

Continuous pill taking – *the 21st century way to take the pill*

This leaflet should be read along with the latest FPA Leaflet which can be downloaded from www.fpa.org.uk/sites/default/files/the-combined-pill-your-guide.pdf

[BUT, please disregard anything there about stopping the pill for 7 days after 21 tablets, and about extra precautions if pills are missed – instead, see below: **Managing missed or late pills during continuous use.**]

What is continuous pill taking?

- This is a way of taking the pill leaving out the regular pill free break – i.e. **not** in the usual 21 tablets then stopping for 7 days way (21/7 for short).
- This is an “off licence” prescription. Yet it is supported by medical authorities in the UK and by WHO: there’s lots of evidence for it making your pill much safer, contraceptively. We have known for some time that the routine of *not taking tablets for 7 days weakens the pill’s main effect* of stopping your ovaries from releasing an egg: so it makes egg-release more likely when pills are missed. Since it’s quite common to forget 1 or 2 pills, ordinary women find the method lets them down about 10 times more often than if “over 99% effective” was true, in the real world.
- It also means you don’t have to have regular monthly bleeds, which have no known benefits.
- A non-phasic 20 mcg oestrogen pill is best - your healthcare provider will be able to tell you this.

What are the benefits for me?

- As just said, it makes the pill more effective as a contraceptive.
- It reduces problems such as period pain, PMT, migraine and other headaches, and more.
- It’s convenient for when you want to avoid bleeding e.g. for holidays and special occasions.

How do I take the pill continuously?

- Start your pill on the correct day of the week (as shown on the strip).
- Take one pill at about the same time each day, at a time that is easy for you to remember.
- Take all the pills in that strip, and then start the next strip without a break.
- Keep taking the strips without a break

How long can I take the pill continuously?

Indefinitely – until either you choose another method or your surgery/clinic advises this.

Isn’t it better for me to have “periods” every month?

- The “period” on the pill is completely artificial and is just your womb’s response to the break from the pill (and therefore the hormones) for a few days. It is called a “hormone withdrawal bleed”.
- There’s no blood coming away because no blood is there **to** come away – it’s not being regularly released into your womb because continuous pill-taking stops that happening. And anyway:
- The method is so effective women do not need a monthly bleed to show they are not pregnant.

What happens if I get bleeding while taking the pill continuously?

- Irregular bleeding and/or ‘spotting’ during the first months of continuous pill-taking can occur, but most women find this becomes acceptable as it lessens over time and may then cease.
- If the bleeding is troublesome to you, e.g. by continuing unacceptably, and has not settled after 21 pills in a row since you first started the pill, or after waiting at least 3 weeks since any earlier break: stop taking tablets for just 4 days. No need to contact the surgery or clinic first. Also:
 - Unless you also missed other tablets for any reason in the previous **week**, no need to take extra precautions when you take that break. Then, regardless of bleeding you get (or don’t get):
 - Restart your pill taking the correct pill for that day, leaving out the 4 unused pills. Continue as before. Having this 4-day break whenever you want to usually works, to stop or improve the bleeding. But if it does not settle, as you would like, after allowing that 3 weeks-plus of tablet-taking after a break, you should get advice from your surgery/clinic in case you need a check-up to exclude other causes of bleeding e.g. Chlamydia.

***What is an “off licence” prescription?**

- All medicines have a product licence. The licence tells us under which conditions the medicine can be prescribed for patients.
- If expert medical opinion is that a medicines can be used also in different ways or under different conditions, this is called prescribing “off-licence”.
- This prescribing off-licence is as safe as taking the pill in the standard way because we still follow medical guidelines.

OTHER POINTS ABOUT CONTINUOUS PILL TAKING

How do I start this pill?

Just like the 21/7 version. Do as described on page 8, or if you’ve just had a baby the bottom of page 13, of the FPA’s **Your guide to the combined pill**. Also:

- You can start any pill straight away if you are already on a safe method such as the Implant, Injection or the IUD or IUS.

Managing missed or late pills during continuous use

- You can miss up to four pills and still be protected against pregnancy, even if you had sex in that week.
 - Restart your strip of pills straight away.
 - Extra precautions for 7 days? Not required – except, unusually, if you had NOT taken at least 7 pills in a row ahead of the first missed one.
 - No need for emergency contraception.
 - Continue with the next strip without any more breaks in pill taking.
- If you miss five or more pills:
 - Restart the pill and use condoms or abstain from sex for seven days.
 - Please contact or attend the surgery/clinic, to discuss your contraception.
 - You should do a pregnancy test after 3 weeks.

What if I have vomiting and/or severe diarrhoea?

These might affect your absorbing pills properly, but no worse than missing tablets.

- No extra precautions unless either or both last for 5 or more days.
- If they do (or earlier), contact or attend your surgery/clinic.
- Mean time continue pill-taking.

If I take other medicines will it affect my pill?

See the answer to this question on page 13 of the FPA’s **Your guide to the combined pill**.

- Continue pill-taking.
- Contact your surgery/clinic without delay, for advice about your future contraception.

How often should I come back for follow up?

- Once you are settled on the pill you usually only need an annual check for any changes to your medical history, family history, drug history or allergies. You will also have your blood pressure and may also have your weight and height checked.
- If at any other time you have any questions, have a problem or want to switch methods, make an appointment with your surgery/clinic for review.