Oral Contraception

How do oral contraceptives (OCPs) or birth control pills work?
Birth control pills contain hormones that prevent ovulation thus preventing pregnancy. They also cause the mucus in the cervix or lower portion of the uterus to thicken making it hard for sperm to enter the uterus. The lining of the uterus thins, making it less likely that a fertilized egg could implant.

How effective are OCPs?
With typical use, about 8 in 100 women will become pregnant during the first year of using this method. When used perfectly, 1 in 100 women will become pregnant during the first year. To be effective at preventing pregnancy, the pill should be taken as close to the same time each day as possible.

What are the benefits of oral contraceptives other than pregnancy prevention?
- Acne is frequently improved with birth control pills.
- Menstrual cramping should be eliminated or greatly improved when using birth control pills.
- Menstrual bleeding should be regulated and decreased.
- Ovarian cysts should not form with birth control pills.
- Premenstrual symptoms are controlled.
- Calcium uptake by the bones is maintained for women who do not have regular periods.
- OCPs can help with PCOS and endometriosis symptoms.
- OCPs may decrease the risk of cancer of the uterus and ovary.

What are the risks of taking oral contraceptives?
- Deep vein thrombosis or clots
- Heart attack
- Stroke
- Liver disease
- Gallbladder disease
- High Blood Pressure

What are the warning signs of one of the problems listed above?

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Possible Condition</th>
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<tbody>
<tr>
<td>A=Abdominal Pain</td>
<td>Gallbladder Disease</td>
</tr>
<tr>
<td>C=Chest Pain or Shortness of breath</td>
<td>Blood Clot in lungs or heart attack</td>
</tr>
<tr>
<td>H=Headaches</td>
<td>Stroke or high BP</td>
</tr>
<tr>
<td>E=Eye Problems</td>
<td>Stroke or high BP</td>
</tr>
<tr>
<td>S=Severe Leg Pain</td>
<td>Blood clot in the leg</td>
</tr>
</tbody>
</table>

Who should not use OCPs?
- Women who have a strong family history of a blood clotting disorder or who know they have a disorder.
- Women who have migraine headaches with an aura which is a sign that the headache is starting.
- Women with high blood pressure.
- Women over the age of 35 who smoke.
- Women who have had cancer of the breast or uterus.
- Women who have unexplained vaginal bleeding between periods.
- Women who might be pregnant or breast feeding.
How should OCPs be started?

Method #1: Sunday Start

Start taking the first pill on the Sunday after your menstrual cycle begins. You may still be bleeding when you start the first pack of pills. If you start your period on Sunday, you may start the pill that day.

This method should make your menstrual cycle occur during the week and not on weekends.

This method requires the use of a back-up contraceptive such as condoms during the first 7 days of the pill pack.

Method #2: First Day Start

Start taking the first pill on the first day of your menstrual cycle.

Most pill packs are set up for a Sunday start. They all come with sticky lines on the package insert so that the day of the week can be changed on the pill pack so you can tell where you are throughout the cycle.

This method states that no back-up contraceptive is needed if the pill is started on the first day of the menstrual cycle.

How do I take the pill correctly?

- No matter which day you choose to start taking the pill, you will start each new pack of pills on the same day of the week as you started the first pack.
- Pick a time of day that you think you will be able to remember to take your pill. If you sleep late on weekends, make the time late enough so it can stay the same all week long.
- Take your pill within a 2 hour window, which is one hour before the time you choose to take it until one hour after the time you choose. This will make the pill more effective but will also greatly minimize breakthrough bleeding.
- If you don’t like the time you choose, it is probably best to change the time when you start a new pill pack.
- Set an alarm on your phone or put your pills with something that will serve as a reminder.

How are OCPs packaged?

