

COMBINED CONTRACEPTIVES (THE PILL)

Background Information

Combined oral contraceptives or birth control pills (“the Pill”) are used by people with a uterus to prevent pregnancy, to regulate the menstrual cycle, and ease some of its symptoms. Combined birth control pills (containing estrogen and progesterone) work mainly by stopping ovulation – if there is no egg to meet with sperm, pregnancy cannot occur. Reversible effects on the cervical mucus and uterine lining also discourage pregnancy. Average effectiveness of the birth control pill is about 91%. The effectiveness can be increased with correct and consistent use.

Instructions for Use

Birth control pills work best when taken the same time each day. Try to associate taking your pill with another activity that you do approximately the same time each day (like going to bed or brushing your teeth) or try putting an alarm reminder on your cell phone. This will maintain a steady level of hormones in your system to protect you against break-through bleeding and possible pregnancy. **IF YOU TAKE ELLA FOR EMERGENCY CONTRACEPTION, WAIT 5 DAYS TO START THE PILL. THE PILL WILL NOT BE EFFECTIVE FOR 7 DAYS AFTER YOU START IT.** If you have taken Plan B, it does not interact with the pill like Ella, so you can go ahead and start taking the pill following the instructions below.

Your clinician will suggest one of two ways to start the birth control pill:

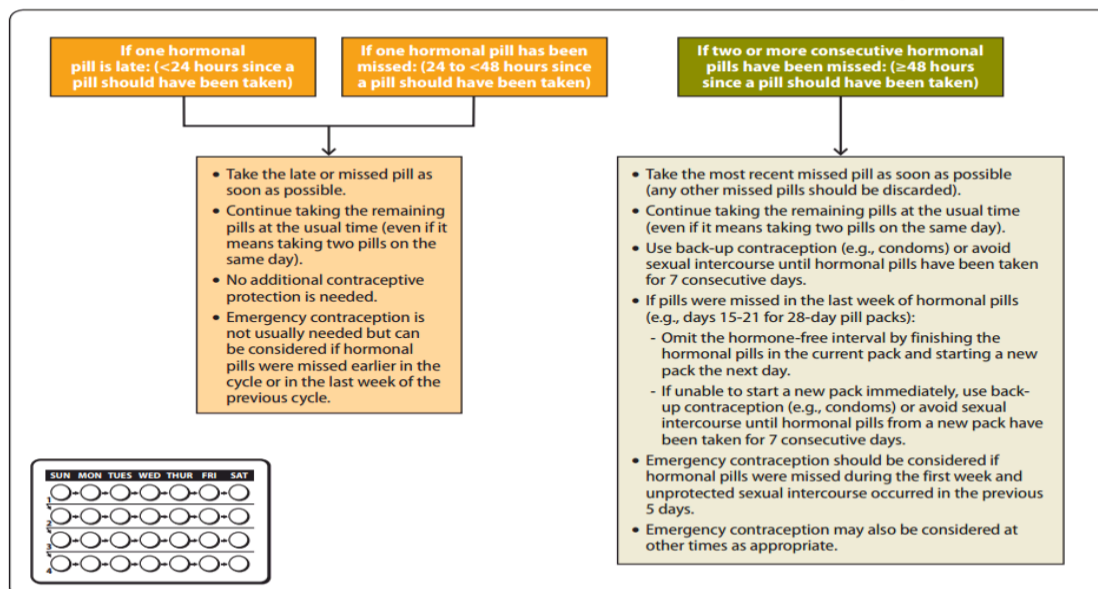
Quickstart: Take the first pill the day you visit the clinician. Unless you take the pill within the first 5 days of your period, use a back-up method (such as condoms) for 7 days. Do not expect to get your period until you finish the active pills.

First day start: Take the first pill the first day of your next period. Be sure to have some other method to use until you start your birth control pills.

Triphasic Pill: If you are using triphasic birth control pills, (each group of active pills contain a different combination of estrogen and/or progesterone) please read the package insert so that you are clear about the significance of the different pill colors and the need to take these pills in a specific order.

Continuous Cycling: Refers to continuous use of the Pill for 2 or more cycles (2 or more pill packs). For example, a 21 day cycle of hormone pills are taken, followed by another 21 day cycle of hormone pills. The 7 days of inactive pills are omitted. Continuous cycling has been used for many years in clients with various medical problems, such as endometriosis or just to reduce the frequency of menstrual periods. Side effects may include irregular bleeding. Method not approved for clients using triphasic pills.

