

COMBINED ORAL CONTRACEPTIVE (THE PILL) - FACT SHEET

THE COMBINED ORAL CONTRACEPTIVE

PILL (The Pill) is an oral contraceptive containing hormones. It is taken daily to prevent pregnancy.

WHAT IS THE PILL?

The Pill contains low doses of two hormones – oestrogen and progestogen. These are similar to the hormones naturally produced by the female body. There are many types of combined pills available. They differ in the level of hormones e.g. the type and level of the progestogen they contain.

HOW DOES THE PILL WORK?

The Pill works by:

- preventing ovulation (egg release from the ovary)
- thickening mucus in the cervix so sperm cannot enter the uterus (womb)
- changing the lining of the uterus, making it unsuitable for pregnancy

HOW EFFECTIVE IS THE PILL?

The Pill is 97-99% effective when taken correctly.

WHAT ARE THE ADVANTAGES OF THE PILL AS A METHOD OF CONTRACEPTION?

- highly effective method of contraception
- fertility returns soon after stopping
- predictable and regular bleeding pattern

WHAT ARE THE DISADVANTAGES OF THE PILL AS A METHOD OF CONTRACEPTION?

- easy to forget – needs to be taken on a daily basis
- medical review required each year for prescriptions
- some types of the Pill are expensive
- does not protect against sexually transmitted infections

WHAT ARE THE POSSIBLE HEALTH BENEFITS OF THE PILL?

- periods may be lighter, shorter and more regular, with less discomfort
- reduced risk of cancer of the ovary and uterus in women who have ever used the Pill
- helps manage heavy periods, painful periods, endometriosis, benign breast problems, recurrent ovarian cysts and premenstrual syndrome, can improve acne



Family Planning Tasmania
sexuality education & clinical services

WHO CAN TAKE THE PILL?

Most women can take the Pill, but you should **not** take it if:

- you have had a deep venous thrombosis (blood clot), stroke or heart attack
- you have severe liver problems
- you have migraine with aura (a migraine with visual disturbances starting before the headache)
- you have unusual bleeding from your vagina, that has not been diagnosed.
- you are breast feeding (you need to check on this)
- you have high blood pressure, diabetes, gall bladder disease, active liver disease, kidney disease, some blood problems, tuberculosis, severe depression, or you are on some other medications
- you have had cancer of the breast or cervix
- you are over **35** and **smoke**.

IF ANY OF THESE THINGS APPLY TO YOU, TALK IT OVER WITH YOUR DOCTOR.

CANCER RISK

Some studies have shown a slightly increased risk of breast cancer in women currently taking the Pill. However a more recent study found no increase in breast cancer in such women. It is important to discuss your individual concerns with your doctor.

WHAT DO I NEED TO KNOW ABOUT STARTING THE PILL?

Starting the Pill for the first time requires an assessment by a doctor and a prescription. This allows the doctor to assess your medical history and allows you to ask questions to ensure you feel confident in using the Pill.

Different brands of pills come in different types of packaging. Your health professional will explain starting the Pill with you, based on the particular Pill being prescribed for you, as the packages can look different.

KEY POINTS:

It is usual to start taking the first cycle of the Pill on the first day of a period. Starting with an **active pill** (not a sugar pill) between **Days 1 to 5** means that you are covered for contraception immediately. If you start the active pill after **Day 5** you **must** take 7 active pills before you are protected from pregnancy.

WHAT DO I NEED TO KNOW ABOUT THE ONGOING USE OF THE PILL?

The Pill needs to be taken at a regular time every day. It is easier to remember if you make it a part of your daily routine. Australian pill packets contain 28 pills made up of 21 hormone 'active' pills and seven 'inactive' (these are often called the sugar pills). A monthly bleed (a withdrawal bleed) occurs while taking the inactive pills and many women prefer to have this regular bleed. However if you do not want to have a withdrawal bleed you can safely take the hormone pills continuously. See your health professional for more information about this.

To renew your pill prescription you will need to see a doctor at least once a year.

CONTRACEPTION

The Pill may not be effective if:

- a pill is late or missed
- vomiting occurs within two to three hours of taking a pill
- you have severe diarrhoea
- medications are taken

Certain medications, including **antibiotics** may interfere with the effectiveness of the Pill. If you are prescribed any additional medication you may need to use extra precautions while taking it and for an extra 7 days after.

Some non-prescribed medications, such as St Johns Wort (or hypericum), can make the Pill less effective. Always check with the pharmacist. If you are concerned about any of the above situations, check with your doctor or health professional.

TIPS FOR PILL TAKERS

- Choose a time of day for pill taking that is easy to remember. You can link it to something else you do daily, like brushing your teeth.
- If you have any side effects, including irregular bleeding, keep taking the Pill and see your health practitioner.
- Stopping the Pill mid cycle may cause more bleeding and increase your risk of pregnancy.
- Never have more than the 7 day break from hormone pills.
- Make sure that you start taking hormone pills after 7 days of taking inactive pills.
- To make sure you're protected against both pregnancy and STIs, use the Pill + condom for best protection.

