Tailored Pill Taking

The way you take your combined hormonal contraceptive pill (CHC) is changing. When it was developed, it was designed to be taken for 21 days followed by a 7 day break in order to mimic the natural cycle and make it more acceptable. It was illegal to take contraceptive treatment in the USA at the time and this allowed women to take control of their family planning. The reasons were social therefore and not physiological.

The CHC works by preventing your ovaries from releasing an egg. Not taking your pill for 7 days weakens this effect and, in a small percentage of women an egg is released and therefore putting them at risk of pregnancy.

It is therefore advised that the pill free interval is reduced. The bleed on the pill is artificial and unnecessary so current advice is to take the pill continuously. We do understand that some women prefer to have a bleed. There are 3 ways to take the pill outlined below.

Option 1:

Take the pill continuously (every day). If you bleed for 2 days in a row, take a break for **4 days.** You can pop these 4 pills out of the pack so that you start again on the correct day of the week. Restart the pill daily until you have a further 2 day bleed and repeat the process. You should take the pill for at least **14 days consecutively** between your 4 day breaks.

Option 2:

Take four packs back to back and then have a 4 day break i.e. you will have 4 periods a year. If you choose this option and have an event e.g. a wedding and you know you will be due your 4 day break at this time, you can take the break earlier.

Option 3:

If you prefer to continue to have a monthly bleed you can take the pill for **24 days** and then take your 4 day break.

For all options, do not take your 4 day break within the first pill packet (if new to the pill) i.e. 21 tabs.

There is no evidence of harm to take the pill continuously and these methods are supported by the Faculty of Sexual and Reproductive Medicine (FSRH), Royal College of General Practitioners (RCGP) and the World Health Organisation (WHO).

If you have bleeding or spotting more than every 2 weeks you should see your GP.