



VAGINAL SPERMICIDE

DEFINITION	Vaginal spermicides are female barrier contraceptives which cover the cervix and inactivate sperm. A wide variety of vaginal spermicidal agents is available. Spermicides are often used in conjunction with other barrier methods. The contraceptive sponge is both a spermicide and a barrier. Recent evidence has indicated that vaginal spermicides containing nonoxynol-9 are not effective in preventing cervical gonorrhea, chlamydia, or HIV infection. Repeated and high-dose use of the spermicide nonoxynol-9 can cause vaginal and cervical irritation or abrasions, which may increase risk of HIV transmission.		
SUBJECTIVE	May include: 1. LMP. 2. Medical, sexual, and contraceptive use history update, as appropriate. 3. No history of allergies to any component of the vaginal spermicide.		
OBJECTIVE	May include: 1. Pelvic exam negative for abnormalities which would interfere with the use of spermicide.		
LABORATORY	N/A		
ASSESSMENT	Candidate for vaginal spermicide.		
PLAN	1. Review method and provide client education. 2. Offer advance prescription of emergency contraceptive pills.		
CLIENT EDUCATION	1. Provide client education handout(s). Review manufacturer's inserts. Review symptoms, complications, and danger signs. 2. Advise client that vaginal spermicides are available at the family planning clinic or OTC as a suppository, jelly, cream, foam, sponge and film (see table below).		
	Type	Onset of Action	Duration of Action
	Foam	Immediate	≥60 minutes
	Creams & Jellies - Single Use - Reusable Applicator - Reusable Applicator	Immediate	>60 minutes
		Immediate	>60 minutes
		Immediate	>60 minutes
	Suppositories	10-15 minutes	<60 minutes
Film	5-15 minutes	3 Hours; Use 1 film for every act of intercourse.	
	Spermicide		
	Nonoxynol-9		
	Nonoxynol-9		
	Nonoxynol-9		
	Octoxynol		
	Nonoxynol-9		
	Nonoxynol-9		

	Type	Onset of Action	Duration of Action	Spermicide
	Contraceptive sponge	Immediate	24 Hours (leave in place a minimum of 6 hours after intercourse)	Nonoxynol-9
CLIENT EDUCATION	3. Review safer sex education, as appropriate. 4. Epithelial disruption can be associated with spermicide dose, delivery system or frequency of use. Caution clients who use spermicide frequently (twice a day or more) as doing so can increase the risk of STD's and HIV if exposed. 5. Recommend that client RTC annually or PRN for problems.			
CONSULT / REFER TO PHYSICIAN	No specific need to refer to physician.			

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References:

1. Hatcher, R. A., Trussell, J., Nelson, A., et al (2011) Contraceptive Technology. (20th revised ed.). Pp. 391-405 New York: Ardent Media.