
Contraception – the combined pill

Summary

- Oral hormonal contraception is very effective in preventing an unplanned pregnancy, when used correctly.
 - The two types of oral contraception available in Australia are the combined pill, known as ‘the pill’, and the mini pill.
 - Oral contraception does not provide protection from sexually transmissible infections (STIs). The best way to reduce the risk of STIs is to use barrier protection such as condoms and dams with all new sexual partners.
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There are two types of oral contraception available in Australia – the combined pill, known as ‘the pill’, and the mini pill. The pill contains the hormones oestrogen and progestogen. The **mini pill** contains only progestogen. Both are taken daily, and are available on prescription. They are very effective forms of contraception if used correctly.

What is the pill?

The pill is a daily tablet (also known as the combined pill or oral contraceptive pill). The pill contains two hormones – oestrogen and progestogen. These are similar to hormones that are produced by the ovaries.

How effective is the pill?

If used correctly the pill is at least 99 per cent effective at preventing pregnancy. Allowing for mistakes, it is 93 per cent effective.

What stops the pill from working?

The pill may not work if:

- you miss a pill or it is taken more than 24 hours late
- you vomit within three hours of taking it
- you have very severe diarrhoea
- you are taking some medications or natural remedies. (Check with your doctor, nurse or pharmacist.)

How do I use the pill?

You use the pill by swallowing one pill around the same time every day.

There are many different brands of the pill. Most come in a 28-day pack that includes both hormone and sugar pills. Speak to your doctor, nurse or pharmacist for advice about which brand is most suitable for you.

You will usually have your period (bleeding from your vagina) while taking the sugar pills. You can skip your period by missing the sugar pills and continuing to take the hormone pills each day.

How does the pill work?

The pill works by stopping the ovaries from releasing an egg each month.

It also thickens the fluid around the cervix (opening to the uterus or womb) to prevent the sperm from entering.

When you start the pill for the first time, or after a break from the pill, it can take up to 12 days to start working to prevent pregnancy. This depends on whether you start with the hormone pill or sugar pill. Speak with a doctor, nurse or pharmacist about the best way to start taking the pill.

Where can I get the pill?

Your doctor can provide a script for the pill which you can take to the pharmacy. Some brands may be more expensive than other brands. Some brands will be cheaper if you have a healthcare card.

What is good about the pill?

The pill can:

- be used to skip your period
- make your periods become lighter, more regular, and less painful
- improve acne
- reduce your chance of getting cancer of the uterus (womb), ovaries and bowel
- help with symptoms of **polycystic ovary syndrome (PCOS)** and **endometriosis**.

Once you stop taking the pill your fertility quickly returns to normal.

Are there any side effects from taking the pill?

Possible side effects for a small number of people who take the pill can include:

- irregular vaginal bleeding
- nausea
- sore or tender breasts
- headaches
- bloating
- changes to your skin
- mood changes.

These side effects often settle with time. The pill has not been shown to cause weight gain.

Can the pill cause any serious health problems?

The pill causes a very small increase in your risk of deep vein thrombosis (blood clot), heart attack or stroke. It may also lead to a tiny increase in your risk of breast cancer. The risk of developing breast cancer due to vaginal ring or pill use in people aged under 35 years is 1 in 50,000.

When is the pill not a good option?

The pill may not be a good option for you if you:

- find remembering to take a daily tablet difficult
- have certain types of migraine or headache
- are very overweight
- have a close family member who has had a deep vein thrombosis
- are taking certain types of medication which might stop the pill from working (check with your doctor, nurse or pharmacist)
- have had some health conditions such as high blood pressure, heart or liver disease (check with your doctor, nurse or pharmacist)
- are over 35 years and smoke
- have been treated for breast cancer
- are unable to move around for a long time (for example, because of surgery or disability).

What if I miss a pill?

If you miss a pill:

- Take the missed pill as soon as you notice (this may mean taking two pills on the same day).
- Continue to take your pills as normal.
- Use condoms for the next seven days.
- If you have had sex without a condom in the seven days before missing a pill, you may need emergency contraception or you may need to skip your next sugar pills and start a new pill pack in the hormone section.

This depends on where you are up to in the pill packet (check with your doctor, nurse or pharmacist).

What happens if I get pregnant while I'm taking the pill?

The pill won't harm the pregnancy. It is safe to continue the pregnancy (and stop the pill) or to have an abortion.

Can I take the pill after I've had a baby?

If you are breastfeeding, do not use the pill until your baby is six weeks old, as it may reduce your supply of breast milk and may increase your risk of **thrombosis**. After six weeks you can use the pill but other types of contraception might be better choices (check with your doctor, nurse or pharmacist).

If you are not breastfeeding, you can start using the pill once your baby is three to six weeks old (check with your doctor, nurse or pharmacist).

What if I'm taking the pill and I want to become pregnant?

You can stop the pill at any time and your fertility will quickly return.

What else should I know about the pill?

The pill:

- does not protect you from sexually transmissible infections (STIs). The best way to lessen the risk of STIs is to use barrier protection such as male and female condoms with all new sexual partners
- can sometime be supplied in small quantities by your pharmacist, without a prescription. If you run out of pills and cannot see a doctor for a new script, speak to a pharmacist. They can often give you a small supply of pills without a script. If possible show them your old pill packet.

Where to get help

- **1800 my options** can provide information on emergency contraception and services that can offer IUD insertion
- Your **GP (doctor)**
- **Pharmacist**
- Many community health services and some public hospitals will have a family planning clinic, a sexual health clinic or a women's health clinic
- **Family Planning Victoria** – comprehensive sexual and reproductive health services for people of all ages Tel. **1800 013 952** or **(03) 9257 0100**

This page has been produced in consultation with and approved by:

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