

fact sheet

Combined Oral Contraceptive: "The Pill"

The combined oral contraceptive (COC), or "the pill," is a method of hormonal birth control. The pill contains estrogen and progestin hormones. Brands include Loestrin, Ortho Tri-Cyclen, Yaz, and Yasmin. The pill has many benefits beyond birth control. Many people use it to help with acne, premenstrual syndrome (PMS), or their periods. The pill does NOT protect against sexually transmitted diseases (STDs).

How does it work?

The hormones in the pill prevent pregnancy in several ways. Estrogen prevents ovulation while progestin increases the thickness of cervical mucus and thins the uterine lining. These actions hinder sperm travel, egg release, and implantation in the uterus.

How well does it work?

When used correctly, the pill is over 99% effective in preventing pregnancy, but missing pills or taking them late is common, so the overall effectiveness drops to 91% with typical use.

How do I take it?

The pill is taken by mouth at the same time every day with or without food. Most combination pills come in packs of 28, where the last four or 7 days are placebos ("sugar pills") that do not contain any hormone. You should expect to get your period during the hormone-free days.

What if I forget to take it on time?

It's very important to take all the hormone pills on time.

- If you are late or miss one pill and remember before your next pill is due, take the late pill as soon as possible and resume your normal pill schedule. It is okay to take 2 pills in one day.
- If you miss 2 or more pills, take the most recent missed pill as soon as you remember and resume your normal pill schedule. Throw away any other pills that were missed. Use backup birth control, like condoms, for the next 7 days.
- If pills from the last week of hormones (days 15-21 for 28-day pill packs) were missed, skip the hormone-free period by finishing the hormone pills in the current pack and starting a new one the next day.

You may also consider using emergency contraception like Plan B One-Step (levonorgestrel), but not Ella (ulipristal acetate).

Missing any or all of the placebo pills is okay; no further action is needed to prevent pregnancy, but it is good practice to take them as regularly as the hormone pills so that you can maintain the habit and routine.

What if I want to get pregnant soon?

The pill is a great option if you plan to become pregnant within the next year. It is possible to get pregnant as soon as you stop taking the pill.

What are some side effects I might experience?

Though rare, there are serious side effects that can occur when using the pill. These include blood clots, heart attacks, and strokes. If you experience sudden and/or severe pain in your stomach, chest, head, or legs with or without dizziness, nausea, vomiting, difficulty breathing, or changes in vision or mental status, call your healthcare provider right away and/or get to an emergency room. Other possible side effects are headaches, breast tenderness, changes in mood, sex drive, and bleeding patterns. These usually improve after a few months. On the bright side, the pill may help with acne and make periods lighter and more regular.

Is it right for me?

The pill is safe for many people. Some health conditions (history of blood clots, high blood pressure, migraine, smoking, and age over 35) make it unsafe to use the pill, so the progestin-only "minipill" can be used instead. (Find the minipill fact sheet [here](#).) Another consideration is the ability to remember to take the pill on time all the time. If you travel often and find it difficult to schedule your doses while keeping time zones in mind, the pill may not be the best option for you.