

UNIVERSITY STUDENT HEALTH SERVICES • Fact Sheet

THE BIRTH CONTROL PILL

The birth control pill, also known as the oral contraceptive pill, is available in a variety of formulations. This handout focuses on combined contraceptive pills that contain both estrogen and progestin. From this point on, we will refer to these combined oral contraceptives as “The Pill”.

Please refer to the fact sheet [“Guide to Hormonal Contraceptives”](#) for information about progestin-only pills and other birth control methods, such as contraceptive rings, contraceptive patches, Depo Provera injections, the Nexplanon implant, and intra-uterine devices (IUDs).

HOW DOES THE PILL WORK?

The Pill is taken by mouth once a day. It contains a combination of estrogen and progestin hormones which prevents pregnancy by:

- Preventing ovulation (so that the ovaries don't release eggs that can be fertilized by sperm).
- Thickening cervical mucus (to prevent sperm from entering the uterus).
- Altering the lining of the uterus (to make it harder for a fertilized egg to attach and grow).

HOW EFFECTIVE IS THE PILL?

The Pill is a very effective form of contraception when it is taken correctly.

- Perfect-use failure rate: Less than 0.5% of patients who take their pills every day as prescribed will get pregnant each year.
- Typical-use failure rate: About 7% of patients who sometimes forget to take their pills will get pregnant each year.

DO I NEED TO GET A PAP SMEAR BEFORE STARTING THE PILL?

No, you can start birth control without having a Pap smear. However, it is important to get regular Pap smears beginning at age 21 to screen for cervical cancer in all individuals with a uterus.

HOW MUCH DOES THE PILL COST?

- Co-pays through health insurance are usually affordable and vary from carrier to carrier.
- For students who are uninsured or do not wish to use their health insurance, affordable options are available. Student Health offers a selection of generic birth control pills for \$10/month. The [GoodRx](#) website or app also offers competitive pricing for prescriptions, even for patients with health insurance.

WHAT ARE THE BENEFITS OF TAKING THE PILL?

Taking the Pill is an easy and safe way to prevent pregnancy. Additional benefits of the Pill can include:

- Improved cycle control.
- Decreased menstrual cramps and bleeding (which improves iron deficiency anemia, if present)
- Decreased PMS symptoms.
- Prevention of menstrual migraines.
- Prevention of ovarian cysts.
- Decreased symptoms from fibrocystic breasts.
- Decreased symptoms from fibroids and endometriosis.
- Decreased acne and excessive hair growth.
- Protection against ovarian, uterine, and colon cancers.

CAN THE PILL CAUSE SERIOUS SIDE EFFECTS?

The Pill is a safe form of birth control for most healthy, non-smoking individuals. When the Pill was first introduced in the 1960s, it contained high doses of estrogen and progestin that led to an increased risk of cardiovascular complications, such as hypertension, heart attack, stroke, and life-threatening blood clots. Birth control pills now contain much lower hormone doses, and serious side effects are uncommon.

Examples of potential complications include the following:

- Hypertension can develop or worsen in some patients after starting the Pill. For this reason, your blood pressure is always checked before starting the Pill and periodically while taking the Pill.
- Life-threatening blood clots are rare in those taking the Pill but can occur deep in the arms, legs, and lungs. The estrogen component of the Pill increases this risk by triggering the production of proteins that promote blood clotting. Therefore, patients with a history of blood clots or a clotting disorder should avoid birth control containing estrogen. However, for the average non-smoking healthy female, the risk of developing a life-threatening blood clot from the Pill is very low. In fact, patients have a higher risk of developing a blood clot during pregnancy than while taking the Pill.

Note: There is conflicting evidence whether certain newer progestins may slightly increase the risk of blood clots. This includes drospirenone, the progestin used in Yaz (Nikki, Loryna, Vestura) and Yasmin (Ocella, Syeda). For more information, talk to your healthcare provider.

Seek medical help immediately if you have:

- Severe or crushing chest pain or sudden shortness of breath (which may indicate a blood clot in the heart or lungs).
- Severe pain in the arms or legs with swelling, redness, or warmth (which may indicate a blood clot in the arm or leg).
- Sudden severe headache with visual disturbance or difficulty speaking (which may indicate a blood clot in the brain).
- Severe abdominal pain.

WHAT ARE OTHER SIDE EFFECTS OF THE PILL?

Most patients experience no side effects on the Pill. If side effects do occur, they usually resolve within 2-3 months:

- If you are experiencing side effects that are minor, try to stick with your birth control for a few months before switching to a different medication.
- If side effects are so severe that they are affecting your quality of life, talk to your medical provider sooner.

Common side effects may include:

- Breakthrough bleeding or spotting between periods (more common on lower-dose pills; this side effect does not decrease the effectiveness of the Pill as long as you do not forget to take it).
- Breast tenderness and/or enlargement.
- Nausea (taking the Pill at bedtime or with food may help).
- Moodiness or irritability.
- Headache (usually improves without having to stop the Pill)

Note: There is no evidence that the Pill causes weight gain.

WHO SHOULD NOT TAKE THE PILL?

