

Birth Control Pills

Birth control pills, also known as oral contraceptives, are one of the most effective methods a woman can use to prevent pregnancy and/or regulate menstruation.

Birth control pills are the most extensively studied drugs ever prescribed. Most are made up of two synthetic hormones, an estrogen and a progestin. To minimize side-effects, clinicians prescribe pills which contain the lowest amount of hormone. They provide just enough estrogen each day to prevent the release of FSH (follicle stimulating hormone) and LH (luteinizing hormone), thus inhibiting ovulation. The progestin component of the pill causes the cervical mucus to thicken and dry creating a barrier to sperm. Progestin also makes the lining of the uterus unsuitable for egg implantation.

The effectiveness of birth control pills is maximized when a pill is taken at the same time of day, every day.

It is important to remember that birth control pills:

- do *not* protect against sexually-transmitted infections such as HPV, herpes, chlamydia, and HIV

- must be taken at the same time daily
- may have possible temporary side-effects: small amount of weight gain (3-5 lb. average), nausea, headache, mood swings
- may not be effective when used with certain medications
- require a back-up method (e.g. condom) at initial start up and if you miss a pill

Is "the pill" right for you?

The birth control pill is a highly effective reversible contraceptive. Many women choose to take the pill simply because of its beneficial side-effects:

- maintains regular periods
- permits sexual spontaneity
- relieves some menstrual problems (e.g., can shorten periods; reduce the incidence of iron deficiency anemia; minimize cramps and PMS; correct menstrual irregularity/amenorrhea)
- prevents and or treats endometriosis
- decreases the incidence of ovarian cysts, fibrocystic breast syndrome and fibroadenomas of the breast
- lowers the risk of osteoporosis in estrogen-deficient women
- lowers the risk of ovarian and endometrial cancer
- can diminish acne

What can be expected?

Common side-effects (which often disappear 2-3 months after starting the pill) include:

- *Spotting or breakthrough bleeding* between periods while your body adjusts to the hormone dose. This bleeding does not indicate diminished contraceptive protection unless you have taken pills irregularly (in which case additional contraception is recommended). If bleeding resembles a period, it is advisable to use backup contraception for the rest of your cycle while you continue to take your pills at the same time each day.

- *Nausea.* If nausea occurs, try taking your pill with food, milk, or before bedtime.
- *Breast fullness and/or tenderness* may be related to the estrogen or progestin in the pill and should diminish with time.

If any of these problems persist after three pill cycles, call for an appointment with a clinician or nurse. Most common problems can be relieved by changing to a different pill.

What are the contraindications?

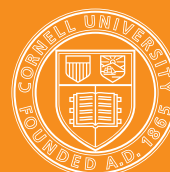
Cigarette smoking: Smoking increases the risk of serious cardiovascular problems from oral contraceptive use. The risk increases with age and the amount of smoking. Women who use oral contraceptives are strongly urged not to smoke.

Chronic conditions: If you have a chronic medical problem, you will need to discuss the risks of taking the pill as it relates to your particular situation. Most of the time, taking the pill is relatively safe. However, if you have any of the following conditions, check with your clinician about your ability to use oral contraceptives:

- thrombophlebitis, thromboembolic disorders, cerebral vascular disease, coronary artery disease or past history of these conditions
- markedly impaired liver function or hepatic adenoma
- undiagnosed breast masses or known or suspected carcinoma of the breast
- undiagnosed abnormal genital bleeding
- known or suspected pregnancy
- known or suspected estrogen-dependent tumor
- history of migraines or lipid disorders
- hypertension with resting diastolic BP of 90 or greater over several visits

Prescriptions

Pill prescriptions, as well as back-up methods of contraception (e.g., condoms) can be filled at Gannett's Pharmacy, where the costs are comparable or less than outside pharmacies.



How to use oral contraceptives

() **Sunday Start Method:** Start your first pack on the first Sunday after your period begins. For example, if your period starts on a Wednesday begin your pills on that following Sunday. If your period begins on Sunday, begin your pills that same day. The pills will be effective in 7 days when this start method is used.

() **First Day:** Start your pills the first day your normal period begins. This method is effective immediately if used with a normal, on-time period.

() **Quick Start:** Take your first pill today if you are certain you could not be pregnant now. Return to take a pregnancy test if your period does not come during the placebo week of the pills. The pills will be effective in 7 days when this start method is used.

Swallow one pill at about the same time every day until you finish the package. Associate taking the pill with some regularly scheduled activity such as meals or bedtime. Check your pack each day to be sure you took your pill the day before. Please be aware that changing the time you take the pill or missing a pill will decrease the effectiveness of the contraceptive.

