their side effects have not been well researched. They use the same chemicals as the Pill and can be expected to have generally the same effects. All the hormonal contraceptives can also cause extended periods of infertility after they are discontinued.

Barrier Methods:

The Condom and the Diaphragm

The condom has a failure rate that is estimated to be between 10-30%. There are several reasons for this such as breakage or slippage during use, defective condoms that have been damaged or poorly manufactured in the factory, and cracked condoms caused by storage in a hot or very cold place.

Medical side effects: The condom does not adequately stop the transmission of the AIDS virus: CM Rowland, Ph.D., editor of the journal Rubber Chemistry and Technology, tells us that electron micrographs (pictures taken with a very powerful microscope) reveal voids (holes) in the condom that are up to 50 times bigger than the HIV particle. The analogy would be that of throwing a marble at a tennis court fence and expecting it to stop the marble from going through.

The diaphragm is a barrier method of birth control so it theoretically does not cause early abortion. At least one study has noted that women who use barrier methods such as the diaphragm or condom, or the withdrawal method, had a 137% increased risk of developing preeclampsia in future pregnancies.

Preeclampsia, a complication occurring in some pregnant women, consists of a syndrome of high blood pressure, fluid retention, and kidney damage, which may eventually lead to prolonged seizures and/or coma. It is theorized that exposure to the male's sperm has a protective role against preeclampsia.

Spermicides

Frequently, couples will use a spermicide in conjunction with their barrier method. A spermicide is an agent that is designed to kill the male's sperm and is often sold as a gel or as an ingredient in the vaginal sponge. Toxic Shock Syndrome has been associated with the spermicide sponge.¹⁸ One researcher has noted that couples who have used certain spermicides within a month of conception have experienced a doubling in the rate of birth defects as well as a doubling of the rate of miscarriage.

The IUD (Intrauterine Device)

Most of the information regarding the IUD is taken from the 1997 PDR 20 (Physician's Desk Reference)]. This is a coil-like device made of hard plastic which may also contain copper. A doctor inserts it into a woman's uterus. It works by irritating the lining of the uterus and obstructing sperm transport. When conception occurs in spite of this, it has a secondary function of preventing implantation, thus causing an early abortion.²¹ Other side effects include uterine perforation which may lead to a hysterectomy, and infection, such as a pelvic or tubo-ovarian abscess. Use of all IUDs has been associated with an increased incidence of PID (Pelvic Inflammatory Disease). According to Rossing and Daling, two prominent researchers, women who had previously used an IUD for three or more years were more than twice as likely as women who had never used an IUD to have a tubal pregnancy (adjusted relative risk = 2.5, 95% confidence interval = 1.5-4.3). Among these long-term users of an IUD, risk of ectopic pregnancy remained elevated for many years after the device was removed. [An ectopic pregnancy is one in which the unborn child implants himself/ herself in a location other than in the mother's uterus, usually in the fallopian tube.] Ectopic pregnancy remains the leading cause of maternal death in the United States. In addition the IUD may cause back aches, cramping, dyspareunia (painful intercourse), dysmenorrhea (painful menstrual cycles), and infertility. Since women who have an IUD in place experience a number of early abortions, they theoretically are at increased risk for developing breast cancer, since abortion has been associated with an increased risk of breast cancer.

"Permanent" Sterilization:

Tubal Ligation and Vasectomy

Tubal ligation, the "tying off" or cutting of a woman's fallopian tubes, does not always prevent pregnancy. When pregnancy does occur, it is associated with a much higher incidence of ectopic pregnancy, which, as was noted, is the leading cause of death in pregnant women. In addition, women who undergo the procedure may experience complications from the anesthesia or from the laparoscopic technique. Complications of laparoscopy include: bladder puncture, bleeding, and even cardiac arrest after inflation of the abdomen with carbon dioxide. In addition, some women who have undergone a tubal ligation experience a syndrome of intermittent vaginal bleeding associated with severe cramping pain in the lower abdomen.

About 50% of men who undergo a vasectomy will develop anti-sperm antibodies. In essence, their bodies will come to recognize their own sperm as "the enemy." This may have far-reaching complications and could theoretically lead to a higher incidence of autoimmune disease. In addition, several studies have noted that men who undergo a vasectomy have a higher incidence of developing prostate cancer especially 15-20 years after their vasectomy although a recent large study did not find a link. In addition, Giovannucci noted that men who died from their prostate cancer had a trend of having undergone vasectomy.

Wise Options

The best option before marriage is abstinence. The obvious benefits include greater self-respect, freedom from the risk of venereal disease especially AIDS, as well as monetary savings and no chance of a surprise pregnancy. Within marriage it should be noted that an openness towards having children yields specific medical benefits. Having more children reduces the risk of breast cancer, some uterine cancers, and ovarian cancer dramatically.

NFP: Natural Family Planning

Natural Family Planning is a totally natural method by which couples can manage their fertility. In NFP a woman determines when she is either fertile or infertile by observing the consistency of her cervical mucus. The WHO (World Health Organization) has performed several large-scale trials that have had a "failure rate" of between 0.3 and 3%, which is as good as any artificial form of birth control. One very large trial performed on about 20,000 Indian women showed a failure rate of less than 0.3%.

Some obvious benefits of NFP are that it is free of cost and there is no increased risk of cancer. Couples who use NFP have a divorce rate that is less than 53__far lower than the national rate of about 50%.