Oral Contraceptives (OCs)
Who Should or Should Not Use Them

Oral contraceptives (OCs) are medicines taken to prevent pregnancy. They are the most widely used method of reversible (*not permanent*) birth control. OCs work by preventing the ovaries from releasing eggs. They also thicken the mucus in the cervix, preventing the sperm from entering the uterus. And they thin the lining or wall of the uterus, so that the fertilized egg cannot attach to the uterus.

Most OCs use a combination of the hormones estrogen and progesterone. The woman takes an OC for 21 days. She then takes inactive pills until day 28. Inactive pills do not contain hormones. These are "fill-in" pills used to keep the pill taking cycle easier, since you do not need to remember when to stop and start taking pills. Some products include iron in the inactive pills. Most women begin their periods 2 or 3 days after they begin the inactive pills. Your period may be shorter than usual. You should not take the combination OC (*containing both estrogen and progesterone*) if you are breastfeeding your baby.

There are also OCs that only contain progesterone hormone. These are also taken every day. You may have spotting for a menstrual period or no period at all with this OC. The progesterone only OC pill can be taken while you are breastfeeding your baby, with the approval of your caregiver.

Some women may be told by their caregivers to take OCs continuously, without any inactive pills. This may be helpful for women who have moderate to severe premenstrual syndrome. There are now some OC packages with 91 pill days, also called continuous or extended use. You will only have one menstrual period, at the end of the 84th day, during the 7 days when you are on the inactive pill. Discuss this OC package with your caregiver, if you are interested in taking the 91 day OC.

WHO SHOULD PROBABLY AVOID OC?

- Women who smoke, especially smokers over age 35.
- Women who have had cancer of the breast or female organs.
- Women with any liver disease or liver abnormalities.
- Women with migraines, or other headaches with auras or visual disturbances.
- Women who are pregnant or trying to get pregnant.
- Women with a history of or risk factors for stroke or heart disease. This includes high blood pressure (*hypertension*) of 160/100 or greater, or hypertension with blood vessel injury.
- Women who have diabetes with kidney, eye, or other complications related to blood vessel damage, or who have had diabetes for more than 20 years.
- Women with risk factors for blood clotting (*history of thrombophlebitis, pulmonary embolism, or prolonged immobilization after surgery*).
- Women with unexplained vaginal bleeding.
- Women with gallbladder disease.
- Women with mental depression.
- Women with high cholesterol or triglycerides (*chemical form of fat in the body*).
- Women with heart valve disease.
- Women who are breastfeeding, except for the progesterone only OC, with approval of your caregiver.

WHAT ARE THE COMMON USES OF OC?

- Decreasing premenstrual problems.
- Relieving cramps with the menstrual period.
- Preventing pregnancy.
- Regulating irregular menstrual cycles.
- Treating abnormal uterine bleeding, once you know there is no cancer causing the bleeding.

- Treating chronic pelvic pain.
- Treating polycystic ovary syndrome (*ovary does not produce eggs but causes many tiny cysts*).
- Treating endometriosis (*uterus lining tissue growing outside of the uterus*).
- OC can be used for emergency contraception.
- Treating acne.
- Controlling heavy and/or very long menstrual periods.
- Treating fibrocystic breast disease (*cysts in the breast*).

WHAT ARE THE BENEFITS OF TAKING OC?

OC can lower the risk of:

- Cancer of the uterus and ovary.
- Cysts developing on the ovary.
- Pelvic inflammatory disease (PID).
- Anemia from heavy menstrual periods.
- Tubal (*ectopic*) pregnancy.
- Bone loss (*osteoporosis*).
- Helps with fibrocystic breast changes.
- Helps with acne, in most cases (can cause acne in some women).

WHO SHOULD BE ABLE TO USE OC?

- Any woman (including over age 35) with no risk factors that would prevent you from taking OCs.
- Women with mild headaches, or migraines without auras or visual disturbances.
- Women who have controlled diabetes without any blood vessel related complications, and who have had diabetes for less than 25 years, with close medical supervision.
- Women with a history of abnormal, precancerous Pap smears, with close medical supervision.
- Any woman who wants to begin taking OC should:
  - Have a complete physical examination and Pap test.
  - Give her caregiver a complete medical and surgical history.
  - Understand the side effects and risks involved.

HOME CARE INSTRUCTIONS

- Do not smoke.
- Only take over-the-counter or prescription medicines for pain, minor headache discomfort, or breast discomfort or tenderness.
- Always use a condom to protect against getting a sexually transmitted disease.
- Call your caregiver if you do not have a menstrual period.

SEEK MEDICAL CARE IF:

- You develop nausea and/or vomiting.
- You have abnormal vaginal discharge.
- You need treatment for headaches.
- You develop a rash.
- You develop abnormal vaginal bleeding.
- You are losing your hair.
- You need treatment for mood swings or depression.
- You develop acne.
- You get dizzy from taking OC.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop leg pain.
- You develop chest pain.
- You develop shortness of breath.

- You develop abdominal pain.
- You have an uncontrolled headache.
- You develop numbness or slurred speech.
- You develop visual problems (loss, blurred, or double vision).
- You develop heavy or prolonged vaginal bleeding, more than you normally have while taking OC.

Recommendations, types, and dosage for birth control use change continually. Discuss your choices with your caregiver and decide what is best for you. There are always exceptions to all guidelines. Always read the literature you are given and check to find out if there are new recommendations or guidelines for you.

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