

Different ways to take the combined pill

The pill was designed to induce a bleed each month, mimicking the natural menstrual cycle. However, the bleed experienced during the placebo or pill-free week is due to the withdrawal of hormones rather than menstruation, and is not needed. You can choose whether you prefer to take your pill in the usual, licensed pattern or with a tailored regimen.

Traditional regimen

- Take a pill every day without any breaks until the pack is finished (21 days).
- Then stop taking pills for seven days (during this 7 day break you are likely to bleed).
- Start your next pack on the eighth day whether or not you are still bleeding.
- Continue this pattern.

Tailored regimens: (cannot be used with an 'every day pill' where some of the pills in the pack are placebo).

These are an 'off licence' use as the pills are being used in a different way to how they were licenced. But these regimens are supported by medical authorities. The instructions leaflet in the box with your pill will usually suggest using the traditional licensed pattern but:

- The pill is as safe and as effective for contraception if taken with a tailored regimen.
- A monthly withdrawal bleed is not needed and is not reassurance that you are not pregnant.
- There is no build-up of menstrual blood if the pill is taken for an extended time without a break because the pill keeps the lining of the womb thin.
- By using an extended regimen the frequency of withdrawal bleeds and associated symptoms (headache, mood change) is reduced. This can be useful if you get heavy or painful bleeding or problematic symptoms in the hormone free interval.
- The risk of pregnancy could theoretically be lower with a tailored regimen. This is because the ovaries can start to become active during the traditional 7 day break.
- Using a tailored regimen does not affect the return of fertility after stopping the pill.

You may have irregular bleeding or spotting in the first few months of pill use, particularly with extended regimens. This generally improves with time.

There are 3 options:

1) Shortened hormone-free interval:

- Take the pill every day for 21 days
- Then have a 4 day break (when you are likely to bleed)

2) Extended use (tricycling):

- Take 3 packets of the pill without a break. Then have a 7 day break.
- Then a further 3 packets of the pill without a break etc.
- Instead of having 13 bleeds per year, you will only have 5.
- This can be useful if you have troublesome symptoms in the pill free break.

3) Flexible extended use:

- The pill can be used continuously (no breaks/running the packs together) but breakthrough bleeding may start to occur. This is likely to improve with time. Alternatively:
 - If breakthrough bleeding occurs for 4 consecutive days after **at least 21 days** of the pill- then take a 4 day break (pop these pills out of the packet and throw them away so you stay on the correct day of the week).
 - Then restart you pill after 4 days (even if you are still bleeding) and take continuously for at least 21 days (and if no bleeding, continue...)
 - If breakthrough bleeding occurs for 4 consecutive days **after at least 21 days** then take a 4 day break and so on.