

C5.12 - DIAPHRAGM

Policy

This policy outlines the use of the diaphragm Caya®, a contoured cup made of silicone that fits inside the vagina and covers the cervix. It must be used with a contraceptive gel or cream (Nonoxonol-9) to achieve maximum effectiveness. This diaphragm requires a prescription. This is a one-size diaphragm, which fits most, but not all women. The one-size diaphragm does not require fitting. The Caya® should be replaced every 2 years.

Procedure

Mode of Action

The diaphragm fits inside the vagina over the cervix. The dome forms a barrier between the cervix and the semen, preventing sperm entry into the uterus. The spermicidal cream or jelly is used with the diaphragm for additional protection, killing any sperm that accidentally go past the rim of the diaphragm.

Effectiveness

- Theoretical effectiveness rate is 97%.
- Actual use effectiveness rate is 87%.

Advantages

- There are no serious side effects with this device.
- Insertion may be incorporated into foreplay.

Disadvantages

- Some individuals may consider the diaphragm “messy” or cumbersome.
- It must be used every time intercourse occurs.
- Warn client of the risks of Nonoxonol-9.
- Using a diaphragm and spermicide is associated with increased urinary tract infections and vaginal infection.
- Rare instances of toxic shock syndrome have been reported.
- Less effective at pregnancy prevention than other methods.

Contraindications

Strong Relative Contraindications

- Allergy to spermicide.

Relative Contraindications

- Complete uterine prolapse.
- Vesico-vaginal fistula.
- Recto-vaginal fistula.
- Severe cystocele or rectocele.
- Small “button” cervix.

- Severe retroversion of the uterus (this varies from client to client).
- Inability of client to learn correct insertion technique.
- History of toxic shock syndrome or vaginal colonization of staph aureus.
- Vaginal septum that has not been repaired/removed.

There are no absolute contraindications to diaphragm use.

Side Effects

- Possible slight discomfort (bladder pressure, uterine cramps) especially if inserted improperly.
 - Vaginal/vulvar irritation from spermicide.
 - Foul smelling, profuse vaginal discharge if the diaphragm is forgotten or left in place too long.
 - Toxic shock syndrome is rare but possible.
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Instructions to the Client

To Apply Contraceptive Jelly or Cream

Hold the diaphragm with dome down (like a cup). Squeeze the contraceptive gel from the tube into the dome, usually about a teaspoon; then spread a little around the rim of the diaphragm with your finger. The contraceptive jelly or cream remains active for about 6 hours. If you inserted the diaphragm more than two hours before intercourse, you need to add more contraceptive gel.

To Insert Diaphragm

With one hand, hold the diaphragm dome down (spermicide in the dome) and fold the diaphragm using the “grip dimples” on the sides. Spread the labia with the other hand, and insert the folded diaphragm deeply into the vaginal canal. The cervix should be inside the cup. This can be done standing with one foot propped up (on the edge of a bathtub), squatting or lying on your back. Push the diaphragm downward and back along the floor of the vagina as far as it will go. Then tuck the front rim up behind the pubic bone. If it is uncomfortable, it may be incorrectly placed and should be removed and reinserted.

To Check the Placement of the Diaphragm

When the diaphragm is correctly placed, the back rim of the device is below and behind the cervix, and the front edge of the rim is tucked up behind the pubic bone. Often it is not possible to feel the back rim. The client should check to be sure the cervix can be felt through the soft rubber dome of the diaphragm and that the edge of the dome is securely behind the public bone. The contraceptive gel (in the dome of the diaphragm) should be on the inside, next to the cervix.

To Remove the Diaphragm

The diaphragm must be **left in place for at least 6 hours after intercourse**, but not longer than 24 hours. Place the index finger behind the front rim of the diaphragm and pull down and out. Be careful not to puncture the diaphragm with a fingernail. If it is hard to hook a finger behind the rim, try a squatting position and push downward with the abdominal muscles. After use, the diaphragm should be washed with soap and water, rinsed and then dried. It should not be heated. It should be examined after each use for any holes or thin spots.

Instruct Client to Use the Diaphragm Each and Every Time They Have Intercourse

Each episode of intercourse requires a new application of jelly or cream. **DO NOT** remove or dislodge the diaphragm within a 6-hour timeframe. Use the contraceptive gel applicator to insert additional gel in front of the diaphragm if intercourse occurs more than once during the 6-hour timeframe. If additional spermicide is too messy, condoms may be used for subsequent intercourse. **DO NOT** remove the diaphragm, however, until six hours after last intercourse. For more information client can be directed to

<https://www.bedsider.org/birth-control/diaphragm> or

https://www.caya.us.com/wp-content/uploads/2023/09/IFU_caya_US_210923-EN.pdf

Instruct the Client That After Intercourse

The diaphragm should be left in place for 6 hours after intercourse. After the 6-hour minimum time--the diaphragm may be removed whenever it is convenient. If subsequent intercourse is anticipated, the individual may wash the diaphragm, apply new spermicide and re-insert it. It should be removed and washed at least once every 24 hours to avoid developing an unpleasant odor. But remember, stick to the 6-hour minimum after intercourse for leaving the diaphragm in place.

Care of the Diaphragm

Always follow care instructions that come with the diaphragm. After use, the diaphragm should be washed with mild soap and water, thoroughly rinsed, dried with a towel and then stored in its plastic container.

Inspect the Diaphragm

Each time it is used for defects or holes. Vaseline should not be used with the diaphragm since it may cause deterioration. If a lubricant is needed, K-Y jelly may be used without harming the diaphragm. The diaphragm should be stored away from heat. and will normally discolor (darker brown) over time.

Warn Client of the Risks of Nonoxonol-9

Possible increased risk of acquiring HIV, vaginal irritation among others.

Douching is Always Discouraged:

If an individual thinks they must douche, they should be instructed to wait six hours after intercourse or more to douche.

Fertility Return

There is no disruption to fertility. Given lower efficacy of diaphragm for contraception, please recommend users also take a prenatal vitamin or folic acid supplement.

Date Revised	September 2023
References	Providing Quality Family Planning Services Recommendations of CDC and the U.S. Office of Population Affairs (QFP) [2014] https://www.hhs.gov/opa/guidelines/clinical-guidelines/quality-family-planning/index.html
Additional Resources	Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use, 2020 https://www.cdc.gov/reproductivehealth/contraception/pdf/summary-chart-us-medical-eligibility-criteria_508tagged.pdf