

The contraceptive patch ^[1]

Dear Alice,

I saw this commercial on TV last night about the birth control patch. Is it as good as the pill? Do you keep the same patch on for a week or do you have to remember to put one on every day just like having to remember to take the pill? I was just wondering, because I forget a lot to take my pill and just wanted to know if that was easier. Are the side effects worse than the pill?

Thanks!

Answer

Dear Reader,

Considering all the options on the market, kudos for getting informed! With effectiveness rates equal to the pill, the contraceptive patch is 99 percent effective at preventing pregnancy when used correctly and consistently and 91 percent effective with typical use (which takes into account human error). The patch, as you suggested, may be easier to keep up with for those who frequently forget to take the pill or don't want to mess with their birth control every day. Unlike the daily regimen of the pill, the patch only has to be placed on the skin once a week, every seven days. As far as the side effects are concerned, it's hard to say whether the patch's potential side effects are worse than those associated with the pill. The experience and severity of side effects vary from person to person. This variance likely contributes to the reasons why many people try several birth control methods before finding one that works best for them (i.e., one that is compatible with their lifestyle and few or no side effects are experienced). As you already seem familiar with the pill, it may be good to go over some similarities and differences to help you determine whether the patch might be an appropriate option for you.

Using the same types of hormones as the combination pill (which contains both estrogen and a progestin), the patch prevents pregnancy by slowly and continually supplying the bloodstream with hormones through the skin. This suppresses ovulation and causes the cervical mucus to thicken, making it difficult for sperm to enter the uterus. Additionally, both the pill and patch are reversible, meaning fertility resumes quickly when they're no longer used, though it may take a couple of months for your cycle to readjust. The cost of a four-week supply of the patch is comparable to that of a birth control pill pack. Another trait these two methods have in common is

that neither the pill nor the patch protect against sexually transmitted infections (STIs) [2].

While the cost and hormones of the pill and patch are similar, they're used in different ways. The patch follows a four-week cycle consisting of 28 days. For the first week, a new patch is placed on the skin and worn for seven continuous days. It's recommended that the patch only be placed on clean, dry skin and only on one of four body parts: the buttocks, the abdomen, the upper arm, or the upper torso. The patch is then replaced on the same day of the week for the next two consecutive weeks. However, it's best that the patch be placed in a different of the specifically indicated locations each week. The fourth week, during withdrawal bleeding (which mimics a period), a patch won't be worn for seven days before starting the process all over again!

You might be wondering about keeping the patch on for seven days. Once adhered to the skin, the patch remains in that spot for the entire seven-day duration. Changing the location of the patch after it's been placed on the skin also isn't advised as it may become loose. However, the patch was designed to withstand activities including showering, bathing, swimming, physical activity, and sweating, so partaking in those activities likely won't loosen the patch. If the patch is no longer sticky, has been stuck to itself or another surface, has other material stuck to it, or if it's become loose or falls off, reapplying the patch isn't advised (and if it's been more than 24 hours, it's possible to become pregnant). If this happens, immediately begin a new four-week cycle by affixing a new patch.

You might also be curious about what happens if the patch isn't changed on time. If this happens, apply the next patch of the cycle as soon it's remembered. If it's been less than 48 hours, continue as usual, but if it's been more than 48 hours then a new four-week cycle needs to be started. This day then becomes the new patch change day and day one. To prevent pregnancy, a non-hormonal back-up method of birth control — such as the internal [3] or external condom [4], diaphragm [5], sponge, or cervical cap [6] — may be used. For additional information on the use of the patch, head over to Planned Parenthood's How do I use the birth control patch? [7].

As with most prescription medications, there are some potential risks and side effects to take into account. The patch exposes the wearer to more estrogen than the birth control pill and this may increase the risk of blood clots, stroke, and heart attack. Some additional side effects of the patch may include:

- Headaches
- Skin reaction where the patch is placed
- Nausea
- Upper respiratory infection
- Menstrual cramps
- Abdominal pain
- Breast swelling or discomfort

It's also good to know that the patch's effectiveness may be slightly reduced for those who weigh 198 pounds or more. The patch will still be highly effective, but those over 198 pounds may want to speak with a health care provider to discuss whether or not the patch is the most appropriate form of contraception for them. Additionally, effectiveness may be reduced for those who take any of the following medications (in which case, a non-hormonal birth control method may be used as backup):

- A few antibiotics, including rifampin, rifampicin, and rifamate
- An antifungal medication, griseofulvin
- Certain HIV medications
- Certain anti-seizure medicines

Use of the patch isn't recommended if the user is already on oral contraceptives, is allergic to any part of the method, or has certain medical conditions including migraine headaches, breast cancer, a history of heart attacks or stroke, diabetes, liver disease, uncontrolled high blood pressure, and blood clots. If you're interested in the contraceptive patch, consider talking with a health care provider about your lifestyle and medical history to see if it's a good fit for you. To learn more about different types of contraceptives, be sure to check out the related Q&As and the [Contraception](#) [8] category of the *Go Ask Alice! Sexual and Reproductive Health* [9] archives. You may also consider speaking with a health promotion professional to ask more general questions about navigating birth control options.

Hope this helps!

Alice!

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