Recommended Actions After Late or Missed Combined Oral Contraceptives



Source: For the full recommendations, see the US Selected Practice Recommendations for Contraceptive Use, 2013 (<http://www.cdc.gov/mmwr/pdf/rr/r16205.pdf>).

Answers to the most common questions about the Pill

What should I do if I am spotting or having my period (withdrawal bleeding) when I don't expect it?

- Keep using your pills. Consult a Clinic Advice Nurse **643-7197**.

If I have only a drop of blood or a brown smudge on my tampon, pad, or underwear, does it count as a period (withdrawal bleeding)?

- Yes, menstrual periods while you are on the Pill may be very short and have little bleeding; bleeding varies from brown to bright red in color; with some pills individuals typically have light or no menstrual period.

If I miss a period (withdrawal bleeding) but I have not missed any pills, do I need to worry that I may be pregnant?

- Many people who take birth control pills miss one withdrawal bleeding (period) every now and then. You probably don't have to worry, but if you are concerned or have missed several periods in a row, consult a Clinic Advice Nurse **643-7197**.

If I miss a period (withdrawal bleeding) and I forgot one or more pills, what should I do?

- Consult a Clinic Advice Nurse **643-7197** or see above link.

What should I do if I become ill and have vomiting and diarrhea?

- If possible, keep taking your pills. Use a back-up method beginning on the first day of vomiting/diarrhea and throughout your pill pack.

Temporary Minor Discomforts

Some people experience a variety of minor discomforts when starting the Pill. Some of these symptoms may be nausea, breakthrough bleeding, breast enlargement or tenderness, slight weight gain, mood changes, and changes in libido. Most of these symptoms will disappear within the first three cycles of the Pill. Acne, though often improved in the long run, may worsen for a couple of months when you first start the Pill. If any of your symptoms are severe or persist, call a Clinic Advice Nurse at 643-7197.

The Pill Danger Signs

<p>Abdominal pain (severe) Chest pain (severe)/shortness of breath/coughing up blood Headaches (severe)/dizziness/weakness/numbness Eye problems (vision loss or blurring)/speech problems Severe leg pain of calf or thigh</p>	<p>If you develop any of these symptoms:</p> <ul style="list-style-type: none"> • Call or immediately come to Urgent Care, 642-3188, or other emergency medical facility • Call 911 for ambulance in extreme emergency
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Major Pill Complications

The most serious risk of combined contraceptives, including the Pill, is the potential for cardiovascular complications: blood clots, stroke, hypertension, or heart attack. These side-effects are extremely rare and occur most often in people who smoke, who are over age 35, who have other health problems like hypertension, diabetes, heart disease, vascular disease, or blood clots, and those who have a family history of diabetes or heart attack under the age of 50. If you smoke, you may have an increased risk for developing major complications. Young, healthy, non-smoking people can use the Pill with very little risk of developing serious complications.

The Pill, Emergency Contraception (EC) and Other Drugs

If you need to use emergency contraception while using your birth control pills (had intercourse and didn't use a backup method during the first 7 days of first starting per the instructions or missed 2 or more pills) use Plan B or the generic equivalent (levonorgestrel) rather than ELLA (ulipristal) because ELLA can decrease the effectiveness of birth control pills and birth control pills reduce the effectiveness of ELLA.

The Pill may have adverse interactions with some other medications. In some cases contraceptive effectiveness is lowered. In a few cases another drug may reach a toxic level in combination with the Pill. Be sure to inform your clinician and pharmacist at each visit of any medications, including non-prescription drugs, which you are taking.

Always advise any clinician that you see for any medical problem, especially if admitted to a hospital or before surgery, that you are taking birth control pills.

The Pill doesn't protect against sexually transmitted infections

Even though you are using the Pill, seriously consider using condoms as well in order to protect each other from sexually transmitted infections e.g., herpes, chlamydia, syphilis, HIV, etc. Pap tests are recommended starting at age 21. See the UHS website for screening recommendations and scheduling an appointment. **See this link:**

<https://uhs.berkeley.edu/medical/primary-care/preventative-health-recommended-health-screening-exams-tests>