HEALTH BASICS

Birth control pills

Birth control pills are daily hormonal medicines used to reduce the chance of pregnancy.

WHAT IT IS
Daily hormonal medicines used to prevent pregnancy

WHERE IT COMES UP
Choosing contraception, changing methods, or reviewing medicines

WHY IT MATTERS
Lowers pregnancy chance and may change bleeding patterns

WHAT IT IS NOT
Not a disease or protection from sexually transmitted infections

WHO TO ASK
Primary care, sexual health, or family planning clinician

HOW IT IS CHECKED
Health history and blood pressure for combined pills

Overview

Birth control pills are medicines taken on a regular schedule to reduce the chance of pregnancy. They are also called oral contraceptives.

There are two main types:

Different products have different hormone amounts and instructions. Some packages include inactive pills that contain no hormones. These help you keep the daily routine while bleeding may occur.

Birth control pills do not protect against sexually transmitted infections, or STIs. Condoms can lower the risk of many STIs.

The pill is not the same as emergency contraception or medication abortion. It does not end an existing pregnancy.

- Combined pills contain estrogen and progestin, laboratory-made versions of hormones produced by the body
- Progestin-only pills contain progestin but no estrogen

How it works

Combined pills mainly prevent the ovaries from releasing an egg. This is called stopping ovulation . Without an egg, pregnancy cannot begin.

They also thicken mucus at the cervix, the opening to the uterus. This makes it harder for sperm to reach an egg. The lining inside the uterus also becomes thinner.

Progestin-only pills always affect cervical mucus. Some types also stop ovulation more consistently than others. This is one reason timing and missed-pill instructions differ between products.

The pill only works while it is being used. Its effectiveness can fall if active pills are missed, started late, or not absorbed because of vomiting or severe diarrhea. Certain medicines and herbal products can also lower hormone levels.

After stopping the pill, the ability to become pregnant generally returns without a required waiting period. A person's natural menstrual pattern may take some time to become clear again.

Why it matters for your health

Birth control pills offer a reversible form of contraception that you control yourself. They work best when taken according to the instructions for the specific product.

The pill can change menstrual bleeding. Bleeding may become lighter, more predictable, or less painful. Some people use particular pills to help manage heavy periods, menstrual cramps, acne, or endometriosis-related pain. These uses should be discussed with a clinician because the best option depends on your health and goals.

Possible unwanted effects include spotting between periods, nausea, breast tenderness, headaches, or mood changes. These effects may improve after the first few months, but persistent or troublesome changes deserve routine follow-up. New headaches should be discussed, especially if they include visual changes, numbness, or other features of migraine aura.

Estrogen-containing pills can increase the risk of a blood clot in a deep vein or the lungs. They can also affect blood pressure. The overall choice requires comparing these risks with the person's medical history and with the health risks of pregnancy.

Progestin-only pills avoid estrogen-related risks and may be suitable when estrogen is not recommended. They still require an individual review, particularly with a history of breast cancer, significant liver disease, unexplained bleeding, or interacting medicines.

What can go wrong

Pregnancy can occur if pills are missed, taken later than the product allows, or started incorrectly. The correct response may include taking a missed pill, using backup contraception, or considering emergency contraception. The details depend on the pill type, how many active pills were missed, and where you are in the package.

Vomiting soon after taking a pill may prevent absorption. Ongoing vomiting or severe diarrhea can also reduce protection. Follow the package instructions for missed pills and ask a pharmacist or sexual health service if the instructions are unclear.

Most antibiotics like amoxicillin or doxycycline do not make birth control pills less effective. Important exceptions include rifampin and rifabutin, which are used for certain infections. Some medicines for seizures, HIV, or other conditions can also interfere with the pill. The herbal product St John's wort may lower hormone levels.

Combined pills may not be appropriate in situations including migraine with aura, uncontrolled high blood pressure, a previous blood clot, stroke, some heart conditions, certain liver disorders, or current breast cancer. Smoking is especially important to discuss for people aged 35 or older. Estrogen may also be unsuitable for a period after childbirth because blood-clot risk is higher.

Seek routine medical advice if bleeding changes remain troublesome, headaches are new or worsening, you think another medicine may interact with the pill, or you want to change methods. Arrange a pregnancy test or clinical advice if expected bleeding does not occur and pills were missed.

Seek urgent or emergency care for sudden shortness of breath, chest pain, coughing up blood, one-sided leg swelling, sudden weakness or numbness, loss of vision, or a sudden severe headache. These can be warning signs of a blood clot, stroke, or another serious condition.

A positive pregnancy test with severe one-sided lower abdominal pain, shoulder-tip pain, marked dizziness, or fainting also needs urgent assessment. These can be signs of an ectopic pregnancy, when a pregnancy develops outside the uterus.

What you can do

Find the exact name of your pill and whether it is combined or progestin-only. Keep the package leaflet because it contains the correct timing and missed-pill instructions for that product.

Before starting a combined pill, expect questions about migraine, smoking, blood clots, blood

pressure, heart or liver conditions, breast cancer, recent childbirth, and current medicines. Blood pressure should be measured. A pelvic examination or cervical screening test is not usually required solely to start the pill.

Practical steps include:

There is no home test that confirms the pill is working. Correct use, attention to interactions, and following missed-pill guidance are what support protection.

Do not stop a medicine prescribed for another condition because you are worried about an interaction. Ask a pharmacist or prescribing clinician to check whether your contraception needs to change.

- Take the pill according to its specific daily schedule
- Use a phone reminder or link it to a regular activity
- Check the leaflet immediately after a late or missed pill
- Keep a list of prescriptions, supplements, and herbal products
- Ask whether backup contraception is needed after missed pills
- Use condoms when STI protection is wanted
- Take a pregnancy test when advised after missed pills or unprotected sex

Common questions

Do birth control pills cause infertility?

There is no required "cleansing" period after stopping the pill. Ovulation may return quickly, although natural cycles may be irregular for a time.

Do I need to take a break from the pill?

A routine break is not needed for health reasons. Some combined pills can be taken with fewer or no hormone-free intervals, but the schedule should match the product and your clinician's advice.

What should I do if I miss a pill?

Check the instructions for your exact brand or formulation. Advice differs between combined and progestin-only pills and can differ among progestin-only products. If unprotected sex occurred, ask promptly whether emergency contraception is appropriate.

Can I take the pill while breastfeeding?

Progestin-only pills can often be used while breastfeeding. The timing of estrogen-containing

pills after childbirth requires more care because of blood-clot risk and possible effects on milk supply.

Will the pill affect other medicines?

The pill can interact with some medicines, and some medicines can reduce contraceptive protection. Ask a pharmacist to review new prescriptions, over-the-counter products, and herbal supplements.

Can the pill be used to avoid monthly bleeding?

Some combined pills can be used continuously or with fewer inactive pills. Breakthrough spotting can occur. Ask whether your particular pill is suitable for this schedule.

What if I want protection that does not require a daily pill?

Other reversible options include injections, implants, intrauterine devices, patches, rings, and barrier methods. A sexual health or family planning service can explain how their use, benefits, and risks differ.

Sources

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