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THE TRUTH ABOUT THE PILL AND YOUR HEALTH

It's one of the safest, most researched drugs in the world, which is why more and more women over 30 are choosing to go back on it. Tessa Souter reports

Manna from heaven.' That's how the Pill was greeted when it arrived in 1961. 'Women went wild,' says Toni Belfield, director of information at the Family Planning Association (FPA).

'It's hard to understand now, but prior to the Pill, women relied on condoms and diaphragms. Abortion wasn't easily available, and accidental pregnancy was a disaster. Women were kicked out of the family home, even institutionalised.' The Pill, which gave women unprecedented control over their fertility and made sex without repercussions possible at last, did nothing less than start the sexual revolution of the swinging Sixties.

However, medical studies subsequently associated the Pill with a catalogue of health problems, including increased risk of thrombosis, strokes, heart attacks and breast cancer. Women complained of weight gain, tender breasts, depression and mood swings. Within just a few years, many of those who'd greeted the Pill with such enthusiasm had stopped taking it. 'I didn't like the idea any more,' explains 42-year-old Marina, who came off the Pill at 21, after five years - as did many of her friends. 'We just kept hearing bad things about it.' Lorraine, 44, who started taking the Pill when she was 18

'The Pill is the one toxin I put in my body. Yes, there are scares about it, but there are also scares about tap water and crisps'

and came off it eight years later, agrees. 'Although I think oestrogen agrees with me, I was put off by all the talk of side effects, even though I didn't suffer any myself,' she says.

But the Pill has changed. According to a recent report in *The New York Times*, a major reduction in hormone levels has not only made it safer, but has also added several health benefits. As a result, doctors are increasingly recommending it for women of all ages. 'It is extraordinarily safe,' says Alexander Sanger, president of Planned Parenthood in New York. 'It is

probably the most studied drug in history and although the evidence varies on whether it causes breast cancer [see Myths and Truths, over the page], recent research shows that in women in their twenties and thirties and even beyond, the Pill can prevent endometrial and ovarian cancer and pelvic inflammatory disease, and reduce the risk of ovarian cysts and ectopic pregnancies. It also addresses irregular bleeding, loss of bone-mineral density and hot flushes in women approaching menopause.'

Lorraine recently went back on the Pill after almost 20 years because her periods became heavier and far more tiring. Her doctor offered a non-contraceptive progesterone drug, but she opted for the Pill. It has only been a month but, so far, she is pleased with the results. 'My period is lighter, I have less PMS, I don't get sore breasts, and I have a lot more energy,' she



says. She hasn't entirely made up her mind yet, though. 'I've had more headaches, but that might be due to pressure at work. I'm going to see how I feel after three months.' The contraceptive effect is also a bonus. 'My husband loves not using condoms,' she says.

In younger women, too, the positive side effects of the Pill are noticeable. 'My periods are very light and last only three days, whereas it used to be a whole week,' says 32-year-old Gemma. 'And my skin has definitely improved.' (In the US, one brand of Pill has been approved by the FDA as a treatment for acne.) In Gemma's experience, the Pill has improved a lot since she was 18, when it caused breakthrough bleeding, bloating, moodiness and sweet cravings. And for some, the Pill is an absolute necessity. 'Due to polycystic ovaries, I used to have such painful periods I had to stay home from school. I was literally doubled up in pain,' says Vanessa, 28, who was advised by the doctor to start taking it when she was 15. 'The Pill is fantastic.'

Elizabeth, 34, first went on the Pill at 20, but stopped taking it after six years because of the severe mood swings she was experiencing. After the birth of her second child, however, she found that her cycle had changed.

'I had terrible bleeding and really bad PMS every month,' she says. Her GP suggested she went on hormone replacement therapy and gave her a progesterone-only Pill. 'I took that for three months, but it didn't agree with me. So, because I didn't want to get pregnant again, I decided to go on the combination Pill.' Her friends were shocked. 'I'm so "health foody" with my homeopathic this and Bach Flower Remedy for that, but I don't smoke or drink, so the Pill is the one toxin I put in my body. So far, it hasn't adversely affected me. Yes, there are scares about the Pill, but there are scares about everything, from tap water to crisps - the more I read about the Pill, the happier I feel.' And it worked. 'I've been on it for two and a half years and I'm more emotionally balanced.'

