# Family Planning and the Potential Impact on Breastfeeding

Breastfeeding Curriculum, updated 2021

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# Lactational Amenorrhea Method (LAM) Algorithm

Lactational Amenorrhea Method (LAM) is temporary postnatal infertility when a woman is amenorrheic (not menstruating). What are the three questions that providers want postnatal patients to ask themselves to see if LAM is an effective option?

Question 1

Question 2

Question 3



## Lactational Amenorrhea Method (LAM) Algorithm

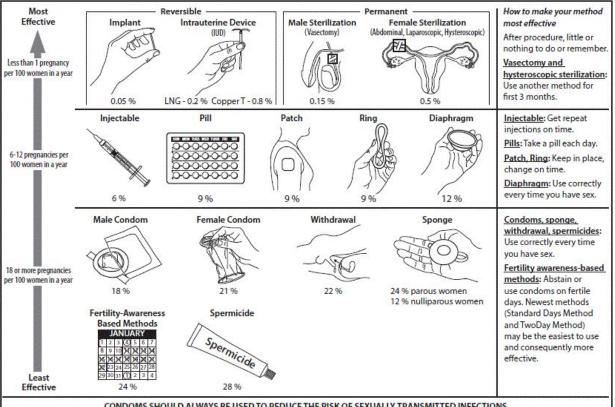
What are the three questions that providers want postnatal patients to ask themselves to see if LAM is an effective option? Begin a method Question 1: Have your menses returned? Yes of contraception besides LAM and No maintain Question 2: Are you supplementing regularly or breastfeeding Yes allowing long periods without breastfeeding? for infant health and nutrition. Question 3: Is your baby more than 6 months old? Yes No There is only a 1-2% chance of pregnancy. No If any of the 3 questions additional contraception necessary at this time. becomes a YES Breastleeding Curriculum Source: American College of Nurse-Midwives https://pdf.usaid.gov/pdf\_docs/PNACC294.pdf

# Contraception for Those Breastfeeding

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#### FIGURE. Effectiveness of family planning methods\*



CONDOMS SHOULD ALWAYS BE USED TO REDUCE THE RISK OF SEXUALLY TRANSMITTED INFECTIONS.

Other Methods of Contraception

Lactational Amenorrhea Method: LAM is a highly effective, temporary method of contraception.

Emergency Contraception: Emergency contraceptive pills or a copper IUD after unprotected intercourse substantially reduces risk of pregnancy.



### Contraception Options for Breastfeeding

Categorize each method based on the CDC medical eligibility criteria for a breastfeeding woman:

1=a condition for which there is no restriction for the use of the contraceptive method.

2=a condition for which the advantages of using the method generally outweigh the theoretical or proven risks.

3=a condition for which the theoretical or proven risks usually outweigh the advantages of using the method.

4=a condition that represents an unacceptable health risk if the contraceptive method is used.

	Days postpartum			
	<21	21 - <30	30 - 42	>42
Implants				
Depot medroxyprogesteron e acetate (DMPA)				
Progestin-only Pill (POP)				
Combined hormonal				

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contraceptive (CHCs)

<sup>\*</sup>with no other risk factors for Venous thromboembolism (VTE)

### Contraception Options for Breastfeeding-ANSWERS

Categorize each method based on the CDC medical eligibility criteria for a breastfeeding woman:

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3=a condition for which the theoretical or proven risks usually outweigh the advantages of using the method.

4=a condition that represents an unacceptable health risk if the contraceptive method is used.

	Days postpartum			
	<21	21 - <30	30 - 42	>42
Implants	2	2	1	1
Depot medroxyprogesteron e acetate (DMPA)	2	2	1	1
Progestin-only Pill (POP)	2	2	1	1
Combined hormonal contraceptive (CHCs)	4	3	2*	2

<sup>\*</sup>with no other risk factors for Venous thromboembolism (VTE)

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# Contraception Options for Breastfeeding

Categorize the following methods into the table based on the CDC medical eligibility criteria for a breastfeeding woman: Copper-containing Intrauterine device (Cu-IUD), Levonorgestrel-releasing intrauterine device (LNG-IUD)

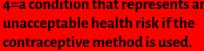
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4=a condition that represents an unacceptable health risk if the

	Postpartum Period (PP)				
	Immediate PP	<4 weeks PP	>4 weeks PP		
Cu-IUD					
LNG-IUD					



Source:

https://www.cdc.gov/reproductivehealth/contraception/pdf/summary-chart-us-medical-eligibility-criteria 508tagged.pdf



#### Contraception Options for Breastfeeding-ANSWERS

Categorize the following methods into the table based on the CDC medical eligibility criteria for a breastfeeding woman: Copper-containing Intrauterine device (Cu-IUD), Levonorgestrel-releasing intrauterine device (LNG-IUD)

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	Postpartum Period (PP)			
	Immediate PP	PP <4 weeks PP >4 we		
Cu-IUD	1	2	1	
LNG-IUD	1	2	1	



#### **Acknowledgement Slide**

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Contact <u>lactation@aap.org</u> to request PowerPoint version. Please note: altered content must be approved by AAP.

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