



## Contraceptive Sponge

The sponge is a soft, disposable dome of sponge-like material made out of polyurethane. It contains spermicide, which is activated by moistening the sponge with about two tablespoons of clean water prior to use. It contains a stretchy loop to aid in removal. The sponge is designed to help prevent pregnancy.

### What do I need to know about using the sponge?

- The sponge is inserted into the vaginal canal anytime prior to intercourse, and can remain in place for 24 hours.
- The sponge sits in front of the cervix, to block and kill sperm.
- To insert the sponge, first wash your hands with soap and water, wet the sponge thoroughly with clean water, fold the sponge in half and squeeze it gently until it becomes sudsy-do not rinse these suds away. With the string loop dangling toward the bottom of the sponge, slide it along the back wall of the vagina, as far as it will go. The dimple side should face your cervix. You cannot push it in too far. Check to see that the sponge is in place by sliding your finger around the edge of the sponge to make sure your cervix is not exposed. If the sponge is not covering the cervix, simply push it into place gently with your finger.
- You do not need to insert additional spermicide for each act of intercourse, just keep the sponge in place.
- After the last act of intercourse, the sponge must remain in place for at least six hours, so that it can continue to block and kill sperm.
- Do not leave the sponge in the vaginal canal for more than 24-30 hours (the sponge becomes ineffective after 24 hours).
- The material of the sponge is designed to feel like the vaginal tissue. Your partner may not feel the sponge. If the sponge is felt, the partner usually does not mind the feeling.
- To remove the sponge, wash your hands with soap and water, reach a finger into the vaginal canal, find the loop and gently pull the sponge out. This may be easier in a squatting position, if the vaginal muscles are relaxed, or by bearing down. Check to be sure the sponge is intact, and then throw it away. If it is torn, remove all the pieces from the vagina.
- Throw the sponge away in the garbage, do not flush the sponge.
- Do not use the sponge if you are allergic to sulfites, during your menstrual period, if you have ever had toxic shock syndrome or within six weeks of giving birth.

### Effectiveness

The sponge is theoretically between 89-91% effective against pregnancy-if used correctly and consistently. Typical use rates are between 84-87%. The rates of effectiveness are lower for women who have already given birth (68-80%). Make sure you are using the sponge properly to get the best effectiveness rates. A condom used along with the sponge increases effectiveness closer to that of hormonal methods of birth control (97-99%). **The sponge does not protect against sexually transmitted diseases (STD's). Using a latex condom for each act of intercourse will significantly reduce this risk.**

### Additional information

Because the sponge is designed to feel like the vaginal tissues, some women may have difficulty removing the sponge. It is important to be familiar and comfortable with your reproductive anatomy before using the sponge.

Sometimes suction can cause the sponge to "stick" to the cervix. In this case, the suction or seal will need to be broken by using a finger to lift up one side of the sponge. Once free, you can then use the loop to remove the sponge normally. **If you have difficulty removing the sponge after following this information, and suggestions in the package insert, contact your healthcare provider.**

Toxic Shock Syndrome (TSS) is a rare bacteria-caused illness occurring mostly in menstruating women who use high absorbency tampons. Non-menstrual TSS risk is increased for women who use vaginal barrier contraceptive methods, although the incidence is much lower. Danger signs include:

- Sudden high fever
- Vomiting or diarrhea
- Dizziness, faintness or weakness
- Rash (similar to a sunburn)
- Sore throat, aching muscles and joints

If you are a registered University of Illinois student and you have questions or concerns, or need to make an appointment, please call: **Dial-A-Nurse at 333-2700**

If you are concerned about any difference in your treatment plan and the information in this handout, you are advised to contact your health care provider.

Visit the McKinley Health Center Web site at: <http://www.mckinley.uiuc.edu>