WHAT IS THE COMBINATION PILL?
The pill is an oral contraceptive made of synthetic hormones similar to the natural hormones estrogen and progesterone. These hormones stop the ovaries from releasing eggs, so there is no egg for sperm to fertilize. They also change the cervical mucus to prevent sperm from entering the uterus.

HOW EFFECTIVE IS IT?
When the pill is taken correctly, it is 99.7% effective in preventing pregnancy. If you forget to take the pill or do not take it at the same time each day, your chances of getting pregnant are greater, typically 9% in the first year of use.

HOW CAN I GET THE PILL?
You can get a prescription for the pill from Student Health Services, a family planning clinic, or a private doctor. Before the pill is prescribed, you will need to have a medical visit. This visit includes a height, weight and blood pressure check, breast exam (if over 30), and a personal and family health history. You should have this exam once a year. If you are over 21, a physical exam, in addition to the medical visit, is recommended. You may fill your prescription at the Student Health Services pharmacy (reduced rate), or a pharmacy of your choice.

IMPORTANT INSTRUCTIONS FOR PILL USERS
Follow these instructions carefully for maximum pill effectiveness:
- Start your pills the way your clinician suggests. Call the clinic if you have questions.
- After you start, take one pill every day until you finish your pack.
- Take your pill at the same time every day. Taking it just a few hours late may cause spotting or bleeding.
- Take your pill with food or eat numerous small meals per day to help prevent nausea.
- Choose a back-up method of birth control to use if you forget to take your pill, or run out - condoms and/or Emergency Contraceptive Pills (Plan B). You may need to use a second method for the first seven days after you start taking the pill. Discuss this with your clinician. Keep your back-up method on hand, so it is there when you need it!
- If you miss 1 pill, take it as soon as you remember and take the next pill at the regular time.
- If 2 or more consecutive hormonal pills have been missed (≥48 hours since a pill should have been taken):
  ◊ Take the most recent missed pill as soon as possible (any other missed pills should be discarded).
  ◊ Continue taking the remaining pills at the usual time (even if it means taking two pills on the same day).
  ◊ Use back-up contraception (e.g., condoms) or avoid sexual intercourse until hormonal pills have been taken for 7 consecutive days.
  ◊ If pills were missed in the last week of hormonal pills (e.g., days 15-21 for 28-day packs):
    * Omit the hormone-free interval by finishing the hormonal pills in the current pack and starting a new pack the next day.
    * If unable to start a new pack immediately, use back-up contraception (e.g., condoms) or avoid sexual intercourse until hormonal pills from a new pack have been taken for 7 consecutive days.
  ◊ Emergency contraception should be considered if hormonal pills were missed during the first week and unprotected sexual intercourse occurred in the previous 5 days.
  ◊ Emergency contraception may also be considered at other times as appropriate.

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Your period on the pill is often lighter and shorter. It is not uncommon to miss periods occasionally. If you do miss your period, continue taking your pills as directed. If you forget one or more pills and miss a period, or if you miss two periods in a row, come into the clinic for a pregnancy test.

“Breakthrough bleeding” is bleeding between periods. It may be light spotting or as heavy as a period, and may last from one day to a full cycle. This is common when you first start the pill, so don’t be alarmed. Continue to take your pills as directed. You are still protected as long as you haven’t missed your pills. If you have breakthrough bleeding, you may or may not have a period during the week that you are off the pill. Breakthrough bleeding may continue during the first three months you are on the pill.

Other prescription drugs may decrease the effectiveness of the pill. Always consult your clinician if you have any questions or concerns.

If you wish to stop the pill, do so at the end of your cycle pack. Use another birth control method. Your period will resume in 4-6 weeks. If not, return for a pregnancy test.

SIDE EFFECTS OF THE PILL

COMMONLY EXPERIENCED CHANGES

Some first time pill users experience minor changes. These usually go away within three months:
- breast tenderness
- breakthrough bleeding
- nausea
- slight weight loss or gain
- change in moods
- change in vaginal lubrication

If these side effects persist after three months, don’t be discouraged. Make an appointment to discuss a pill change.

SERIOUS SIDE EFFECTS

Young women who are healthy and do not smoke have a very low rate of serious problems from the pill. The main dangers of pill use are to the circulatory system (blood clots, heart attack, stroke). These serious health risks are more likely for smokers, or those recovering from surgery.

Most women who develop serious pill problems have some warning. These are important signs you should know:
- Abdominal pain
- Chest pain or shortness of breath
- Headaches
- Eye problems or blurred vision
- Severe leg pain, numbness or tingling

If you experience any of these symptoms while taking the pill, contact the clinic immediately.

ADVANTAGES

- Highly effective and simple to use
- Allows for spontaneity
- Can decrease premenstrual symptoms, menstrual cramping, benign breast and ovarian cysts, and acne
- Lowers the risk of anemia
- Decreases long term risks for ovarian and endometrial cancer

DISADVANTAGES

- Must be taken every day, whether you are having sex or not
- Does not protect from sexually transmitted diseases – use condoms for protection from infections
- May carry some health risks (see section on side effects)