

THE COMBINED ORAL CONTRACEPTIVE PILL

What is the combination pill? It is a combination of two female sex hormones that prevents pregnancy by changing the hormone balance in your body to stop ovulation (the monthly release of the egg from the ovary). There are 28-day packets, with 21 active 'hormonal' pills and 7 inactive 'sugar' pills. Some have 24 active pills and 4 inactive pills.

How effective is the pill? If taken according to instructions, it is at least 98-99% effective. When you first start the pill make sure you take 7 hormone tablets first before having unprotected intercourse.

How is it commenced? This varies according to the type of pill prescribed, so follow the instructions that come with the pill packet. It is usual to start the 28-day pack on the 1st day of bleeding of your next period in the designated section.

When and how is it taken? The tablet should be swallowed whole with or without a small amount of water. It does not matter what time of the day you take it, but once a time has been chosen it is important to get into the habit of taking the pill at the same time (eg after breakfast or at bedtime). To be effective to stop pregnancy, the pill must be taken at a regular time.

What if a pill is missed or taken late? The 7 day rule - Take the forgotten pill as soon as possible, even if it means taking two pills in one day. Take the next pill at the usual time and finish the course. If you forget to take the missed pill for more than 12 hours after the usual time, there is an increased risk of pregnancy and so you should use another form of contraception (such as condoms) for 7 days. If these 7 days run beyond the last hormone pill in the packet, miss out the inactive pills (or 7 day group) and proceed directly to the first hormone pill in the next pack. The most risky times to miss a pill are in the first 7 days after the placebo break. Additionally, the last 7 days of hormone use of the cycle are risky too if a pill is missed then followed by the placebo break.

How does it affect periods? Periods tend to become shorter, regular and lighter. The blood loss may be the brownish colour of old blood. The pill also tends to stop painful periods.

Is a break from the pill necessary? It is best to continue it until pregnancy is contemplated. Check with your doctor if you have any risk factors to be considered before commencing the pill.

What if a period is missed? If you miss a period, stop taking the pill, check with your doctor as soon as possible and use other methods of contraception.

Is it safe during lactation? The pill can interfere with the quantity and quality of breast milk, and so it is better to use

other contraception during breastfeeding. If a pill is used, the most appropriate is a progestogen only pill ('minipill').

What are the unwanted effects (side effects)?

The most common side effects are nausea (feeling sick), breast tenderness and breakthrough spotting (ie. bleeding between your usual periods). These side effects tend to disappear after a couple of months on the pill. Other side effects include vaginal thrush (which causes itching), discolouration of the skin and feeling depressed. More serious (although uncommon) effects include migraine headaches, high blood pressure and a tendency to form clots in the veins. To check if you should not take the pill, refer to the instruction leaflet that comes with the pill, or consult your doctor. Some women feel better when taking the pill, and their skin and hair condition can improve. A special pill can be used if you have acne.

What about alcohol and other drugs? Alcohol in moderation does not appear to interfere with the pill. Medications that can reduce the effectiveness of the pill include herbal preparation St Johns Wort and drugs to treat epilepsy and tuberculosis. Mainstream antibiotics are now not considered to affect the pill. The pill may affect blood-thinning and anti-diabetic drugs. Check with your doctor. Remember that diarrhoea and vomiting from illness or medications may make the pill less effective.

What are the special rules to follow? Smoking creates a health risk with the pill, and so you should not smoke.

- Make sure you tell a doctor if you are taking the pill when other medicine is about to be prescribed.
- Diarrhoea and vomiting may reduce the effectiveness of the pill so use additional contraception until you finish that particular course. (Follow the 7 day rule.)
- Report persistent or heavy bleeding between periods.
- Report any onset of blurred vision, severe headache or pain in the chest or limbs.
- Return for a checkup every 6-12 months while you are on the pill.
- Perform breast self-examination regularly and have a Cervical Screening Test every 5 years.
- Remember that the pill is highly effective, but pregnancy can occur if the pill is taken at irregular times, if intercurrent illnesses such as fever and gastric upsets develop, or if you are taking some other drugs.

Risk factors include venous thromboembolism or known thrombogenic blood abnormalities, heart disease, breast cancer within the last 5 years and serious liver disease, diabetes with vascular complications, uncontrolled high blood pressure, migraine with aura, >35 years of age and smoking 15 or more cigarettes per day, undiagnosed vaginal bleeding and obesity with BMI > 40.