Your menstrual periods

The week you are off pills or taking the placebo pills is the week you will have your period. Bleeding usually begins on the 2nd or 3rd day of the placebo week. The first few months you may have bleeding at other times as well. This is normal and usually stops by the time you have taken three pill packs. Continue taking your active pills until all 21 days are completed; take 7 days of placebo pills; then start a new pack. Bleeding may last a shorter time and may be lighter than before you started pills.

Periods may be short and scanty for women on pills. If you have not missed any pills and you have no signs of pregnancy, then pregnancy is unlikely. If you are worried, however, call Gannett at 255-5155. You should definitely have a pregnancy test if you do not have bleeding for two months in a row.

If you are taking certain medications

Some drugs you may need to take for medical conditions may decrease the effectiveness of your pills. If you are using drugs such as rifampin, griseofulvin, ohenytoin, phenobarbital, topiramate, carbamazepine, antiretroviral drugs, or St. John's Wort, tell your clinician. You must inform all health care providers that you use the pill, especially if you are in a leg cast or scheduled for surgery. If you have any questions, ask

Additional protection (barrier methods or abstinence) will ensure your contraceptive's effectiveness while taking other medicines. If you experience breakthrough bleeding while taking other medications, it may indicate a decrease in the pill's effectiveness. Use a back-up method and consult with a health care provider.

Vomiting or diarrhea

If you have vomiting or diarrhea, you may not absorb the pill, so you should use a back-up method of birth control for up to one month while you keep taking your pills on schedule.

Symptoms of serious side-effects

It is important to be aware of the very rare but potentially serious complications that may arise as the result of pill use (e.g. gall stones, blood clots). The following are important symptoms, not to be ignored:

- Severe abdominal pain lasting more than 30 minutes
- Severe chest pain or shortness of breath
- Increase in frequency or severity of headaches, especially if associated with weakness, numbness, or vision disturbances
- Loss of vision, double or blurred vision
- Speech problems
- Severe pain in the calf or thighs

If you have missed pills

Sometimes mistakes happen and pills are forgotten or packs are started late. However, when pills are taken off-schedule, the risk of getting pregnant increases. The Gannett fact sheet entitled "Missed Pill Guidelines" provides instructions written specifically for:

- pills with 30 mcg estrogen or more
- pills with fewer than 30 mcg of estrogen
- progestin-only pills

The guidelines are also available at www.gannett.cornell.edu [search: "Missed Pill"].

If ever you are unsure what to do, use a back-up contraceptive, keep taking your pills, and call Gannett (255-5155) for more information.

Emergency Contraception

Emergency contraception (EC) consists of two (higher than usual) doses of oral contraceptives taken within 12 hours of one another in order to disrupt the hormonal patterns necessary to establish pregnancy. Consider EC:

- if you've had vaginal intercourse with no back-up method (e.g. condom) after missing one or more pills

- if you've missed one or more pills at the beginning or end of a pack (so the pill-free interval is prolonged beyond 7 days)
- if you missed two or more pills during the pill cycle

EC should be started within 5 days (120 hours) of unprotected vaginal intercourse, (preferably within 72 hours). If you wish to avoid even a small risk of pregnancy, talk to your medical provider or call Gannett (255-5155) for more information.

Deciding when to stop the pill

Women occasionally stop their pills because they are annoyed by side effects. However, most side effects disappear if pills are taken consistently for three cycles. We encourage you to continue the pill for three full cycles because frequent starting and stopping may prolong adjustment to the pill. If you must stop taking the pill and want to be sexually active, use another form of contraception. (You can always call 255-5155 or stop by Gannett for contraceptive supplies and information.)

It is possible to become pregnant as soon as you stop the pill.

There are no medical benefits to stopping the pill (periodically, after a certain number of years, or at a certain age). Consult with your clinician before assuming it is necessary to stop the pill.

Picking up your pills

You may purchase pills from the Gannett Pharmacy. It is necessary to have a health check by a nurse after three months on the pill. If all is well, you may continue. No appointment is needed for a pill pick-up or nurse visit.

If you already have a prescription

If you are currently using hormonal contraception and want to have your prescription renewals managed at Gannett, please make an appointment with a clinician before you run out of pills. While we encourage women to have an annual pap smear screening, STI testing, and physical examination, you may choose to refill your birth control pills without an exam.

Please talk with us if you have any questions about the pill, the annual exam, or any other sexual health issue. We offer phone consultation 24/7 at 255-5155.