IF YOU MISS A PILL

If you are **less** than 24 hours late taking a pill, take it as soon as you remember, and then take the next one at the usual time. You will still be protected against getting pregnant.

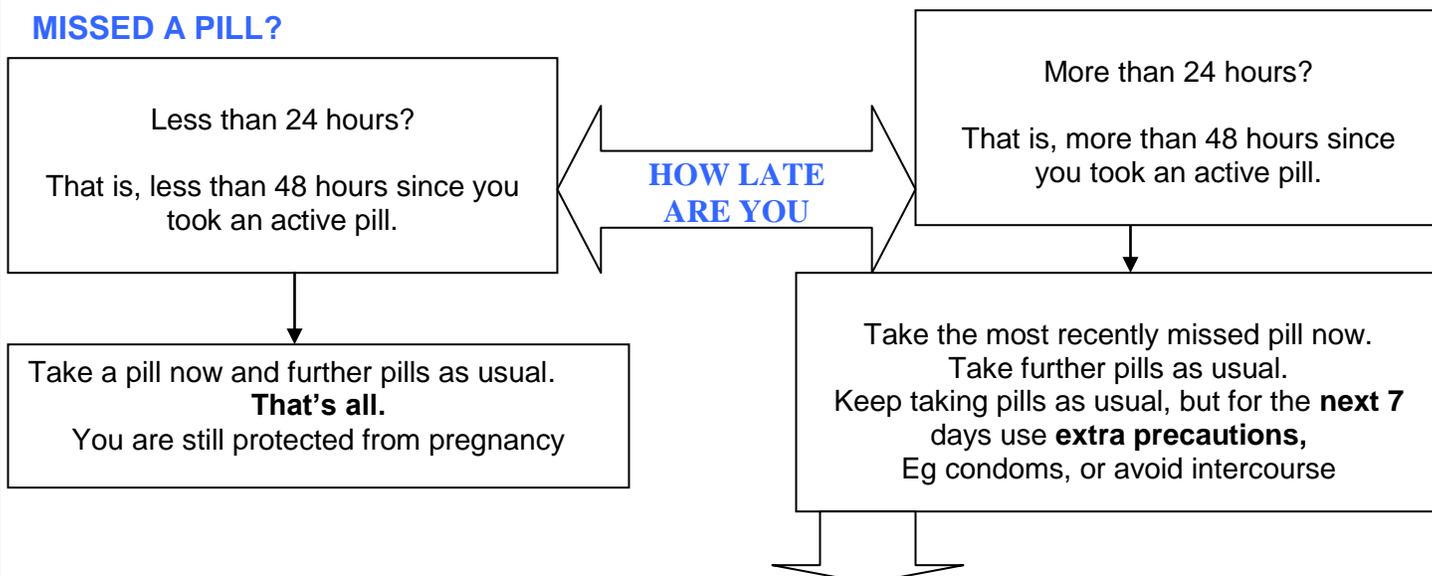
If you are **more** than 24 hours late, or have missed **more** than one pill, take a pill when you remember, and the next pill at the usual time. Then keep on taking the pills as usual, but use other contraception (eg condoms) as well, for the next seven days.

IF YOU MISS MORE THAN ONE PILL IN THE FIRST SEVEN DAYS OF A NEW PACK OF PILLS OR YOU START A NEW PACK MORE THAN 24 HOURS LATE **and** you have had sex in the pill break, you should consider the need for emergency contraception. In addition, you will need to use other contraception such as condoms for the next 7 days.

Talk to your doctor, nurse or other health provider

MISSED PILLS

MISSED A PILL?



PLUS Where in the pill cycle have you missed pill(s)?

<p>First 7 hormone pills after the week of inactive (sugar) pills? Follow the instruction for missed pills and if you've had unprotected sex, Emergency Contraception is recommended</p>	<p>Middle 7 Hormone pills Follow the instructions for Missed pills. That's all.</p>	<p>Last 7 days of hormone pills before the week of inactive (sugar) pills? Follow the instructions for missed pills and take remaining pills, But skip inactive (sugar) pills in this pack. Go straight onto hormone pills in next pack.</p>
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HINTS FOR PILL TAKERS

- Choose a time of day for pill taking that is easy to remember. You can link it to something else you do daily, like brushing your teeth.
- **Never have more than 7 days break from the hormone pills.**
Don't be late in starting hormone pills after 7 days of inactive pills.
- If you have any side effects including irregular bleeding keep taking the Pill and see your health practitioner. Stopping the pill mid cycle may cause more bleeding and increase your risk of pregnancy

To make sure you're protected against both pregnancy and STIs, use the Pill + Condoms for best protection

FPT acknowledges the contribution of Family Planning Queensland in the development of this fact sheet

Disclaimer:
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