

Advantages

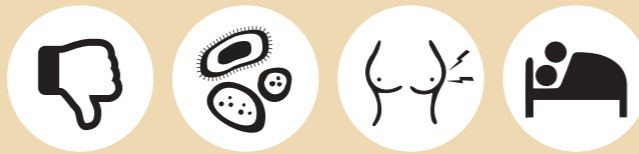


- A very effective form of contraception if used correctly.
- Available in many different varieties, so most people can find one that suits them.
- Can make bleeding lighter, more predictable and less painful.
- Allows a person to choose the timing of their bleed or not to have a bleed at all.
- May relieve premenstrual syndrome (PMS).
- Can improve acne.
- Can reduce the chance of getting cysts or cancer of the ovaries, and cancer of the lining of the uterus.

Is there anything else I need to know?

- You should arrange to have your blood pressure checked at least once a year while you are taking the pill.
- All people with a cervix who are older than 25, whether they are taking the pill or not, should have regular cervical screening tests.
- If the pill does not suit you, there are many other contraceptive methods available including Long-Acting Reversible Contraceptives or the Progestogen-Only Pill.
- Consider regular testing for sexually transmissible infections (STIs) if you are only using the COCP and no barrier method i.e. condoms or dams.

Disadvantages



Does not protect against STIs. Condoms and dams are the best protection.

You may experience:

- sore breasts.
- spotting or bleeding like a period when you don't expect it.
- nausea (some people find it helpful to take the pill at night rather than in the morning).
- mood changes including irritability and feeling depressed.
- chloasma (brown patches on your face)
- a change in sex drive.
- an increased risk of developing a blood clot (rare). Drink plenty of water and move around regularly during long flights.

Although the pill does have some side effects and possible risks, these problems usually disappear after the first two or three months on the pill.

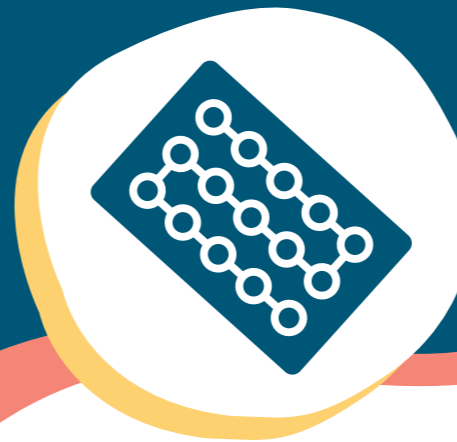
If any of these symptoms persist or if you have any concerns, discuss these with your clinician. Often a change of pill may be all that is needed. Few people actually have serious health problems related to taking it.

References:
Combined Oral Contraception [published 2023, June]. In: Therapeutic Guidelines. Melbourne: Therapeutic Guidelines Limited; accessed 24th April 2024. <https://www.tg.org.au>

FSRH Clinical Guideline: Combined Hormonal Contraception. London: The Faculty of Sexual & Reproductive Healthcare; 2019.

Combined Oral Contraceptive Pill (COCP)

This information is designed to be used in consultation with your health professional.



What is it?

The COCP or 'the pill' is a contraceptive method used to:

- Prevent pregnancy
- Control menstruation
- Improve acne



The COCP contains both oestrogen and progestogen hormones. There are many different brands available, each with varying combination types and doses.

Pills that contain hormones are known as active pills. Pill packets also include between two and seven inactive pills. Inactive pills do not contain any medication and are meant to help you remember to take your pill every day and start your next pack on time.

How does it work?

The pill works by:

- preventing the body from releasing an egg every month.
- thickening mucus in the cervix to prevent sperm from getting into the uterus.
- changing the lining of the uterus, making it difficult for a fertilised egg to implant.

How effective is it at preventing pregnancy?



The pill is most effective if used correctly and consistently (99.5%). Taking the pill irregularly (i.e. missing pills) will make it less effective at preventing pregnancy (93%).

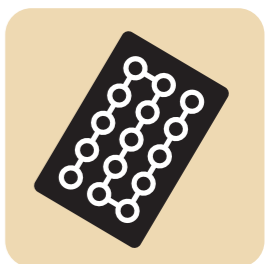
How do I start it?

