

ANNUAL REVIEW OF WOMEN TAKING ORAL CONTRACEPTIVE PILLS

- 1) Patient requesting pill prescription issued a one month supply (if required) and asked to complete an Oral Contraception Review form (Appendix 1), which can be downloaded from the website or collected from Reception.
- 2) Receptionist to ensure form is **fully** completed before accepting back from patient. Forms to be placed in Annual Review folder in Reception.
- 3) Completed forms will be reviewed by appropriate competent nurse once weekly using criteria as per protocol.
- 4) If patient is suitable to continue pill, a 6 months prescription will be issued and data recorded in medical records using Sexual Health Oral Contraception template.
- 5) If criteria is not met, form is returned to Reception and the patient contacted to make appointment for pill check with a nurse before prescription can be issued.
- 6) All completed forms **must** be scanned onto patient records.
- 7) Subsequent 6 month prescription can be issued by Reception as per current process. All patients must have a pill check recorded annually in records.
- 8) Criteria for issue of prescription for oral contraception as per current UK MEC guidelines link below:

<https://www.fsrh.org/standards-and-guidance/uk-medical-eligibility-criteria-for-contraceptive-use/>

## PLEASE KEEP THIS SHEET

### Combined oral contraceptive pill

Please be aware of increased risks. Please seek advice if any of the following occur:

- Hospital admission
- Onset of migraines
- Family history of blood clotting disorder
- Significant weight gain
- Immobility (eg broken limb)
- Planned long haul flight
- Change in health

### Long Acting Reversible Contraception

#### Intrauterine system (IUS)

With the IUS, a plastic device that contains a progestogen hormone is put into the womb (uterus). The progestogen is released at a slow but constant rate. Around 1-2 women in 1,000 will become pregnant with one year of use of this method. It works by making the lining of your womb thinner so it is less likely to accept a fertilised egg. It also thickens the mucus from the neck of your womb (cervix). This stops the sperm from meeting the egg. The IUS is also used to treat heavy periods (menorrhagia).

Some advantages

- It is very effective.
- You do not have to remember to take pills.
- Periods become light or stop altogether.

Some disadvantages

- Side-effects may occur as with other progestogen methods such as the POP, implant and injection. However, they are much less likely, as little hormone gets into the bloodstream.
- It may be a little uncomfortable having it put in and does not last as long as the other type of coil.

#### Contraceptive injections

Contraceptive injections contain a progestogen hormone which slowly releases into the body. They are very effective. Between 3 and 60 women in every 1,000 using it will become pregnant. It works by preventing ovulation and also has similar actions as the POP. An injection is needed every 8-13 weeks, depending on which injection is used.

Some advantages

- They are very effective.
- You do not have to remember to take pills.
- Once your body is used to the hormone, you often have no periods or very light periods. Particularly if you had heavy or painful periods, this is an advantage.
- You can have contraceptive injections whilst breast-feeding.

Some disadvantages

- Periods may become irregular (but often lighter or stop altogether).
- After stopping, there may be a delay in your return to normal fertility for several months. It may take up to a year for your period to come back.

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- Some women have side-effects. Common side effects are gaining weight, mood changes and headaches. You cannot undo the injection, so if side-effects occur they may persist for longer than 8-13 weeks.
- The injections cause a very slight thinning of your bones.
- There may be a very small increase in the risk of breast cancer and cancer of the neck of the womb (cervix).

### Contraceptive implants

A contraceptive implant is a small device placed under the skin. It contains a progestogen hormone which slowly releases into the body. Around 1 woman in 2,000 using the implant will become pregnant each year. It works in a similar way to the contraceptive injection. It involves a small minor operation. An injection of local anaesthetic is used to numb the skin. Each implant lasts three years. Implants mainly work by stopping eggs from being released (ovulation.) They also cause a plug of mucus in the neck of the womb (cervix) that blocks sperm. The lining of the womb (uterus) is made thinner, making it less likely the egg will implant.

#### Some advantages

- It is very effective.
- You do not have to remember to take pills.
- They are reversible and periods return quickly once they are removed.
- Your periods tend to be very light or non-existent.

#### Some disadvantages

- Periods may become irregular (but more often are lighter or stop altogether).
- Some women develop side-effects but these tend to settle after the first few months.

