Birth Control Pill Information

<table>
<thead>
<tr>
<th>Contraindications</th>
<th>Effectiveness</th>
<th>Benefits</th>
</tr>
</thead>
<tbody>
<tr>
<td>You should not take the pill if you have a history of a blood clot, pulmonary embolus, deep vein thrombosis, hepatitis or liver disease, cancer, heart attack or stroke. You should not take the pill if you are pregnant, older than 35 and smoke or if you get a certain type of migraine headache (with aura).</td>
<td>No method of birth control except abstinence is 100% effective. However, birth control pills can be 99% effective if taken correctly. In real world use the pill is only 92% effective because of missed/late or incorrectly taken pills. The pill does not provide protection from sexually transmitted infections. We recommend using condoms with the birth control pill.</td>
<td>In addition to providing birth control, the pill may also provide the following benefits: more predictable, lighter, and less painful periods, less risk of ovarian and endometrial cancer, and fewer ovarian cysts. It may help reduce pain from endometriosis and improve acne.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Risks</th>
<th>Side Effects</th>
<th>Stopping Birth Control</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rare but serious problems include: blood clots in the legs or lungs, stroke or heart attack, gall bladder disease, liver problems, high blood pressure, and headaches. Stop the pill and contact your clinician at once if you develop: changing headache (new, more frequent, or severe), chest pain, shortness of breath, severe abdominal pain, leg or calf pain, numbness of an arm or leg, or sudden difficulty with speech or vision.</td>
<td>While using birth control pills you might experience the following temporary side effects: nausea, spotting between periods, irregular menstrual bleeding, breast tenderness, mood changes, changes in vaginal discharge, and darkening of the skin on your face. If these symptoms bother you and persist after two or three pill packs you should make an appointment to discuss possibly changing your pill.</td>
<td>You may stop using oral contraceptives at any time. When the pill is stopped, the return of your period may be delayed for two to three months. If your periods were irregular, heavy, or painful before taking the pill, they may return to that pattern when oral contraceptives are stopped. You do not need to “take a break” from the pill.</td>
</tr>
</tbody>
</table>

Additional Information:

- A contraceptive visit at Student Health Services is required at least once a year in order to continue getting the Pill.
- Birth control pills may be purchased at Student Health Services or by prescription at a pharmacy.
- It is important to take the pill within the same two hour period each day because taking the pill inconsistently increases the chance of pregnancy.
- Emergency contraception (Plan B) is available if pills are taken incorrectly.
- Pap smears should begin at age 21 and, if normal, should be repeated every three years.

June 2014
When to Start Taking Pills: Begin your first pack of pills as instructed by your provider:

_____ The first day of your next period.

_____ The Sunday after your next period begins (if your period begins on a Sunday, start the pill that day).

Use condoms for at least the first week.

When you finish one pack of pills begin a new pack the very next day. Your period should come during the fourth week of the pill pack, but irregular bleeding is common during the first three months of use. This is called breakthrough bleeding; it is not a period.

| Missed Pill Instructions: | If you missed pills in the last week of active pills (third row):
|---------------------------|--------------------------------------------------|

**Missed One Pill** –

- Take it as soon as you remember it!
- You may even need to take 2 pills in one day, divided doses, or at the same time. If 2 pills are taken together, take with food.
- Advise Emergency Contraceptive Pill - **Plan B**, for unprotected intercourse, especially if other active pills were missed earlier in the cycle or in the last week of previous pack.

**Missed Two or More Pills** –

- Take the last pill you missed **now**, and take today’s pill at the usual time. If you take 2 pills at once, take with food. Then...
- Finish taking the rest of the pack as usual, including the last 7 days of inactive pills (the 4th row).
- Use condoms for seven (7) consecutive days when pills are missed.
- Once you have taken 7 consecutive active pills, you are protected.
- Advise Emergency Contraception - **Plan B**, if you have had unprotected intercourse within 72 hr.
- Remember: Condom use every time to prevent pregnancy and for STD protection, BUT especially when pills are missed often.

- Finish the active pills (3rd row) in the current pack and immediately start a new pack the next day – omit the inactive pills in 4th row.
- Use condoms as back-up contraception or avoid intercourse until 7 consecutive days of active pills are taken.

**Spotting and irregular bleeding** are common after missing pills and skipping periods. It is not a period.

**Plan B** (the Morning After Pill or-Emergency Contraceptive) is available at Student Health Services or your local pharmacy. If you missed more than one pill and you did not use condoms during intercourse, Plan B is advised. Plan B should be taken within the first 72 hours of unprotected intercourse.

With unprotected intercourse, consider STD testing in 2-3 weeks. Make an appt. to discuss.

**Additional Resources:**

- [www.acog.org](http://www.acog.org) Click on the ‘For Patients’ tab.
  Under Contraception click Combined Hormonal Birth Control


June 2014