

Oral Contraceptives...

What is there to know?

By Eric North MD



Most people do not understand the mechanism for how oral contraceptive pills (OCPs) work. The primary mechanism for combination OCPs (estrogen and progesterone) is suppression of ovulation. The secondary and tertiary mechanisms are prevention of implantation and thickening of cervical mucous. In other words, approximately 80% of the time, OCPs prevent ovulation, and about 20% of the time there is break-through ovulation. Break-through ovulation means ovulation occurs and pregnancy is prevented by a different mechanism. It is estimated between 10-20% of the time, fertilization occurs (when the sperm and egg unite) and **a human life is created**. The fertilized egg travels down the fallopian tube and is then unable to implant into the uterus due to the hormonal effects of OCPs on the uterus. This technically fits the definition of an abortion. Therefore, OCPs do cause abortions **some** of the time.

Spontaneous abortions, or miscarriages, occur in approximately 25% of all pregnancies. Medically there may be many reasons for a miscarriage to occur, but often this tragedy cannot be explained. Therefore, without any form of birth control the rate for spontaneous abortions is around 25%. As discussed above, the estimated rate of abortions caused by OCPs is 10-20%. One perspective is that we are **decreasing** the number of abortions by using OCPs. OCPs may be seen as a therapy for overall reduction in spontaneous abortions. One important difference is to realize spontaneous abortions occur **naturally** where as abortions due to OCPs are **caused** by taking a medicine.

As a pro-life physician, I have extensively researched this topic and have decided to prescribe OCPs as an option for birth control. There are some pro-life physicians who do not prescribe OCPs for the very reasons listed above. Whatever choice of birth control you decide is best for you, I think it is important you make an informed choice.