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ACTIVITY PLANNER

Pill can delay a baby far longer than you want

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Women who use the contraceptive long-term are often shocked at the effect it has on their fertility once they stop taking it. Rather than turning to more drugs, says Claire Henry, many are finding the answer in alternative therapies

Every day millions of women pop a tiny pill giving it as much thought as they would swallowing an aspirin. After all, the benefits of oral contraception - easy-to-use, reliable and protective against ovarian and endometrial cancer - are well documented. But for an increasing number of women there is a lesser known and distressing side-effect - amenorrhoea, or lack of ovulation - that materialises only when they stop taking it.

When Dal Bamford came off the Pill, the last thing she imagined was that she wouldn't ovulate for eight months. "It was an emotional roller-coaster," she says. "I started researching possible causes on the net. There were some frightening stories of women with ovarian dysfunction and even premature menopause. I had to stop searching as it was sending my imagination haywire. All the while I was beating myself up for not taking more responsibility for my own health. I just believed my doctor and trusted the Pill without questioning."

Dal, a 31-year-old Oxford graduate and manager in a telecoms company in London, had stopped taking Microgynon 30 in April 2006. "My husband and I weren't planning a family straight away but I thought I should come off the Pill for a while beforehand," she says. "I had started taking it at university when I did a lot of rowing; my periods could be heavy and got in the way of my exercise regime. It was very convenient and gave me no problems."

Once she had gone without a period for six months, she visited her GP. Thyroid and blood tests were taken but, as the results came back normal, her GP told her to "wait a while", recommending a course of Clomid to induce ovulation if her cycle had not returned after a year. "I did not want to take more drugs," says Dal, "as I felt that was the problem in the first place."

Amenorrhoea is a distressing condition, not least because women usually discover it exists only when they are trying to conceive. While the difficulties faced by women in their forties trying to start a family are familiar, it seems that healthy, younger women are increasingly experiencing problems.

"I have seen cases where women in their thirties have not ovulated for two or three years after taking the contraceptive pill," says Dr Marilyn Glenville, author of *Natural Solutions to Infertility*. "The Pill artificially suppresses your hormones, effectively making your ovaries dormant. Sometimes it can make the reproductive system go into hibernation."


For the majority of women, it is still the most effective method of contraception and, once off the Pill, regular menstruation usually resumes within a few weeks. Other women, however, are not so fortunate. "Women are taking the Pill without a break for many years and are waiting until later in life to start a family, so their natural fertility is also in decline," says Dr Glenville.

Her sentiments are shared by Dr Margaret Cook, former consultant haematologist at St John's Hospital, Livingston, West Lothian.


"I would tell any woman beyond the age of 34 still on the Pill to consider alternative contraception if she wants to have a family in the near future," she says.



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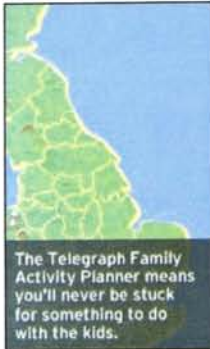


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Dr Cook believes that many GPs have a "cavalier attitude" when it comes to prescribing the Pill. "It is all too often billed as some kind of magic pill, but it is a powerful drug that has serious side-effects which need to be highlighted. Many doctors have the tendency to highlight the good points and shove all the bad points under the carpet."

The contraceptive pill works primarily by preventing ovulation through the suppression of hormones, thereby stopping an egg being released. The monthly bleed while on the contraceptive pill is therefore essentially a "fake period". Most GPs state that it can take two or three months for a normal cycle to return but some women experience amenorrhea for considerably longer.

"I see about six new cases every month," says Dr Gerard Conway, consultant in reproductive endocrinology at University College London Hospital. "Often blood tests will come back as normal, so it can be harder to pinpoint the actual cause. Some women may have a more sensitive reproductive system where the hypothalamus [the hormone-regulating gland in the brain] is triggered to close down more easily than those of others."

Two otherwise healthy women who have also suffered amenorrhea following the contraceptive pill are Karen Inglis and Louise Lennon. When Karen, a 26-year-old special needs teacher from Aberdeen, stopped taking Microgynon 30, she only had one period during the first six months.

"I could handle not getting pregnant," she says, "but the fact that my body was not working was frustrating and worrying. My GP told me that women who got their period back immediately were 'lucky'. If I had known, I would have stopped taking the Pill earlier."

Louise, a 30-year-old IT consultant from London, agrees. "I had sleepless nights, worried that I may have missed my chance of having a family," she says. Having taken Loestrin 30 for six years, it was nine months before her periods returned. "I tried to stay calm, but after six months I began to worry. I dreaded seeing friends as they would casually ask when I might be starting a family - they didn't know that I was crying myself to sleep with fear that I might be infertile."

Louise visited her GP and after a series of blood tests and scans was told that everything was normal. She, too, was told that if her menstrual cycle had not returned within a year she would be prescribed Clomid.

But Dr Sammy Lee, an embryologist at University College London, says that Clomid is prescribed all too often as the "cheap and cheerful option". "It can have harmful effects," he says. "It can further disrupt the hormones and lead to poor-quality eggs."

Reluctant to take Clomid, Dal, Karen and Louise decided to try a combination of acupuncture, Chinese herbs and reflexology as alternative treatment. Dr Lily Hua Yu, who specialises in women's fertility problems at the Acumedica centre in north London, the largest established Chinese medical organisation in Europe, sees an increasing number of women in their thirties with fertility problems. "I see at least five women every week with fertility problems who have a history of taking the contraceptive pill, stress, and an imbalanced diet, and I've seen some patients who've not had a period for up to two years. These women are very distressed and it is something that could have been corrected earlier if they had stopped taking the Pill sooner."

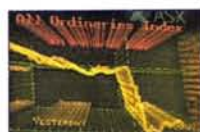
Within six weeks of treatment, both Dal and Karen became pregnant. "I felt incredibly blessed that through sheer luck I had stumbled across the therapy that allowed it all to happen," says Dal. Five weeks into Louise's treatment with Dr Hua Yu her periods returned. "I was so relieved. It is so good to know that we can now start trying for a family."

Although Dr Lee acknowledges that much of the evidence is anecdotal, he believes there are too many success stories from alternative therapies for them to be completely ignored. "Studies conducted at Göteborg University in Sweden have also shown increased rates of ovarian blood flow as a direct result of acupuncture," he says.

The benefits of the Pill may be legion but its side-effects should not be ignored. As Dr Glenville says: "The problem with the Pill is that no woman really knows what the repercussions will be when she stops taking it."

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