### Intrauterine contraceptive device (IUCD)

An IUCD is also known as a coil. A plastic and copper device is put into the womb (uterus). It lasts for five or more years. Between 6 and 8 women in 1,000 will become pregnant in one year of use of this method. It works mainly by stopping the egg and sperm from meeting. It may also prevent the fertilised egg from attaching to the lining of the uterus. The copper has a spermicidal effect, meaning it kills sperm.

#### Some advantages

- It is very effective.
- You do not have to remember to take pills.
- It lasts a long time - 5-10 years.
- There are no hormones, so there are no side-effects due to hormonal changes in your body.

#### Some disadvantages

- Your periods may become heavier or more painful.
- There is a small risk of serious problems.
- It is uncomfortable having the coil put in. (However this is only once in 5-10 years.)

Reference: [www.patient.co.uk](http://www.patient.co.uk) 7/12/16

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NAME: \_\_\_\_\_ Date Of Birth: \_\_\_\_\_

Telephone number which you are happy for us to contact you on: \_\_\_\_\_

Date you need your next supply of contraceptives: \_\_\_\_\_

You have recently requested a repeat prescription of your contraceptive pills. You can request a prescription for one packet of your pills (if required) because your annual review is now due. If you have no problems with your contraceptive pill it may not be necessary for you to see the doctor or nurse and instead you may just complete this form fully and return it to us within the next two weeks. We do need to know your **height, weight and blood pressure**. You can check these without an appointment at the surgery or at home.

If you would rather see the nurse for your annual review, please make an appointment and bring the completed form to the appointment with you.

Once we have processed the information on this form, we will decide whether you can pick up a prescription for a further 6 month supply of pills, or whether the nurse wishes to see you in which case we will issue a prescription for a further one month supply of the pill with a request to make an appointment. Occasionally the nurse will need to speak to you before issuing any more pills. It is therefore essential that we have a telephone number on which you are happy for us to contact you. If you have not heard from us in a week you can pick up your next prescription.

Name of contraceptive you are taking: \_\_\_\_\_

Do you think you are getting any side effects from the pill? Yes  No Are you breast feeding? Yes  No Are you immobile (ie. In a wheelchair)? Yes  No Do you suffer from migraines? Yes  No   
If yes, do your migraines provoke loss of vision / numbness / weakness or speech problems?Do you have any allergies/allergies to medication (If yes, please specify) Yes  No Do you have breast lumps? Yes  No Do you take drugs for epilepsy or tuberculosis (TB)? Yes  No Have you ever had a blood clot in your leg or lung? Yes  No

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Has a close relative ever had a blood clot in the leg or lung? Yes  No

Have you ever had a stroke or mini stroke (TIA)? Yes  No

Are you thinking of having a baby in the next year? Yes  No

Do you have any family history of Heart disease in a close relative under age of 55 (man) or 65 (woman)? Yes  No

Do you smoke? Ex-smoker  Date stopped: \_\_\_\_\_  
Never Smoked   
Smoker  \_\_\_\_\_ per day

**Please note – we advise all smokers that they should stop smoking.** Smoking does increase the risks of circulatory problems, particularly in women on the pill. If you would like to stop smoking please ask a receptionist to sign post you to the stop smoking service.

More women are becoming interested in using long-active reversible contraceptives. An information leaflet is attached about these methods (injections, implants and coils). If you would like to consider one of these methods please make an appointment with your doctor / nurse.

We do recommend that all women should be breast aware. If you think you have a breast lump, or you have a strong family history of breast cancer and have not previously discussed this, please make an appointment with your doctor.

Your height \_\_\_\_\_ (cm)

Your weight \_\_\_\_\_ (kg)

Please staple Blood Pressure printout here

We usually prescribe 6 packets of the pill. If you prefer fewer packs, please state the number required here: \_\_\_\_\_

Your signature: \_\_\_\_\_ Date: \_\_\_\_\_

Surgery use:

BMI \_\_\_\_\_ DATA INPUT COMPLETED BY \_\_\_\_\_ DATE \_\_\_\_\_

All items to be prescribed generically unless specified.

- Issue 6m prescription
- Issue 1m prescription, book appointment for routine review
- Urgent review
- COC contraindicated