The Pill
Birth Control for Women

The birth control pill is a combined hormonal contraceptive containing two hormones, estrogen and progestin. These hormones help to prevent pregnancy by:

- inhibiting ovulation
- producing thicker cervical secretion which acts as a physical barrier to sperm
- thinning of the endometrial lining

How well does the pill work?
Only 3 women in 1,000 will become pregnant if the pill is used correctly and consistently or 99.7% effective. However, failure rate with typical use is 8%.

Benefits of the Pill
- less painful periods
- menstrual regularity
- lighter periods
- less anemia
- reduction in PMS
- improvement in acne
- fewer ovarian cysts
- fewer ectopic pregnancies
- reduced risk of ovarian cancer
- reduced risk of uterine cancer

Pill Risks
There is a slight increased risk of developing blood clots when using the Pill. When blood clots occur, they usually first develop in a lower leg and are a potentially life threatening side effect which can lead to heart attack, stroke or lung complications. The risk of a blood clot in pregnancy is much higher than with Pill use.

If you experience any of these symptoms, see your clinician, return to the clinic or go to the nearest Emergency Room immediately. Do not wait for these symptoms to get better.

- severe abdominal pain
- shortness of breath or chest pain
- severe and sudden headache
- sudden eyesight problems
- pain or swelling in calf, thigh or groin
- high blood pressure
- gallbladder disease

➢ We advise a return visit with a nurse for a Blood Pressure check after 3 months of combined oral contraception use.

Pill Side Effects
Minor side effects are more likely the first 3 cycles of a new Pill and tend to resolve by the 4th cycle. Minor side effects of the Pill that could occur:

- mood changes
- breast tenderness
- bleeding between periods
- nausea
- decreased menstrual flow (lighter periods)
- skin changes
- headache

Special Warnings with birth control pills containing the progestin Drospirenone:
REGULAR DAILY USE OF NSAIDS such as ibuprofen (Advil and Motrin) and naproxen (Aleve) and some other medications are not safe to take with birth control pills containing Drospirenone. Concurrent use of these medications and some diuretics can raise the potassium levels in the blood which can lead to heart and other health problems.

Starting the Pill
There are 3 ways to start your first package of Pills.

1) Today Start: Start your first pill today. Use another birth control method for the first 7 days of your first pack.
2) Sunday Start: Take your first Pill on the Sunday after the first day of your next period. If your period starts on Sunday, take your first pill that day. Use another birth control method for the first 7 days of your first pack.
3) First Day Start: Take your first pill during the first 24 hours of your next period. No other birth control is needed.
Taking the Pill
- Take 1 pill every day about the same hour each day.
- When you finish the last pill in your pack, start a new package the next day.
- Your period should start sometime during the non-hormone containing pills in your pill pack. You are still protected from pregnancy during this week.

Taking the Pill to have Fewer Periods is called “Continuous or Extended Use”
Skipping the placebo week of one pack of Pills and starting a new package of Pills instead is a safe way to skip a period or have fewer periods. Spotting is a common, but not serious side effect of skipping the placebo week. Some tips for successful extended use:
- Use a monophasic birth control Pill. A monophasic pill means that the formula of the active pills is the same and all of the active pills are the same color.
- If you have light spotting, continue the active pills, the spotting may self-resolve
- If spotting does not improve or if it gets heavier after a few days and you have taken at least 3 weeks of active pills, stop the active pills for 3 days; you will have a period for those days. Then restart the active Pills even if you still have some bleeding.
- If bleeding is heavier or more painful than a normal period call or seek evaluation.

Instructions for Missed Pills
- If missed pill is less than 12 hours late, take missed pill immediately then continue with rest of the pills at the usual time. No backup method is needed. No ECP (emergency contraception pill) is needed.
- If missed pill is more than 12 hours late, take missed pill immediately and also take today’s pill on time. Use ECP if unprotected intercourse in the past 7 days. Use condoms or abstinence until 7 active pills in a row have been taken.

What will make your pill less effective?
- **Other Medications**
  The following medications and supplements may interfere with the effectiveness of the Pill. We recommend that women using these medications use another birth control method while on these medications and for 7 days after completing them.
  - Rifampin, some anticonvulsants; St. John’s Wort; Provigil, Alli (Orlistat) and some antiviral medications
- **Illness Symptoms**
  - If you vomit within 2 hours of taking your pill or have severe vomiting and diarrhea for 2 or more days, you may have not absorbed your pill properly and consider as a missed pill for that day.

In an emergency go to Mount Nittany Medical Center or call 911 for an ambulance.

Test Results and Advice Nurse
Send secure message to advice nurse via the UHS website or call 814-863-4463.

Appointments
Appointments can be made online via the UHS website, by phone 814-863-0774, or in person. If you are unable to keep your appointment, please call or go online to cancel. Otherwise you will be charged for the visit.

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