

Diaphragm Fitting – CON 11

DEFINITION

A diaphragm is a female barrier method that is used with a spermicide for contraception. Diaphragms are available by prescription only. The Caya diaphragm is a reusable silicone device molded with a circular nylon spring that comes in one size measuring 75 mm x 67 mm. The older Milex wide seal diaphragm is a dome shaped silicone device with a flexible rim in either an arching or Omniflex style ranging in sizes 60-95 mm.

SUBJECTIVE

May include:

1. LMP
2. Medical, sexual, and contraceptive use history update, as appropriate

Must exclude:

1. History of toxic shock syndrome (TSS)
2. History of allergy or adverse reaction to spermicide
3. History of delivery within the last 6 weeks

Must exclude:

1. Pelvic organ prolapse
2. Sensitivity to silicone
3. Women at High-risk for HIV acquisition and HIV (category 4 MEC)
4. HIV+ women using antiretrovirals (category 3 MEC)

OBJECTIVE

Must include:

1. Pelvic exam

LABORATORY

No specific laboratory needed

ASSESSMENT

Candidate for diaphragm

PLAN

1. If fitting an Omniflex diaphragm: fitting rings are necessary (fitting rings and diaphragms are available through the manufacturer or Cooper Surgical).
 - a. Estimate correct diaphragm size by measuring distance from posterior vaginal vault to the pubic arch. Insert index and middle finger into vagina until the middle finger reaches the posterior vault. With your thumb mark the point where the index finger touches the pubic bone. Place the diaphragm fitting ring rim on the tip of the middle finger, the opposite rim should lay just in front of your thumb.
 - b. Insert the diaphragm into the vagina with the dome side facing down. The diaphragm should rest snugly in the vagina without tension on the vaginal wall. The rim should be in contact with the lateral walls and posterior fornix. There should be space to insert one fingertip comfortably inside the pubic arch and the anterior edge of the diaphragm.
 - c. Choose the largest size that is comfortable for the patient. It will be necessary to try more than one size to ensure a proper fit.
 - d. Have patient bear down while diaphragm is in place and choose the largest size that does not dislodge or expel.
 - e. Have client demonstrate ability to properly insert and remove diaphragm.

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2. If fitting a Caya diaphragm: single use disposable "Test Fit" sample unit is needed (available through the company website or 1-800-850-1657).
 - a. Have the patient place the Caya sample unit and perform a bimanual exam to check fit and placement
 - b. Proper placement: Large dome should completely cover the cervix; the back rim should be past the cervix and pressed comfortably against the posterior fornix; there should be no buckling of the rim which would indicate the Caya may be too large; attempt to rotate the unit-there should be no spinning-this would indicate the Caya is too small; the front rim should tuck behind the symphysis pubis.
 - c. Caya is contraindicated if a patient was previously fit with a conventional diaphragm size 50-60mm or 85-90mm
3. If no fitting rings available:
 - a. perform bimanual exam and measure the distance between the tip of the middle finger of the examining hand when placed against the posterior vaginal fornix and the mark on the upper edge of the index finger where it touches the pubic arch.
 - b. the nearest 5 mm to this measurement is the size of the diaphragm.
 - c. The patient should RTC after purchasing this diaphragm to check the fit using the same maneuvers as outlined for checking the Caya diaphragm.

CLIENT EDUCATION

1. Provide client education handout(s). Review manufacturer's inserts. Review symptoms, complications, and danger signs.
2. Recommend checking the Omniflex wide seal diaphragm fit annually, after 10# weight gain or loss, and after pregnancy. Advise client to bring diaphragm to these visits.
3. The Caya diaphragm can be used for 2 years and is not impacted by weight or parity.
4. Diaphragms should not be used in the 6-week postpartum period.
5. Advise RTC with recurring bladder infections or yeast infections. Refitting with a smaller diaphragm may help if UTI's occur after initiating diaphragm use.
6. RTC with recurrent vaginal or vulvar irritation as this may indicate an allergy or sensitivity to the spermicide or diaphragm.
7. Review safer sex education, as appropriate.
8. Avoid petroleum-based and silicone lubricants.
9. Avoid diaphragm use during treatment with anti-fungal creams.
10. Diaphragm with spermicide can be placed 6 hours prior to sexual intercourse and must be left in place 6 hours after sexual intercourse. Do not leave in longer than 24 hours. (Spermicidal gel is only effective for 6 hours after placement. If the diaphragm is inserted for 6 hours or longer before intercourse, you must use an additional dose of spermicide.)
11. If additional acts of sexual intercourse occur add an additional applicator of spermicidal gel to the vagina, do not remove diaphragm to put additional gel in the dome.
12. Wash the diaphragm with a plain soap after use. Do not use talcum powder. Store in a clean dry container.
13. Offer ECP in advance if needed
14. Educate regarding s/s of toxic shock syndrome, including sudden high fever, chills, vomiting, muscle aches and sunburn like rash.
15. The diaphragm does NOT provide STI protection.

CONSULT / REFER TO PHYSICIAN

1. S/S of Toxic Shock Syndrome

REFERENCES

1. Hatcher RA, Trussell J, Nelson A, Cates W, Kowal D, Policar M. Contraceptive Technology. 20 edition. Atlanta GA: Ardent Media, Inc., 2015. Pp.403-406.1. (instructions for previous diaphragms are included in this edition).
2. Hatcher RA, Nelson A, Trussell J, Cwiak C, Cason P, Policar MS, Edelman A, Aiken ARA, Marrazzo J, Kowel D, eds. Contraceptive Technology. 21 edition. New York, NY: Ayer Company Publishers, Inc., 2018. pp. 379-383.
3. Caya.us.com this does not connect to a site; the site is still there <https://www.caya.us.com>

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