Progestogen-only pill

Progestogen-only pills (POPs) contain a progestogen hormone similar to the natural progesterone produced by the ovaries.

Different POPs can contain different types of progestogen. POPs with a type called desogestrel are mentioned below, where relevant. If you're not sure what type of progestogen is in your POP, check the leaflet inside your pack or ask your doctor or nurse.

Effectiveness

- Perfect use: If the POP is always taken according to instructions it's over 99% effective. This means that less than 1 POP user in 100 will get pregnant in 1 year.
- Typical use: If the POP is not always used according to instructions, about 9 in 100 POP users will get pregnant in 1 year.

Who can use it?

Most women can use the POP.

- It may not be suitable if you've had certain conditions such as breast cancer, heart disease or a stroke or disease of the liver.
- A doctor or nurse will ask about your own and your family's medical history.

If you're healthy and there are no medical reasons for you not to take the POP, you can use it until your menopause or until you're 55.

After having a baby: The POP can be started any time after you give birth. You can breastfeed while you are taking the POP.

How it works

- POPs with desogestrel stop your ovaries releasing an egg (ovulation). Other POPs sometimes do this.
- All POPs thicken the mucus from your cervix (neck of the womb) to make it more difficult for sperm to reach an egg.
- All POPs make the lining of your uterus (womb) thinner so a fertilised egg is less likely to implant.

Advantages

- Can be used if you can't use hormonal contraception with estrogen.
- You can use it if you smoke and are over 35.
- It may help with premenstrual symptoms and painful periods.
- You can use it if you're breastfeeding.

Disadvantages

- Your periods may change in a way that's unacceptable to you.
- You may get side effects such as spotty skin, breast tenderness and headaches. These may stop within a few months.

Risks

- Some POP users may develop small fluid-filled cysts on their ovaries. These aren't dangerous and usually disappear without treatment.
- If you do become pregnant while you're using the POP, there's a risk of you having an ectopic pregnancy (where the pregnancy develops outside your uterus (womb), usually in a fallopian tube).

Missed pill rules

If you're more than 3 hours late (12 hours if you're taking a desogestrel POP):

- Take a pill as soon as you remember. If you've missed more than 1, only take 1.
- Take your next pill at the usual time. This may mean taking 2 pills in one day. This isn't harmful.
- You're not protected from pregnancy. Continue to take your pills as usual, but use an additional method of contraception, such as condoms, for the next 2 days.
- If you've had unprotected sex in this time, you may need emergency contraception. Seek advice.

If you're less than 3 hours late (12 hours if you're taking a desogestrel POP):

- Take a pill as soon as you remember.
- Take your next pill at the usual time.
- You're protected from pregnancy.

Periods and fertility

- It's common for your periods to change while you're taking the POP. Bleeding may be irregular, light, more frequent, last longer or stop altogether. Changing to a different POP may help.
- When you stop using the POP, your fertility will return to normal and it's possible to get pregnant before your first period.

Other things to know about the POP

- It needs to be taken at the same time each day.
- Not effective if taken over 3 hours late (12 hours for POPs with desogestrel) or after vomiting or severe, long-lasting diarrhoea.
- Some medicines may make it less effective.

For lots more information about the POP go to www.sexwise.org.uk/pop

All methods of contraception come with a Patient Information Leaflet which provides detailed information about the method.

This is general information based on evidence-guided research from The Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists and the World Health Organization.

Contact your doctor, practice nurse or a sexual health clinic if you're worried or unsure about anything.

General information

- Get information about contraception and sexual health at <u>www.sexwise.org.uk</u> or <u>www.fpa.org.uk</u>
- Get information for young people under 25 at www.brook.org.uk
- Find your closest contraception or sexual health clinic at www.fpa.org.uk/clinics
- Find a GP or pharmacy at www.nhs.uk (England), www.nhsdirect.wales.nhs.uk (Wales), www.nhsinform.scot (Scotland) and www.hscni.net (Northern Ireland).

Emergency contraception

If you've had sex without contraception, or think your method might've failed, there are different types of emergency contraception you can use.

- An IUD is the most effective option. It can be fitted up to five days after sex, or up to five days after the earliest time you could've ovulated (released an egg).
- An emergency contraceptive pill with the active ingredient ulipristal acetate can be taken up to five days (120 hours) after sex. It's available with a prescription or to buy from a pharmacy. ellaOne is the only brand in the UK.
- An emergency contraceptive pill with the hormone levonorgestrel can be taken up to three days (72 hours) after sex. It's available with a prescription or to buy from a pharmacy. There are different brands.

Try and get emergency contraception as soon as possible after unprotected sex.

Emergency pills are available for free from some pharmacies. Age restrictions may apply.

Sexually transmitted infections

Most methods of contraception don't protect you from sexually transmitted infections.

Male (external) and female (internal) condoms, when used correctly and consistently, can help protect against sexually transmitted infections. If you can, avoid using spermicidally lubricated condoms. The spermicide commonly contains a chemical called Nonoxinol 9, which may increase the risk of HIV infection.

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Get more information about the progestogen-only pill at www.sexwise.org.uk/pop

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