Mechanism of Action:
Oral Contraceptives are pills taken by mouth to prevent conception (pregnancy). The action takes place by:
- Suppressing ovulation
- Producing changes in the endometrium that makes it unreceptive to implantation
- Producing a thickened cervical mucus

Benefits of this Method:
- Highly effective: 99.66% for combination pill (0.1 pregnancy per year).
- Sexual spontaneity
- Regulated menstrual flow
- Lighter flow and less cramping
- Decreased incidence of uterine and ovarian cancers
- Relief of symptoms associated with peri-menopause

Risk of Method:
**Minor side effects** (are rare and usually subside after several months of pill use; may be alleviated by changing type of pill or discontinuing pill). Listed are a few more common, although rare, side effects:
- Nausea (try taking pill with a meal or with milk; with severe nausea/vomiting use back up method of birth control such as condoms)
- Spotting
- Decreased menstrual flow and sometimes missed periods
- May have more problems with yeast infections or vaginal discharges
- Depression or mood changes
- Acne
- Headaches

**Major side effects** (rare in women who are non-smokers under 40)
- Blood clots
- Hypertension (high blood pressure)
- Gallbladder disease
- Heart attack (smokers age 35 and older)
- Smoking doubles risk factors associated with pill use. These side effects are characterized by the following danger signals (if they occur, seek medical care IMMEDIATELY):
  - pain
  - redness
  - swelling of the legs
  - abdominal pain
  - persistent and severe headache
  - chest pain and/or difficulty breathing
  - blurred vision
  - flashing vision

Contraindications:
Women with a history of any of the following conditions should not use oral contraceptives

<table>
<thead>
<tr>
<th>Thromboembolic disorders</th>
<th>Sickle cell disease</th>
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<tbody>
<tr>
<td>Cancer of breast or reproductive system</td>
<td>40 years of age or older accompanied by second risk factor</td>
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<tr>
<td>Hypertension (high blood pressure: coronary artery disease)</td>
<td>35 years or older and currently heavy smoker pregnancy</td>
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<tr>
<td>Hyperlipidemia (high cholesterol)</td>
<td>undiagnosed genital bleeding</td>
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<tr>
<td>Stroke</td>
<td>Impaired liver function at present time</td>
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Alternate Methods of Birth Control

| Abstinence | Sterilization, NFP | Condom used with contraceptive cream, jelly or foam, contraceptive suppositories or tablets, vaginal film |
| Intrauterine device | Contraceptive sponge | |
| Diaphragm with contraceptive cream or jelly | Norplant | |
| Female condom | Norplant | |

Inquiries are encouraged. Please ask us questions:
a change in decision does not create a problem
Way in which oral contraceptives are prescribed

- A complete physical examination is done, including blood pressure, weight, gynecologic examination with Papanicolaou smear (unless one was done within the past year).
- If more than 3 months have elapsed since a complete physical examination, you may have a pelvic (bimanual) examination done prior to being prescribed an oral contraceptive.
- You must review and sign this informed consent prior to your first prescription for oral contraceptives and yearly thereafter. You will be given a copy of these instructions.
- You may transfer your records from another clinic or physician’s office.

Way in which pill is taken

- Start taking your first package of pills as directed by your nurse practitioner.
- Oral contraceptive pills are always started initially at the same time as your period.
- Swallow one pill at the same time daily.
- A second form of contraception is recommended for the first 7 days after starting the pill (unless specified differently).
- Some medications can decrease effectiveness or cause other pill-related problems (e.g., break-through bleeding). Always mention to your health care provider and pharmacist that you are on oral contraceptives prior to starting any other medication. Also tell us if you are on any medications prior to starting oral contraceptives. Use a back-up method of birth control if you have any doubts about the possibility of a drug interaction.
- If you are taking prescribed antibiotics for an illness, you should continue your pill, but use a back-up method.
- Breakthrough bleeding (spotting) is common during the first few months a woman is on an oral contraceptive; do not be alarmed if you experience this.
- If you experience spotting after several months of pill use, make sure you are taking the pill correctly, as directed below.
- If the pill is taken improperly, breakthrough bleeding may occur. You must make every effort to take your pill at the same time every day.
  1. If you take your pill more than 6 hours late, take the pill when you remember it; you are also advised to use a second method of birth control for the next 7 days.
  2. If you miss one pill; take the pill when you remember and then take the scheduled pill at the regular time. A second method of birth control is recommended for the 7 days.
  3. If you miss 2 pills in the first 2 weeks of a pill pack; take 2 pills at the regular time and then take 2 pills at the regular time the next day, and use a second method of birth control x 7 days.
  4. If you miss 2 pills in the third week, or if you miss 3 or more pills at any time, and you start packets on Sunday, take a pill each day until Sunday, then discard the remainder of that pack and start a new pack immediately, omitting the hormone-free week (If you don’t start a new pack on Sundays, throw away rest of pill pack and start a new pack that day.) A back-up method of birth control should be used for the first 7 days of this new pill pack.
  5. If you miss 1 or more pills and used no back-up method and have no period, call to discuss possible pregnancy test.
  6. If you aren’t sure what to do about missed pills, use a back-up method any time you have sex and keep taking a birth control pill (hormone pill) each day until you can talk with your health care provider.

Occasionally, withdrawal bleeding (your period) does not occur during the week of non-hormone pills (placebos).

- If this happens to you and all pills have been taken properly, continue with next pill cycle. If you miss two periods, start your third cycle, but call your women’s clinic for advice.
- If this happens to you and you have taken your pill late or forgotten to take it, and did not use a second birth control method, start your next pill packet, but call your women’s clinic for advice.
- If you experience severe vomiting and/or diarrhea, use a back-up method of birth control since the pill may not have been absorbed properly. (You can put the pill under your tongue and let it dissolve.)

Danger Signals Associated with Pill Use

Abdominal pain (severe)   Chest pain (severe)   Headaches (severe)
Eye problems such as blurred vision or loss of vision   Severe leg pain (calf or thigh)

I have read the above material and it has been fully explained. I have been given the opportunity to ask questions and I understand the information. I have chosen to use an oral contraceptive.

Signed: ___________________________ Date: ___________________________
Witness: ___________________________ Date: ___________________________

Contact us at 254-968-9271 if you develop any of the above problems