your guide to the progestogenonly pill

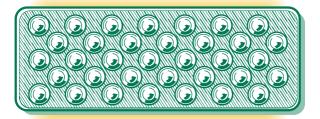
Helping you choose the method of contraception that is best for you



The progestogenonly pill (POP)

This pill contains a progestogen hormone which is similar to the natural progesterone women produce in their ovaries.

Progestogen-only pills (POPs) contain different types of progestogens. POPs containing desogestrel will be named specifically where relevant in this booklet. If you are not sure what type of progestogen is in your POP check the



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patient information leaflet inside your pack or ask your doctor or nurse.

POPs are different to combined pills because they do not contain any estrogen.

How effective is the POP?

How effective any contraceptive is depends on how old you are, how often you have sex and whether you follow the instructions.

If 100 sexually active women don't use any contraception, 80 to 90 will become pregnant in a year.

If taken according to instructions the POP is over 99 per cent effective. This means that less than one woman in 100 will get pregnant in a year.

If the POP is **not** taken according to instructions, more women will become pregnant.

How does the POP work?

The POP works in a number of ways.

• The main action of desogestrel POPs is to stop

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your ovaries releasing an egg (ovulation). Other types of POP sometimes stop you releasing an egg.

- All POPs work by thickening the mucus from your cervix. This makes it difficult for sperm to move through it and reach an egg.
- All POPs make the lining of your uterus (womb) thinner so it is less likely to accept a fertilised egg.

Where can I get the POP?

You can go to a contraception or sexual health clinic, or general practice. If you prefer not to go to your own general practice, or if they don't provide contraceptive services, they can give you information about another practice or clinic. All treatment is free and confidential. You don't need to have a vaginal or breast examination or cervical screening test when you are first prescribed the POP.

Can anyone use the POP?

Most women can use the POP but a doctor or nurse will ask you about your own and your family's medical history. Do mention any illness or operations you have had. Some of the conditions which **may** mean you should not use the POP are:

- you think you might already be pregnant
- you take certain medicines.

You have now or had in the past:

- heart disease or a stroke
- disease of the liver
- systemic lupus erythematosus
- current breast cancer or breast cancer within the last five years.

If you are healthy and there are no medical reasons for you not to take the POP, you can take it until your menopause or until you are 55 years.

What are the advantages of the POP?

Some of the advantages of the POP are:

- you can use it if you are breastfeeding
- it is useful if you cannot take estrogens, like those found in the combined pill, contraceptive patch or contraceptive vaginal ring
- you can use it at any age, but it is especially useful if you smoke and are 35 or over
- it may help with premenstrual symptoms and painful periods.

What are the disadvantages of the POP?

There are no serious side effects with the POP. However:

- It is common for your periods to change while you are taking the POP. Bleeding may be irregular, light, more frequent, last longer or stop altogether. This may settle down and is not harmful. If you have any concerns, see your doctor or nurse. Changing to a different POP may help.
- The POP does not protect you against sexually transmitted infections, so you may need to use condoms as well.
- You have to remember to take the pill at the same time every day.
- You may get some side effects when you first start taking the POP, such as spotty skin, breast tenderness, weight change and headaches. These may stop within a few months.

Are there any risks?

The POP is a very safe pill to take but there are some risks.

- Some women may develop small fluid-filled cysts on their ovaries. These are not dangerous and do not usually need to be removed. Often there are no symptoms, but some women may have pelvic pain. These cysts usually disappear without treatment.
- Research about the risk of breast cancer, cervical cancer and hormonal contraception is complex and contradictory. Research suggests that users of all hormonal contraception appear to have a small increase in risk of being diagnosed with breast cancer compared to non-users of hormonal contraception.
- If you do become pregnant while you are using the POP there is a risk of you having an ectopic pregnancy (see page 9).

How do I start the POP?

You can start the POP any time in your menstrual cycle if it is certain you are not pregnant.

If you start the POP on the first day of your period you will be protected from pregnancy immediately.

You can also start the POP up to and including the fifth day of your period and you will be protected from pregnancy immediately.

However, if you have a short menstrual cycle with your period coming every 23 days or less, starting the POP as late as the fifth day of your period may not provide you with immediate contraceptive protection. This is because you may ovulate early in your menstrual cycle. You may wish to talk to your doctor or nurse about this and whether you need to use an additional contraceptive method for the first two days.

If you start the POP at any other time in your menstrual cycle, use another contraceptive method, such as condoms, for the first two days of pill-taking.

I've just had a baby. Can I use the POP?

The POP can be started any time after the birth. If you start the POP after day 21 you will need to use additional contraception for two days. You can breastfeed while you are taking the POP. A tiny amount of hormone enters your breast milk, but research has shown this will not harm your baby.

Can I use the POP after a miscarriage or abortion?

You can start taking the POP immediately after a miscarriage or abortion. You will be protected from pregnancy immediately.

How do I take the POP?

When taking your first pill choose a convenient time to take it. This can be any time of the day. Once you have chosen a time you must then take one POP each day at this same time until you finish all the pills in the pack.

You then start a new pack the next day so there are no breaks between packs.

What if I forget to take it on time?

For your pill to work it is important not to take it more than three hours (12 hours for pills containing desogestrel) after your chosen time. If you remember later than this, see page 9.

What if I want to change to a different pill?