- 21 day packs are all hormonal pills. There is a pill free week between cycles which allows for the menstrual cycle.
- 28 day packs have 21-24-26 hormonal pills with 2-4-7 placebo pills also allowing for the menstrual cycle.
- 3 month packs have 84 combination hormonal pills with either 7 placebo pills or 7 pills with decreased estrogen thus allowing for the menstrual cycle.
- Continuous regimen packs, without placebo pills, come in 28 day packs.
- Newer combinations may become available. Your health care provider will explain how your prescription is structured and what you can expect from it.

What are some side effects of OCPs?

- Weight gain is not a problem with the lower dose OCPs used now.
- Nausea is a problem for a few women. If the pill is taken with food or later in the evening, nausea is usually not a problem.
- Breakthrough bleeding or spotting may occur during the first few cycles even when pills are taken on time.
- Breast tenderness may occur during the first couple of cycles.
- Missed periods may occur especially if there is bleeding during the hormonal pills. Spotting due to missed pills may cause the lining to be shed earlier in the cycle. Missed periods are common with the lowest dose pills.

What should I do if I miss a pill?

- Take it as soon as you think of it.
- If you don’t remember until it is time to take the next one, take both of them at the same time.
- If you forget 3 pills, bleeding may occur just like normal menstrual bleeding.
- Treat the bleeding like a period and stop the pack you are taking.
- Restart a new pack on the Sunday after the bleeding.
- Keep the leftover pills in case you need them to complete another pack at some time in the future.
- Use a back-up method of contraception if pills are missed.
What causes breakthrough bleeding?

- Breakthrough bleeding is bleeding that occurs at times other than during the placebo pills.
- It can occur during the first several months of starting OCPs even with taking the pills on time. If it goes past the 3rd cycle, see your practitioner about changing pills.
- Breakthrough bleeding can occur when pills are missed or are not taken on time each day.
- It can be a sign of a sexually transmitted infection.
- Vomiting or diarrhea can make OCPs come through the GI tract faster than normal, decreasing absorption and effectiveness.
- Travel and stress can affect absorption also.

Do OCPs protect against sexually transmitted infections?

- OCPs do not protect against sexually transmitted infections.
- Use a female condom for the most protection possible short of abstinence. Male condoms do not cover all parts of the male anatomy.
- Make sure the condom is in place before there is any skin to skin contact to be sure you are protecting yourself.

What if I miss a period?

- If you have been taking your pills correctly and have not been on any interfering medications, continue your pill pack as directed. If you miss a second period, have a pregnancy test to be sure there is no chance of pregnancy. You may schedule a pregnancy test in the Women’s Clinic at no charge.
- Some of the lowest dose OCPs do not build up a lining in the uterus so there is nothing to shed as menstrual bleeding each month. This is not harmful and can be an advantage of OCPs. If you want to have a period each month, talk to your healthcare provider about changing your pills.

What if I want to change to another type of pills or to another method of birth control?

- If possible, stay on the pill until you talk with your healthcare provider. Get the new prescription and go smoothly from one pill to the next or from the pill to the new method.
- Normal menstrual cycles frequently take more than one month to be restored after stopping a pill.
- The risk of complications from taking the pill is present with each new start. Therefore, it is best to go from one method to another than to stop and restart.

Do I need to take the morning after pill or Plan B if I have sex without a condom while using OCPs?

- Not if you have been taking your OCPs correctly and consistently.
- You may take it if you have missed pills or started the pack late.
- Call and ask if you have a question about the need to take Plan B while on OCPs.

What medications interfere with OCPs?

- **Antibiotics:** There is some controversy as to whether antibiotics interfere with the effectiveness of oral contraceptives. Erring on the side of caution is probably the best strategy especially with the newer lower dose pills. If Antibiotics are used for a prolonged period of time or for a more severe infection, they may affect OCPs. Use a back-up method of contraception during the antibiotic and into the first week of the next pill pack to ensure effectiveness.
- **Anticonvulsants or Seizure Medications**
- **Antidepressants and antipsychotic drugs**
- **St. John’s Wort**
- Tell your practitioner and pharmacist what medications you are taking to ensure there are no interactions.