

Oral Contraception Initiation – Conversation Aid

Please note that this conversation aid is only meant to support conversations with patients when initiating oral contraception. Supplies of medication MUST be in line with the relevant <u>PGD</u> which pharmacists must ALWAYS check before making a supply.

Comparator	Progestogen-only pill (POP)	Combined oral contraceptive (COC)
Age range	Menarche to 54 years (inc)	Menarche to 49 years (inc)
Dosage regimen	One to be taken daily	One daily for 21 days and then a 7-day break, or Tricycling (one daily for 63 days, then a 7-day break) or other tailored regimes (see PGD)
Contraception cover starts	From first day of taking the medication if started on day 1-5 of cycle. Otherwise, extra precautions needed for first 2 days.	From first day of taking the medication if started on day 1-5 of cycle. * *Exceptions are Qlaira (extra precautions needed for 9 days if not started on day 1) and Zoely (extra precautions needed for 7 days if not started on day 1) All others require extra precautions for 7 days (9 for Qlaira) if started after day 5.
Quick starting after EHC	Levonorgestrel: start straight away but additional contraception needed for first 2 days Ulipristal: wait for 5 days before restarting then additional contraception needed for 2 days	Levonorgestrel: start straight away but additional contraception needed for 7 days (9 days for Qlaira) Ulipristal: wait for 5 days before restarting, then additional contraception needed for 7 days (9 days for Qlaira)
Missed-pill window	12 hours for desogestrel 3 hours for others	12 hours
Side-effects	 Acne Breast tenderness Headache Disturbance of bleeding patterns Changes in mood/libido Weight change 	 Nausea Breast tenderness Headache and migraine Temporary disturbances of bleeding patterns Change in mood, including depression Fluid retention Change in libido Skin changes, including acne Serious adverse effects - these are less common, but the risks should be discussed with the individual: Venous thromboembolic events (VTE) Arterial thromboembolic events (ATE) (including ischaemic heart disease) Strokes (e.g., transient ischaemic attack, ischaemic stroke, haemorrhagic stroke) Hypertension