If you are changing to another POP (or from the combined pill) you may be advised to start the new pill immediately or start the day after you take your last pill. Do not have a break between packs. There is no need to wait for your period. You will then continue to have protection from pregnancy.

What should I do if I am sick or have diarrhoea?

If you vomit within **two** hours of taking the POP, it will not have been absorbed by your body.Take another pill as soon you feel well enough. As long as you are not sick again your contraception will not be affected.Take your next pill at the normal time. If you continue to be sick, seek advice.

If you have very **severe** diarrhoea that continues for more than **24 hours**, this may make the POP less effective. Keep taking your pill at the normal time, but treat each day that you have severe diarrhoea as if you had missed a pill and follow the missed pill instructions in the box on page 9.

If I take other medicines will it affect my POP?

If you are given medicines by a doctor, nurse or hospital always say you are taking the POP. Commonly used antibiotics do not affect the POP. Medicines such as some of those used to treat epilepsy, HIV and TB and the complementary medicine St John's Wort may make it less effective. These types of drugs are called enzyme-inducers. If you take these medicines, talk to your doctor or nurse about how to take the POP - you may need to use a different method of contraception.

What should I do if I think I'm pregnant?

If you took all your pills correctly and you didn't have an upset stomach or take any other medicines which might affect the POP, then it is unlikely you are pregnant. Continue to take your pills as normal. There is no evidence that if you

What do I do if I miss a pill?

If you are more than three hours* late

- Take a pill as soon as you remember. If you have missed more than one, only take one.
- Take your next pill at the usual time. This may mean taking two pills in one day. This is not harmful.
- You are **not** protected against pregnancy. Continue to take your pills as usual but use an additional method of contraception, such as condoms, for the next two days.
- If you have had unprotected sex during this time you may need emergency contraception. Seek advice immediately.

If you are less than three hours* late

 Take a pill as soon as you remember, and take the next one at the usual time. You are protected from pregnancy.

*12 hours if you are taking a desogestrel POP

take the POP when you are pregnant it will harm the baby. If you are worried ask your doctor or nurse for advice or do a pregnancy test. Taking the POP does not affect a pregnancy test.

If you do become pregnant there is a risk of ectopic pregnancy (where the pregnancy develops outside your uterus, usually in a fallopian tube). Seek medical advice as soon as possible if you have a sudden or unusual pain in your lower abdomen (this might be a warning sign of an ectopic pregnancy) or if you think you might be pregnant.

I want to have a baby. Can I try to get pregnant as soon as I stop taking the POP?

You can try to get pregnant as soon as you stop taking the POP. You can stop taking the pill at any time. Ideally you should wait for one natural period before trying to get pregnant, so you will need to use another method of contraception, such as condoms. This means the pregnancy can be dated more accurately and you can start pre-pregnancy care such as taking folic acid and stopping smoking. You can ask your doctor or nurse for advice. Don't worry if you get pregnant sooner, it will not harm the baby.

How often do I need to see a doctor or nurse?

When you first start the POP you can be given up to a 12 months' supply. After that you should go back to the doctor or nurse if you have any problems or concerns and when you need to get a new supply of the POP.

Where can I get more information and advice?

The Sexual Health Information Line provides confidential advice and information on all aspects of sexual health. The number is 0300 123 7123 and the service is available from Monday to Friday from 9am - 8pm and at weekends from 11am -4pm.

For additional information on sexual health visit www.fpa.org.uk

Information for young people can be found at www.brook.org.uk

Clinics

To locate your closest clinic:

- Use Find a Clinic at www.fpa.org.uk/clinics
- Download FPA's Find a Clinic app for iPhone or Android.

You can find details of general practices and pharmacies in England at www.nhs.uk and in Wales

at www.nhsdirect.wales.nhs.uk. In Scotland you can find details of general practices at www.nhs24.com and in Northern Ireland at www.hscni.net

Emergency contraception

If you have had sex without contraception, or think your method might have failed, there are different types of emergency contraception you can use.

- An emergency contraceptive pill containing levonorgestrel – can be taken up to three days (72 hours) after sex. More effective the earlier it is taken after sex. Available with a prescription or to buy from a pharmacy. There are different brands but they all work the same way.
- An emergency contraceptive pill containing ulipristal acetate – can be taken up to five days (120 hours) after sex. Available with a prescription or to buy from a pharmacy. ellaOne is the only brand in the UK.
- An IUD can be fitted up to five days after sex, or up to five days after the earliest time you could have released an egg (ovulation).

Ask your doctor, nurse or pharmacist about getting emergency pills in advance, just in case you need them.

Sexually transmitted infections

Most methods of contraception do not protect you from sexually transmitted infections.

Male and female condoms, when used correctly and consistently, can help protect against sexually transmitted infections. If you can, avoid using spermicidally lubricated condoms. The spermicide commonly contains a chemical called Nonoxinol 9, which does not protect against HIV and may even increase the risk of infection.

A final word

This booklet can only give you general information about the progestogen-only pill. The information is based on evidence-guided research from the World Health Organization and The Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists. All methods of contraception come with a Patient Information Leaflet which provides detailed information about the method. Remember – contact your doctor, practice nurse or a sexual health clinic if you are worried or unsure about anything.



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The information in this booklet was accurate at the time of going to print. Booklets are reviewed regularly. Next edition available in 2016.

If you would like information on the evidence used to produce this booklet or would like to provide us with feedback about this booklet email feedback@fpa.org.uk



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