You should not be on the Pill if you:

- Are pregnant or breastfeeding.
- Are age 35 or older and smoke 15 or more cigarettes a day.
- Have migraine headaches with aura, such as changes in vision (eg. blurred vision, temporary loss of vision, flashing lights, zigzag lines), difficulty speaking, difficulty moving your arms or legs, and other neurologic disturbances.
- Have a history of venous thromboembolism (life-threatening blood clots deep in the limbs or lungs), a blood clotting disorder, or lupus.
- Are planning surgery that will keep you from walking for a week or more.
- Have high blood pressure that is not well-controlled.
- Have serious problems with your heart or blood vessels, including heart attack, heart disease from blocked arteries, and stroke.
- Have uncontrolled diabetes or diabetes for more than 20 years.
- Have, or ever had, breast cancer.
- Have any unusual or unexplained vaginal bleeding.
- Have jaundice or a serious liver disorder.

The Pill may be less effective in persons taking certain medications. If you are on any of the following medications, other contraceptive options should be considered:

- Certain anti-seizure medications (eg. Dilantin, Tegretol, Topamax, Trileptal).
- Rifampin (a tuberculosis medication).
- St. John's Wort (an herbal supplement taken for depression).

Note: Most antibiotics (eg. Penicillin, Keflex, etc.) do not decrease the effectiveness of the Pill.

WHEN DOES MY PERIOD COME BACK AFTER STOPPING THE PILL?

- Almost all individuals who had regular periods before starting the Pill will resume their periods within 3 months of stopping the Pill. For many, their menses will return within 30 days.
- Some patients will have irregular periods or no periods for up to 6 months after stopping the Pill. This is more common in those who had irregular periods before starting the Pill.

RECOMMENDED WEBSITES: www.plannedparenthood.org, familydoctor.org

VCU Fact Sheet: HOW TO TAKE THE PILL

STARTING THE PILL	
Back-up Birth Control (Condoms) *Free condoms at recwell.vcu.edu/thrive/condom-concierge	<ul style="list-style-type: none"> ▪ <u>You will need back-up birth control (condoms, etc.) during the first 7 days after starting the Pill because it is not protecting you from pregnancy yet. The only exception is if you start the Pill on the first day of your period.</u> ▪ Always use a condom to protect against sexually transmitted infections (STIs). ▪ It's also important to use a condom (or other back-up) in case you: <ul style="list-style-type: none"> - Run out of your prescription. - Forget to take 2 or more pills in a row. - Have significant vomiting or diarrhea.
First Day Start	<ul style="list-style-type: none"> ▪ Start the Pill on the first day of your period. ▪ You do not need back-up contraception for pregnancy prevention.
Sunday Start	<ul style="list-style-type: none"> ▪ Start the Pill on the first Sunday after your period begins. If your period begins on a Sunday, start the Pill that day. ▪ You must use back-up birth control for the next 7 days (unless Sunday is the first day of your period) to prevent pregnancy.
Start Today	<ul style="list-style-type: none"> ▪ If you are certain that you are not pregnant and if you have not had any unprotected sex since your last period, you can start the Pill today. ▪ You must use back-up birth control for the next 7 days to prevent pregnancy. ▪ Disregard any spotting or bleeding you may have during the first month.
TAKING THE PILL	
Your Pill Pack	Most pill packs contain 28 pills: <ul style="list-style-type: none"> ▪ The first 3 weeks (or more) of your pill pack will contain the hormones estrogen and progestin. These are your "active pills". ▪ The 4th or last week of your pill pack contains no hormones. These are called "placebo pills" or "sugar pills". They are usually a different color. <ul style="list-style-type: none"> - A few days into your 4th (or placebo) week, you will have your period. - You are still protected from pregnancy during the placebo week even though you are taking pills without hormones in them.
Take one pill every day.	<ul style="list-style-type: none"> ▪ Take your pill at the same time each day (within 2 hours of your normal time). ▪ Begin a new pack immediately after finishing your current pack. ▪ Never go more than 7 days without taking active pills (pills containing hormones). If you start the next pack late, you will need back-up birth control for the next 7 days.
What if I want to skip a menstrual cycle?	<ul style="list-style-type: none"> ▪ Monophasic pill packs (where the dose of active pills does not change week to week) can be taken continuously to prevent a period. Avoid trying this method until your periods have been regular on the Pill for a few months. Otherwise you are likely to experience persistent irregular bleeding. ▪ To skip a period, take an active pill every day. This means that after finishing the 3rd week of the pill pack, you will start a new pack immediately (instead of taking the placebo pills). ▪ It is normal to have some spotting during the first 6 months with this method. ▪ It is not medically necessary to have a period while on the Pill, but some patients may prefer to have a period ~ every 3 months (by taking the placebos).
IF YOU MISS...	
Directions are also available in the package insert.	
One active pill,	<ul style="list-style-type: none"> ▪ Take it as soon as you remember. Take the next pill at your regular time. This means you may take 2 pills in one day (or 2 pills at the same time). ▪ Back-up birth control is not needed for pregnancy prevention.
Two or more active pills in a row,	<ul style="list-style-type: none"> ▪ Take the most recent missed pill as soon as possible. Discard any other missed pills. ▪ Take the next pill at your regular time, even if it means taking a second pill on the same day. ▪ Use back-up birth control until you have been on active pills for 7 days in a row. ▪ <u>If pills were missed during Week 3:</u> <ul style="list-style-type: none"> - After finishing the active pills in the current pack, start a new pack the next day. This means you will skip the placebo pills in the old pack. - If you are unable to start a new pack immediately, use back-up birth control until you have been taking the new pack for 7 days in a row. - You may not have your period this month, but this is expected. If you are worried about pregnancy, continue your pills and check a pregnancy test.
Any placebo pills (in Week 4)	<ul style="list-style-type: none"> ▪ Throw away the ones you missed, and keep taking one pill a day until the pill pack is empty. You do not need to use back-up birth control.