

Understanding the Traditional Contraceptive Methods

A B Kadam*

**Department of Botany, Research Centre and P.G. Department of Botany, Dada Patil Mahavidyalaya, Karjat, Ahmednagar, M.S., India*

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ABSTRACT

Traditional contraceptive methods have been used by our ancestors for a long time in child spacing before the advent of the modern contraceptive methods but even with the introduction of the modern methods some women prefer and are still using traditional contraceptive methods. This study aimed to assess the different methods of traditional contraceptives in child spacing and its association with family size among women of childbearing age.

Keywords: Traditional contraceptive, modern methods, women, childbearing age.

INTRODUCTION

Family planning has been defined as a conscious decision by individuals or couples to choose for themselves when to start having children. Successive pregnancies at close range can affect the mother's health and increase the chances of anemia and depletion of calcium which can cause weakness (7). Adequate child spacing and fewer children can help a woman take care of herself, and her children and work to improve family finances or even pursue higher education. It has been shown that parents who wait less than six months before conceiving again after pregnancy are more likely to have a premature birth (18).

Methods of contraception

Permanent contraceptive methods are very effective, but their use is on the decline, which may be linked to increased awareness and the adoption of long-term reversible contraceptives (18). Traditional methods barrier methods, fertility awareness methods, abstinence, and lactational amenorrhoea remain viable options despite their lower effectiveness compared to modern methods. Emergency contraception plays an important role in reducing the number of unwanted pregnancies (14).

Traditional methods of contraception

The traditional methods of contraception include the following-

1. Lactational Amenorrhea Method
2. Coitus Interruptus Withdrawal Method
3. Calendar Method Or Rhythm Method
4. Cervical Mucus Method
5. Abstinence
6. Herbal contraception method

The use of permanent contraception is decreasing as the availability and acceptance of long-term reversible contraceptives is increasing. Barrier methods, including male and female condoms and diaphragms, require

sustained motivation and proper use to be effective contraceptives (16). Condoms male and female offer good protection against sexually transmitted infections, but the use of an additional contraceptive method is often recommended to ensure good contraceptive effectiveness (5). Fertility awareness methods require an understanding of the female reproductive cycle and a commitment to monitor physical changes, signs, and symptoms on a daily basis. Women who wish to avoid unwanted pregnancy should receive information about emergency contraception, including how it works and where to access it (8).

Traditional contraceptive methods rely on your ability to effectively work out your menstrual chart each month. If you happen to misinterpret your signs, this method may fail to serve its purpose (10). Women who experience irregular periods cannot opt for this method. You must avoid intercourse for eight to 16 days in each menstrual cycle. Some couples may find this problematic (20). They demand a high level of organization, and it usually takes about six months to chalk out your fertile period. It helps if you keep a diary of your body signs to ensure accurate records (15). There may be a glitch in recording your body signs when you are tired, ill, or stressed. Such factors may result in the contraceptive effect being reduced. They do not protect against sexually transmitted diseases, such as chlamydia and HIV (19).

1. The Lactational Amenorrhoea Method

The effectiveness of this method lasts for about six months only. It does not offer any protection against sexually transmitted diseases. The lactational amenorrhoea method is based on three simultaneous conditions: (1) the baby is under 6 months; (2) the mother is still amenorrhoeic; and (3) she practices exclusive or quasi-exclusive breastfeeding on demand, day and night. Experiments with LAM extended to 9-12 months are ongoing (22).

The lactation amenorrhea method (LAM) is a way for breastfeeding to help prevent pregnancy temporarily. It must be used correctly to work. Lactation means your body is making breast milk and amenorrhea means you aren't having a monthly period. Breastfeeding hormones may stop your body from releasing eggs (12).

The lactational amenorrhea method (LAM) is a type of birth control that relies on hormones your body makes while breastfeeding. If you strictly meet the guidelines, LAM can be 98% effective in preventing pregnancy within the first 6 months after you give birth (21).

LAM is on the list of the World Health Organization's list of accepted, proven birth control methods. When followed exactly, it works as well as the pill and other contraceptives (17).

