

BIRTH CONTROL & HEART DISEASE

Birth control for women with heart disease falls into **three main categories** — each with its own unique list of pros and cons.

1 Hormonal options:



Many oral contraceptives have a combination of two hormones — **estrogen** and **progestin**. These options are effective at preventing pregnancy and can have the added benefit of more regular periods. Estrogen should be used with caution in some women because it can increase the risk of blood clots.

- Combined oral contraceptive pill
- Combined hormonal vaginal ring

PROGESTIN-ONLY BIRTH CONTROL: Progestins are associated with lower blood clotting risk than estrogen-containing methods and are considered safe for women with heart disease.

- There are different estrogen-free pills on the market (sometimes referred to as the “mini-pill”). While some must be taken at the same time of day to be optimally effective, there is a newer pill that offers a bit more flexibility with similar effectiveness.
- Depo-Provera, known as “the shot,” can last up to 3 months.

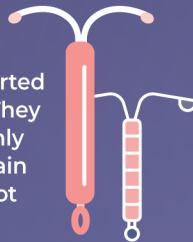
Estrogen generally should be avoided by women with:



- History of blood clots (thrombosis) or a known blood clot disorder
- Poor heart function
- Pulmonary hypertension
- History of heart attack or stroke
- Smokers over age 35
- Uncontrolled high blood pressure

2 Long-Acting Reversible Contraception:

- **Progestin implant** is generally inserted in the upper arm and can last years.
- **Intrauterine devices, or IUDs**, are devices inserted into the uterus by a doctor to prevent pregnancy. They are safe for women with heart disease and are highly effective at preventing pregnancy. Most IUDs contain some active progestin, although copper IUDs do not contain any hormones.



3 Permanent Option:

Tubal ligation (getting your “tubes tied”) is only for women who no longer want to have children and for some women with heart conditions where the risk of becoming pregnant is too high.



Other important factors:

- **Emergency contraception** should be used to prevent pregnancy in cases of unprotected intercourse or contraceptive failure. A copper IUD inserted within 7 days of unprotected intercourse is 99% effective at preventing pregnancy. All forms of emergency contraception are safe in women with heart disease.
- Women who use estrogen-containing birth control and smoke are 10 times more likely to have a heart attack and 3 times more likely to have a stroke. Risk increases substantially for women age 35 years or older who smoke heavily (15 or more cigarettes daily).



- Estrogen-containing birth control pills have also been connected to higher blood pressure in some women. Stopping combination birth control may improve blood pressure and potentially reduce your risk for a heart attack and/or stroke.



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