Oral Contraceptives

When beginning to use oral contraceptives, our office will schedule a brief follow-up appointment (3 months from now). At this visit, we will check your blood pressure, and discuss any concerns you may have about the pills your doctor or practitioner has prescribed. You will also be given your prescription for the remaining 9 months until your next annual exam is due. Here are a few things you should know:

- Get into the important habit of taking your pill at the same time every day, i.e., first thing in the morning, or just prior to bedtime. The pill is one of the most effective forms of contraception available, but you need to take it every day or it won’t work.

- Expect some spotting for the first 2-3 cycles on the pill until your body adjusts to the change in hormones. Spotting is normal and does not increase your chances of pregnancy. Continue to take your pills for three cycles before giving up on it—for most women, the spotting will stop by then.

- Some pills are “Sunday starts,” which means that you start taking your pills on the Sunday after your period starts (you can even start on the same Sunday that your period starts). If you have a “Sunday start” pill, you will need to use back up contraception, use foam and condoms for the first three weeks of taking your pills for the first time.

- Some pills are “Day one starts,” which means you start your pills on the first day of your next period. With these pills, you don’t need back up contraception at all. Your doctor or practitioner will tell you which kind of pills you’re taking.

- If you forget to take one pill, you can take two pills the next day and still be protected from getting pregnant.

- If two or more pills are missed, stop taking the pills for the rest of that cycle. You will need to use foam and condoms until you start your next period and then you can start the next pack of pills as you ordinarily would. You will need to continue to use back up contraception for the first three weeks of your new pack of pills.

- Some medications will make the pill less effective in preventing pregnancy. If you need to take any oral prescription medications for a short period of time, ask the pharmacist if the new medication can alter the effectiveness of the pill. The pharmacist may recommend that you use foam and condoms along with your pills until completing the other prescription. Always be sure to let our office know of any other medications that you are taking.

- Your periods will probably become much lighter on the pill, and your flow will last for fewer days. You will probably also notice much less cramping after the first pack of pills. Don’t be alarmed by this—it’s normal. If you miss a period but are taking the pill as you should, continue the pills for one more pack. If you still do not have a period after two packs of pills, you should call our office for instructions as to what to do. Occasionally, it is not unusual to miss a period, particularly if you have been on the pill for a long time.

- You can stay on the new lower dose pills for as long as you want to (not just for five years), as long as you are having no problems with the pills. If you have high blood pressure or smoke, you will need to discuss the safety of using birth control pills with your doctor or practitioner, as birth control pills may not be the safest method of birth control for you.

- If you have nausea or breast tenderness when you first start taking the pill, this generally goes away after the second pack. An honest trial of a particular brand of pills is usually three packs. If you are still having problems after the third pack, we can offer you a different pill to try (there are lots of them!)
Common Misconceptions Regarding The Pill

- The pills available today are much different than the ones available 10 years ago. They are much lower in dosage, and have far fewer side effects and problems. Be careful whom you listen to—sometimes you can get a lot of bad information from friends.

- Oral contraceptives (OCPs) don’t cause cancer. Quite the contrary! Studies have shown that if you are on the pill for greater than four years, it gives you protection from uterine and ovarian cancer. There is no proven association with OCPs and breast cancer.

- OCPs don’t make it harder to get pregnant once you stop taking them. It’s just the opposite. OCPs protect your fertility, since the incidence of endometriosis is lower in OCP users. Endometriosis is responsible for approximately 15% of infertility.

- OCPs don’t cause weight gain. Low dose pills that are used now have not been shown to cause women to gain all the weight that some people claim. It’s a convenient excuse to use overeating and lack of exercise for the weight gain. Pills get a bum rap on this one!

- OCPs don’t cause sore breasts (at least not after the first pack or two). There are actually far fewer fibrocystic breast lumps in women on the pill, and this means less painful breasts with your periods.

- OCPs do not usually cause mood swings. One of the treatments for PMS is the pill! It generally regulates your mood, though this is not true 100% of the time. If you are concerned about mood swings after three packs of your pills, call our office and we may be able to offer you a different pill.

Warnings

- Headaches. If you have been told that you have migraine headaches with an aura, OCPs probably aren’t for you. If you start getting bad headaches while on the pill, you will probably need to stop taking them. Notify us immediately of severe headaches.

- If you are a heavy smoker (more than 15 cigarettes per day), OCPs aren’t for you. If you’re over age 35 and smoke at all, you shouldn’t take OCPs.

- If you have high blood pressure, high cholesterol, chronic liver problems, insulin dependent diabetes, gall bladder problems, or have a history of having thrombophlebitis (blood clots forming in your body), OCPs aren’t for you.

- You should have your cholesterol level (lipid profile) checked about every 3-5 years while you are taking OCPs. A strong family history of heart or blood pressure problems would be a contraindication for your use of OCPs.

- If you have severe headache, blurred vision, upper abdominal, chest or leg pain while on OCPs, you should call the office immediately.

Important!

OCPs will not in any way protect you from acquiring a sexually transmitted disease! It is very important to your health and safety that you practice safe sex, and use barrier methods to prevent of transmitting STDs!