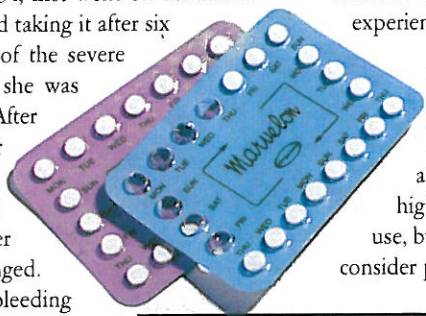
However, the Pill doesn't suit everyone. As Alexander Sanger points out, it's very important that a woman's choice of contraception 'is based on what is right for her lifestyle, her health and what she is looking for in the long and short term'. Kate, 29, found the first

Pill she tried caused severe depression. Within three months of coming off it, the depression went away. In 1996, she started taking the Pill again, switching brands until she found the best one for her. 'But I never really liked it. I just didn't feel right,' she says. Now she's back to using condoms, she misses the convenience of the Pill. And so does her boyfriend. 'He would prefer me to be on it, but at the same time he doesn't want me to be unhappy and depressed,' she says.

The FPA's Toni Belfield believes it is very important that negative experiences of women such as Kate are acknowledged. 'The bottom line is that the Pill *isn't* ideal for every woman. Some do have a really bad time on it and they need to be listened to.' What is essential, she points out, is that women are informed about all the choices they have and that each woman is evaluated as an individual. 'Sometimes, peer discussion is the worst thing of all. One friend might say she had a really bad time on the Pill, whereas another might be having a positive experience, but hasn't told you about it.'

Indeed, the Pill's bad reputation is based almost entirely on its infamous past. 'Why do we backtrack with Pill discussions all the time? If you look at the risk of thrombosis, it's much higher in pregnancy than it is in Pill use, but we never think "Oh gosh, I'd never consider pregnancy, it's dangerous,"' Belfield asserts, referring to the 1995 health scare when research indicated that brands of Pill containing gestodene and desogestrel caused a slightly higher incidence of blood clots. 'Double the risk does sound like a lot, until you realise that the risks were small to begin with.'

'The fact remains that there are some hugely beneficial side effects to the Pill,' continues Belfield. 'What other drug do you know of that prevents you getting pregnant *and* reduces your risk of getting womb or ovarian cancer by half? As long as you're a nonsmoker, the Pill is fine for women over 35. And the doses are now so low that there isn't an upper age limit on Pill use. In fact, one Pill in the Sixties was equivalent to seven of today's Pills. The trouble is that women still aren't confident about it. If you think it's dreadful and might kill you, you're going to be unhappy about taking it. If there is any message from the FPA, it's that women deserve better information than they are currently getting in order to make the decision whether to use the Pill or not.' ■



The Pill's bad reputation is based on the past. The doses are now so low that there isn't an upper age limit on its use

MYTHS AND TRUTHS

Myth: you should take a break from the Pill at least once a year.

Truth: there are no medical benefits to be gained from taking breaks from the Pill.

Myth: you gain weight on the Pill.

Truth: some women may experience temporary weight gain through fluid retention for the first three months.

Myth: the Pill could prove fatal.

Truth: the risk is extremely small.

Myth: the Pill causes cancer.

Truth: research shows that women who take the combined Pill have a slightly higher risk of being diagnosed with breast cancer. After coming off the Pill, this risk disappears over a 10-year period.

Myth: the Pill greatly increases the risk of heart attack, stroke and blood clots caused by thromboembolism (blockage of blood vessels).

Truth: the risk is 15 to 30 women per 100,000 Pill users a year, compared with five per 100,000 non-Pill users.

Myth: the Pill causes infertility.

Truth: there is no evidence of this, or that it causes problems with conceiving.

Myth: the Pill causes birth defects.

Truth: evidence shows that Pill use doesn't affect the health of children, even those conceived while on the Pill.

For more information, call the Family Planning Association Contraception Education Service Helpline, on (0171) 837 4044.