

Combined Vaginal Ring

Key Points for Providers and Clients

- **A woman places a flexible ring in her vagina.** She leaves it there at all times, every day and night for 3 weeks. Then, she removes the ring. Seven days later she inserts a new ring.
- **Start each new ring on time for greatest effectiveness.**
- **Bleeding changes are common but not harmful.** Typically, irregular bleeding for the first few months and then lighter and more regular bleeding.

What Is the Combined Vaginal Ring?

- A flexible ring that a woman places in her vagina.
- Continuously releases 2 hormones—a progestin and an estrogen, like the natural hormones progesterone and estrogen in a woman's body—from inside the ring. Hormones are absorbed through the wall of the vagina directly into the bloodstream.
- She leaves the ring in place for 3 weeks, then removes it for the fourth week. During this fourth week the woman will have monthly bleeding.
- Also called NuvaRing.
- Works primarily by preventing the release of eggs from the ovaries (ovulation).

How Effective?

Effectiveness depends on the user: Risk of pregnancy is greatest when a woman is late to start a new ring.

- As commonly used, about 7 pregnancies per 100 women using the combined vaginal ring over the first year. This means that 93 of every 100 women using the combined vaginal ring will not become pregnant.
- When no mistakes are made with use of the combined vaginal ring, less than 1 pregnancy per 100 women using the combined vaginal ring over the first year (3 per 1,000 women).

Return of fertility after ring use is stopped: No delay

Protection against sexually transmitted infections: None



Side Effects, Health Benefits, and Health Risks

Side Effects

Some users report the following:

- Changes in bleeding patterns,[†] including:
 - Lighter bleeding and fewer days of bleeding
 - Irregular bleeding
 - Infrequent bleeding
 - Prolonged bleeding
 - No monthly bleeding
- Headaches
- Irritation, redness, or inflammation of the vagina (vaginitis)
- White vaginal discharge



Known Health Benefits and Health Risks

Long-term studies of the vaginal ring are limited, but researchers expect that its health benefits and risks are like those of combined oral contraceptives (see Combined Oral Contraceptives, Side Effects, Health Benefits, and Health Risks, p. 3). Evidence to date has not shown adverse effects.

Medical eligibility criteria, guidelines for when to start, and helping continuing users for the combined ring are the same as for combined oral contraceptives and the combined patch. See Chapter 1, Combined Oral Contraceptives, pp. 6, 11, and 19.

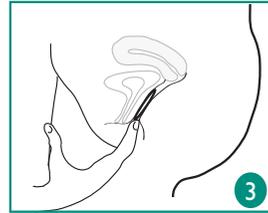
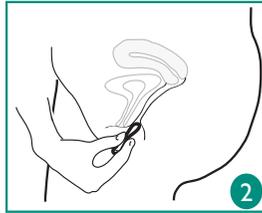
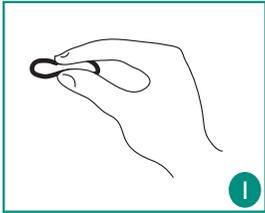
[†]For definitions of bleeding patterns, see “vaginal bleeding,” p. 407.

Providing the Combined Vaginal Ring

Explaining How to Use

Explain how to insert the ring

- The user can choose the position most comfortable for her—for example, standing with one leg up, squatting, or lying down.
- She should press opposite sides of the ring together and gently push the folded ring entirely inside the vagina.
- The exact position is not important, but inserting it deeply helps it to stay in place, and she is less likely to feel it. The muscles of the vagina naturally keep the ring in place.



Explain that the ring must be left in place for 3 weeks

- She should leave the ring in place at all times, every day and night for 3 weeks.
- She can take the ring out at the end of the third week and dispose of it in a waste receptacle.

She should take out the ring for the fourth week

- To remove the ring, she can hook her index finger inside it, or squeeze the ring between her index and middle fingers, and pull it out.
- She will probably have monthly bleeding this week.
- If she forgets and leaves the ring in for as long as a fourth week, no special action is needed.

Ring should never be left out for more than 48 hours until the fourth week

- The ring can be removed for sex, cleaning, or other reasons, although removing it is not necessary and is not recommended because some women forget to put it back within 48 hours.
- If the ring slips out, she should rinse it in clean water and immediately reinsert it.

Supporting the User

Instructions for Late Replacement or Removal

Left ring out for 48 hours or less during weeks 1 through 3?

- Put the ring back in as soon as possible.
- No need for a backup method.

Left ring out for more than 48 hours during weeks 1 or 2?

- Put the ring back in as soon as possible.
- Use a backup method* for the next 7 days.
- If the ring was left out for more than 48 hours in the first week and unprotected sex occurred in the previous 5 days, consider taking emergency contraceptive pills (see Emergency Contraceptive Pills, p. 49).

Left ring out for more than 48 hours during week 3?

- Put the ring back in as soon as possible.
- Use a backup method* for the next 7 days.
- Start a new ring at the end of the third week and skip the ring-free week. If unable to start the new ring at the end of the third week, use a backup method and keep using it through the first 7 days after starting a new ring.

Forgot to insert a new ring at beginning of the cycle?

- Insert a new ring as soon as possible. If late by only 1 or 2 days (48 hours or less)—that is, the ring is left out no longer than 9 days in a row—no need for a backup method.
- Keep the same ring removal day.
- If the new ring is inserted more than 2 days (more than 48 hours) late—that is, the ring is left out 10 days or more in a row—use a backup method for the first 7 days of ring use.
- Also, if unprotected sex occurred in the past 5 days, consider taking emergency contraceptive pills (see Emergency Contraceptive Pills, p. 49).

Kept ring in longer than 3 weeks?

- If the same ring is used for up to 28 days (4 weeks), no backup method is needed. She can take a ring-free week or start a new ring immediately.
- If the same ring is used for 28 to 35 days (more than 4 weeks but less than 5 weeks), insert a new ring and skip the ring-free week. No backup method is needed.

* Backup methods include abstinence, male and female condoms, spermicides, and withdrawal. Tell her that spermicides and withdrawal are the least effective contraceptive methods. If possible, give her condoms.