2. Coitus Interrupts Withdrawal Method

Coitus interrupts, also known as withdrawal, is a traditional family planning method in which the man completely removes his penis from the vagina, and away from the external genitalia of the female partner before he ejaculates (14).

The withdrawal method of contraception (coitus interrupts) happens when you take the penis out of the vagina and ejaculate outside the vagina to try to prevent pregnancy. The goal of the withdrawal method also called "pulling out" is to keep sperm from entering the vagina (3). Using the withdrawal method for birth control requires self-control. Even then, the withdrawal method isn't an especially effective form of birth control (9). Sperm may enter the vagina if withdrawal isn't properly timed or if pre-ejaculation fluid contains sperm (13). The withdrawal method doesn't offer protection from sexually transmitted infections.

The Coitus interrupts or withdrawal method is the oldest family planning method widely practiced. The male withdraws his penis before ejaculation, thereby preventing deposition of semen into the vagina. It is suitable for women who have infrequent intercourse or are waiting to start another method (11).

3. Calendar Method Or Rhythm Method

The rhythm method, also called the calendar method or the calendar rhythm method, is a form of natural family planning. To use the rhythm method, you track your menstrual history to predict when you'll ovulate (6). This helps you determine when you're most likely to conceive.

Two types of calendar methods: the Rhythm and the Standard Days method. These differ slightly but are mainly based on counting calendar days to determine your fertility. You then need to either avoid unprotected sex or use another form of birth control on days when you're fertile (8).

Calendar Rhythm Method

In this method, you use past menstrual cycles to estimate the time of your ovulation. When used on its own, this is the least reliable method of birth control. It should be avoided if your menstrual cycles are shorter than 26 days or longer than 32 days (17).

The fertility awareness method and the rhythm method are two different forms of nonhormonal birth control. Both involve tracking your natural cycle of fertility. The fertility

awareness method (FAM) is a natural family planning strategy that can be used to help prevent pregnancy (22).

It involves tracking your natural cycle of fertility and your menstrual cycle, developing a better awareness of your body, and using a variety of non-pharmaceutical methods to detect ovulation (23). The rhythm method is where your previous menstrual cycles are tracked on a calendar, and this information is used to predict future ovulation dates. FAM combines the rhythm method with even more attention to the body to better predict ovulation and prevent pregnancy (11).

In the rhythm method and in FAM, you abstain from sex (periodic abstinence) during your most fertile days. Alternately, you can use backup contraception on your fertile days. The effectiveness of FAM varies depending on the combination of tracking used. There are many ways to prevent pregnancy that are more effective than a natural method. They involve medication or medical intervention (20). FAM is one of the least reliable forms of pregnancy prevention. However it can be an appropriate choice of birth control for those who are diligent and self-aware.

4. Cervical Mucus Method

Also called the Billings Ovulation Method, the cervical mucus method is based on careful observation of mucus patterns during your menstrual cycle. Before ovulation, cervical secretions change creating an environment that helps sperm travel through the cervix, uterus and fallopian tubes to the egg (18).

The cervical mucus method lets you track your ovulation days based on the quality of the mucus around your cervix so that you know when you are most fertile, or most able to become pregnant (5). After the assessment, both partners can plan the best days to have or avoid sexual intercourse. The primary purpose of this natural method is to help couples maximize or minimize their chances of pregnancy. Keep in mind that the cervical mucus method is not entirely fool proof, though; almost a quarter of women who use it to determine their level of fertility get pregnant (7).

What Is the Cervical Mucus Method?

Cervical mucus is the fluid discharged from the lower part of the uterus. This fluid plays a significant role in successful egg formation. It protects the sperm when it tries to reach the egg in the woman's reproductive system (uterus). The amount and quality of cervical mucus changes throughout a woman's monthly cycle. These changes help determine the right time for the female to ovulate or release eggs (12).

Evaluating the ovulating days helps identify the time you are most likely to get pregnant. You can use this information to schedule the days you should have sex or avoid doing it. You can also use contraceptives to avoid getting pregnant. Using this method, you can continue having sex (25).

How Is the Cervical Mucus Collected?