You will need to take a pill every day to effectively protect against pregnancy.

The pill comes in monthly sheets and can be started at any time during the month.

If you start taking a hormone (active) pill within the first five days of your menstrual period, pregnancy protection begins immediately.

If you start the pill at any other time, ensure you begin with the active pills. It will take seven days to start working. If you have unprotected sex before the pill becomes effective, consider using emergency contraception. It is also advisable to take a pregnancy test one month after starting the pill.

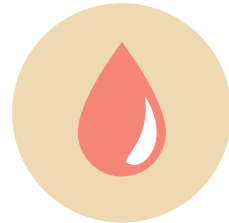


How do I take it?



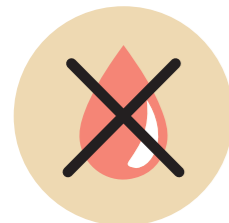
To help you remember to take the pill, try to make it a part of your daily routine. You can take the pill up to 24 hours after your regular time and still be protected from pregnancy.

There are two different ways you can take the pill:



With a break

Some pill packets are taken in cycles of hormone (active) pills followed by a break. Most pills are packaged with inactive pills to mark out the break. This break allows a bleed to occur (often called a withdrawal bleed).



Without a break

If you do not want to have a withdrawal bleed, you can safely take the hormone (active) pills continuously without a break for several months. This method improves the effectiveness of the pill.

Who can take it?

The COCP is suitable for most people, but there may be health risks for some.

The pill may be unsuitable for people who:

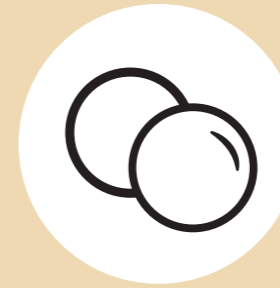
- have ever had a blood clot, stroke or heart attack
- have severe liver disease
- have abnormal vaginal bleeding
- have migraines with aura (visual changes or abnormal sensations before the headache begins)
- are over 35 and a smoker.

A clinician needs to know if you:

- have, or have a family history of, high blood pressure, high cholesterol, gallstones, diabetes, or any blood disorder
- are breast feeding
- are a smoker (as those who smoke are more at risk of developing a blood clot)
- have had cancer of the breast or of the uterus
- plan to have surgery.

What if I start to bleed while I am taking the hormone (active) pills?

If you have any unexpected bleeding when you are taking the hormone (active) pills, don't stop taking the pill. Occasionally spot bleeding can occur, or even bleeding like a period during the first two months of taking the pill, but this usually settles.



See your clinician if unexpected bleeding continues.

What if I don't get a withdrawal bleed when I am taking the inactive pills?



If you miss a withdrawal bleed and have followed all the pill packaging instructions, it is very unlikely that you are pregnant. However, you should take a home pregnancy test (available from pharmacies and supermarkets) and see your clinician if you have any concerns.

Can I get pregnant on the pill?

Your chance of getting pregnant on the pill is greater if you:

- are more than 24 hours late taking a hormone (active) pill.
- take herbal medications with ingredients such as St John's Wort. It is important to let your health professional know any medication you are taking.



- have severe vomiting or diarrhoea.
- take prescribed medications such as anti-epileptic drugs and those used to treat tuberculosis.

How do I access it?



You can access the pill in consultation with your clinician, who will give you a script. You may then need to take the script to the chemist.



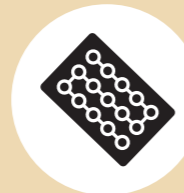
SHQ also offers appointments for contraceptive advice, and can provide you with a script to access the pill.

What if I miss a hormone (active) pill?

If you take a pill from the hormone (active) section of the pack more than 24 hours late, it will not work as well at preventing pregnancy.

If you miss a pill:

- take it as soon as you remember, and take hormone (active) pills continuously for at least seven days, even if this means skipping the inactive pills.
- visit a chemist or clinician about emergency contraception.
- use condoms or don't have vaginal sex for seven days.



To make an appointment at SHQ, please phone our clinic on 08 9227 6177.