**FACTS ABOUT PROGESTIN-ONLY ORAL CONTRACEPTIVES**

*What are progestin-only oral contraceptives?*

Progestin-only oral contraceptives—commonly called the ‘mini-pill’—are different from combined birth control pills in that they contain only one hormone (progestin) instead of two (progestin and estrogen).

*How do they work?*

Minipills may prevent pregnancy in several ways. Like combined pills, they can prevent a woman’s body from releasing an egg during her monthly menstrual cycle. However, they do not have this effect during every menstrual cycle. Minipills also thicken a woman’s cervical mucus (the substance at the opening of the womb), making it harder for sperm to reach and fertilize the egg.

*How effective are minipills?*

Up to 7% of minipill users get pregnant each year during typical use.

*How are minipills taken?*

You take one pill every day, just as with combined pills. However, you should take the minipill at the same time every day; varying the time by even a few hours greatly increases the risk of getting pregnant. Many believe the best time of day to take minipills is late afternoon or early evening. This is because it take about 4 hours for the cervical mucus to thicken and create the most effective barrier against sperm. Given that bedtime is the most frequent time of sexual intercourse, taking a minipill several hours earlier may provide the greatest protection against pregnancy.

*What if pills are missed or forgotten?*

If you forget to take a minipill, take it as soon as you remember. Then take the next pill at the regular time. If the forgotten pill is more than 3 hours late, use a backup method of birth control (such as condoms) for at least 48 hours. If you have unprotected sex after forgetting to take your minipill, ask your clinician about emergency contraception.
If you take your minipill more than 3 hours late, use a backup method of birth control (such as condoms) for at least 48 hours.

What are the side effects?

The most common side effect of the minipill is irregular menstrual bleeding. Minipill users often have spotting or breakthrough bleeding (bleeding in the middle of the cycle) and irregular cycles (shorter or longer times between periods). These side effects are not harmful, although they can be inconvenient. Menstrual cycle effects usually lessen over time. Less common side effects of minipills include headache, breast tenderness, nausea, and dizziness.

Are there any health risks?

Progestin-only pills are very safe. Because they lack the estrogen found in combined pills, they can be used by women who cannot or should not use combined oral contraceptives, such as women with a history of blood clots, high blood pressure, or cigarette smokers over the age of 35 years.

Are minipills safe for breastfeeding women?

Yes. Using minipills while breastfeeding will not harm a baby and might actually help increase the amount of milk produced.

When should a breastfeeding mother begin taking minipills?

Breastfeeding women who are also giving commercial formula to their babies and mothers who are not breastfeeding can begin taking minipills about 3 weeks after giving birth. Women who are breastfeeding exclusively (not giving baby formula) can begin taking minipills later (most often 6 weeks after giving birth). This difference is due to the fact that women who are exclusively breastfeeding do not become fertile again as soon as other women. Speak with your clinician about the best time to begin using birth control.

Remember

Use latex condoms to protect yourself against sexually transmitted diseases (STDs). Sexually transmitted infections can happen to anyone who is sexually active. If you may have been exposed to an STD and you have unusual or sudden menstrual changes, painful intercourse, or a discharge, check with your clinician. Don’t stop taking or using your birth control method on your own. Always call your clinician to talk things over.