The procedure starts with daily observation of cervical mucus. Should check the colour and consistency of the mucus on your underwear, and also check with your fingers and thumb.

After examining your mucus, you should note down its description regularly on a tracking chart. You can also use a tracking list or a fertility tracker to compare each day's results.

The typical changes in the cervical mucus include:

1. **Dry.** When the mucus usually discharges less, indicating a lack of fertility.
2. **Cloudy and sticky.** Intermediate fertility.
3. **Clear, slippery, and stretchy.** This is a sign that you are about to ovulate or are in the middle of ovulation and are most likely to become pregnant.

If you want to get pregnant, keep the fertile period in mind. On these days, your mucus is clear, slippery, and stretchy (9).

5. Abstinence

Abstinence is choosing not to have sex. Abstinence is the most effective form of birth control. If two people don't have sex, sperm can't fertilize an egg and there's no possibility of pregnancy (29).

Other forms of birth control:

1. Depend on barriers that prevent the sperm from reaching the egg (such as condoms or diaphragms)
2. Interfere with the menstrual cycle (as birth control pills do)

With abstinence, no barriers or pills are needed. Even people who have previously had sex can and do practice abstinence (27). A person who has been having sex can still choose abstinence to prevent pregnancy and sexually transmitted diseases (STDs) in the future (7).

How Well Does Abstinence Work?

Abstinence is the only form of birth control that always prevents pregnancy. Practicing abstinence ensures that a girl will not become pregnant because there is no chance for sperm to fertilize an egg. Many other birth control methods have high rates of success if used properly, but they can fail occasionally (2).

Does Abstinence Help Prevent STDs?

Abstinence protects people against STDs from vaginal sex. But STDs can also spread through oral-genital sex, anal sex, or even intimate skin-to-skin contact (for example, genital warts and herpes can spread this way) (2).

Complete abstinence is the only way to guarantee protection against STDs. This means avoiding all types of intimate genital contact. Someone practicing complete abstinence does not have any type of intimate sexual contact, including oral sex. So there is no risk of getting an STD (6).

Abstinence does not prevent HIV/AIDS, hepatitis B, and hepatitis C infections that can spread through nonsexual activities, like using contaminated needles for tattooing or injecting drugs or steroids (11).

Who Practices Abstinence?

Peer pressure and other things sometimes can make it hard for someone to decide to practice abstinence. But the truth is, many teens don't have sex. Abstinence also can give someone time to think about and grow an emotional connection (28). Having sex can change a relationship, and

it's completely normal to not feel ready for that or the complicated feelings it can bring (23).

6. Herbal contraception method

Certain plants are promoted as means of preventing conception. According to some reports, these herbs either stop the body from releasing eggs, stop sperm from fertilizing eggs, or stop fertilized eggs from implanting in the womb. Although herbal contraception is free of side effects and provides women with other methods of preventing conception, its effectiveness is still unknown. One of the main strategies for population management that appears to be effective is human fertility control (9). Hormonal and pharmacological approaches are among the many potential techniques that have been used to cause infertility. The traditional use of medicinal herbs and their extracts for a variety of ailments, including issues connected to fertility, has gained widespread recognition in society (10).

In light of the state of women's health, it is crucial to employ herbal antifertility medications that may impede a woman's normal reproductive process. Numerous plant extracts with diverse antifertility actions are being used in modern research. Many animal models have been used to investigate the contraceptive efficacy of various herbs. It has been discovered that these herbal contraceptives are inexpensive, readily accessible, and environmentally benign, even in remote locations (11). Compared to synthetic medications, they are less potential but more effective. It was investigated how these medications affected the reproductive and endocrine systems (9).

CONCLUSION

There was knowledge of Traditional contraceptive methods. Nowadays, traditional methods are the most commonly used. There was also no clear role for traditional contraceptive usage in determining family size. The study also revealed the poor utilization of modern contraceptive methods and a fair level of utilization of traditional contraceptive methods. It is recommended that the Traditional contraceptive methods should be studied more to know its benefits and health implications. Awareness should be raised about modern methods of family planning and more counselling on the use of contraceptives should be done in clinics as it contributes to allaying fear and anxiety toward the side effects.

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