



The University of
Nottingham

Health service

How to take the Combined Contraceptive Pill

The combined pill has traditionally been taken daily for 21 consecutive days followed by a break of 7 pill free days (the 21/7 regimen).

During that 7 day hormone free break most women will have a bleed which lasts for a few days. This “period” is completely artificial and is just your body’s response to stopping the pill hormones for a few days. It is called a hormone withdrawal bleed. It does not confirm that you are not pregnant. During this break women may experience other withdrawal symptoms such as period pains, headaches or notice an effect on their mood.

Modern contraception is very safe and there is no medical reason why women should take a break or have a bleed every month. Also, 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 (and risk of pregnancy) more likely when pills are missed.

New guidance from the Faculty of Sexual and Reproductive Health (www.FSRH.org), NICE and the World Health Organisation (WHO) recommends different ways of taking the combined pill which are outside the manufacturers’ license. This guidance also applies to the Evra patch and Nuva ring.

If you have been taking the 21/7 regimen and do not want to change, it is OK to carry on taking the pill in that way. Or you can decide to follow whichever one of the new regimens that you prefer.

Choose from one of the following:

21/4 – take 21 pills then have a break of 4 pill free days

or

63/4 – take 63 pills then have a break of 4 pill free days

or

Continuous – take the pill every day without any breaks. You may have some light spotting or ‘break through bleeding’ but this should improve over time if you keep taking the pill.

or

Flexible extended regimen – take the pill continuously for at least 21 days (it could be for several weeks or more). If you bleed for 4 consecutive days you can take a break of 4 pill free days. You must then take the pill for at least another 21 consecutive days before you can take another 4 day break - even if you bleed during the next 21 days.

You may find a pill taking reminder app such as the ‘myPill’ app helpful (<https://mypill.app/>).

If you are more than 24 hours late taking any pills or are worried about risk of pregnancy please follow the Family Planning Association missed pill guidance at:

<https://sexwise.fpa.org.uk/sites/default/files/resource/2017-11/how-many-pills-have-you-missed-chart.pdf>

For more advice you can speak to a Pharmacist or Nottingham Sexual Health Services on 0115 9627627 or contact Cripps Health Centre on 0115 846 888 and ask for the Duty Nurse.

If you experience any of the following symptoms you should seek urgent medical review:

Calf pain, swelling and/or redness

Chest pain and/or breathlessness and/or coughing up blood

Loss of motor or sensory function

Seek a medical review if you experience any of the following:

Breast lump, unilateral nipple discharge, new nipple inversion, change in breast skin

New onset migraine

New onset sensory or motor symptoms in the hour preceding onset of migraine

Persistent unscheduled vaginal bleeding

Seek advice from your contraceptive provider (to review of the suitability of your contraception) if you receive a new medical diagnoses of any of the following:

High blood pressure

High body mass index (>35 kg/m²)

Migraine or migraine with aura

Deep vein thrombosis or pulmonary embolism

Blood clotting abnormality

Antiphospholipid antibodies

Angina, heart attack, stroke or peripheral vascular disease

Atrial fibrillation

Cardiomyopathy

Breast cancer or breast cancer gene mutation

Liver tumour

Symptomatic gallstones