

Extended Use of Oral Contraceptives

What is an extended oral contraceptive regimen?

An extended oral contraceptive regimen refers to continuous use of active birth control for longer than 3 weeks. For example, standard birth control pills come packaged in 4-week regimens, 21 days of active pills containing hormones followed by 7 days without hormones (inactive "reminder" pills or placebos). During the week of inactive pills, oral contraceptive users have bleeding like a monthly menstrual period. Early pill developers chose this plan because it was similar to a woman's normal cycle and reassured pill users that they weren't pregnant.

Medically speaking, however, a woman can safely take oral contraceptives for longer than 3 weeks at a time. Clinicians sometimes advise pill users to skip the hormone-free week so they can avoid having their period during certain events, such as a honeymoon or vacation. A woman may choose to use an extended pill regimen where she continues to take active pills, skipping the placebos, until she wants to have a period. The most common extended regimen is the trimonthly approach, in which women take active pills continuously for 12 weeks (84 days or four pill packs) followed by a hormone-free week. Women using the trimonthly approach have only four menstrual periods a year.

Isn't it "unnatural" to have fewer menstrual periods?

No. Until recently, women didn't have consistent monthly periods the way they do today. Women today have 3 times as many periods as those in the past. This is because today's women have fewer children, start their periods at a younger age, take longer to reach menopause (when periods stop), and are less likely to breastfeed for long periods of time. So, what seems "natural" today would have seemed very unnatural in the past, even as recently as 100 years ago.

What are the benefits of extended pill regimens?

Extended pill regimens provide many health benefits. Women using extended regimens are less likely to have headaches that typically occur during the menstrual cycle. Users also report fewer premenstrual and menstrual symptoms, such as breast tenderness, bloating, cramps, and mood swings. The reduced number of periods and decreased amount of cramping with extended regimens can be very helpful for women who suffer from Dysmenorrhea (painful periods).

Extended pill regimens also help women with hormone-dependent conditions such as endometriosis (growth of tissue that lines the uterus which can also form on the ovaries, bowel, and elsewhere inside the abdominal cavity). Decreasing the number of menstrual cycles helps prevent endometriosis from getting worse. It also reduces the number of painful periods because endometrial tissue swells and bleeds during menstruation. In women with polycystic ovary syndrome (PCOS), extended regimens may help better suppress high androgen (hormone) levels. For women with epilepsy, they may help reduce seizures that might be triggered by fluctuating hormones.

In addition, because the number of menstrual periods are reduced, women who take contraceptives for extended periods of time avoid the need for monthly sanitary product use (tampons or pads) or medications (ibuprofen or Motrin). Women using extended regimens also might have greater protection against pregnancy, because hormone levels remain consistent for longer periods of time, which makes ovulation (the releasing of an egg) even less likely.

What are the drawbacks?

Women using extended pill regimens may have irregular, unexpected menstrual bleeding (i.e. spotting or breakthrough bleeding), although this effect lessens over time. For some women, the lack of a monthly menstrual period might cause concerns over potential pregnancy. In addition, the cost of using oral contraceptives for extended periods is higher than with traditional pill use. For example, women on the trimonthly regimen use the equivalent of 16 pill packs per year compared with only 13 pill packs for traditional regimens. Some insurance plans will not cover the cost of extra pill packs. (The extra out-of-pocket cost may be partly offset, however, by spending less money on sanitary products and medications that treat menstrual discomfort.)

