

# Contraceptive Considerations

VTE Manual 2012

# General principles

- Combined (estrogen and progestogen) hormonal contraceptive use increases risk of VTE
- Progestogen-only methods of contraception do not increase risk of VTE

# Combined hormonal contraception

- Examples:
  - Combined oral contraceptive pill (COCP)
  - Transdermal patch
  - Intravaginal ring
- Risk of VTE **increases** in the first few months of use and then falls
- This risk remains higher than that of non-users until the contraceptive is stopped

# Progestogen-only methods

- Examples:
  - Progestogen-only pills (POP)
  - Injectables
    - Depot medroxyprogesterone acetate (DMPA)
  - Implant
  - Intrauterine system
- These do **not** increase the risk of VTE

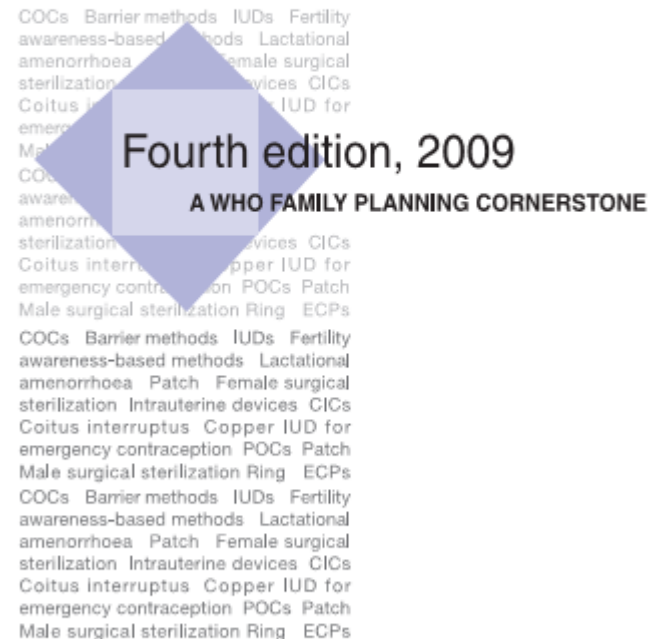
# Other methods

- Intrauterine devices can be used immediately post-abortion (spontaneous or induced; non-septic), or after 4 weeks postpartum
- Barrier methods are safe

# Reference

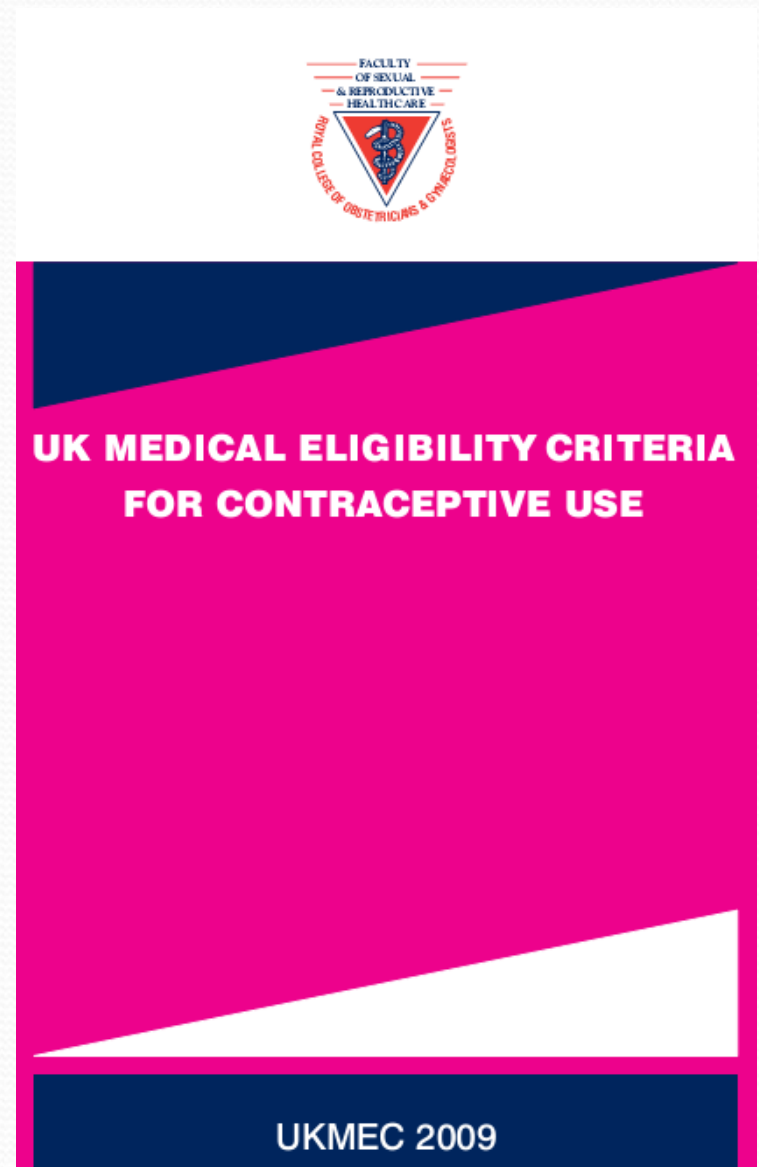
- WHO Medical Eligibility Criteria for Contraceptive Use (MEC), 4<sup>th</sup> edition, 2009
  - A consensus-based recommendation for the use of contraception
  - Comprehensive list of medical conditions covered

## Medical eligibility criteria for contraceptive use



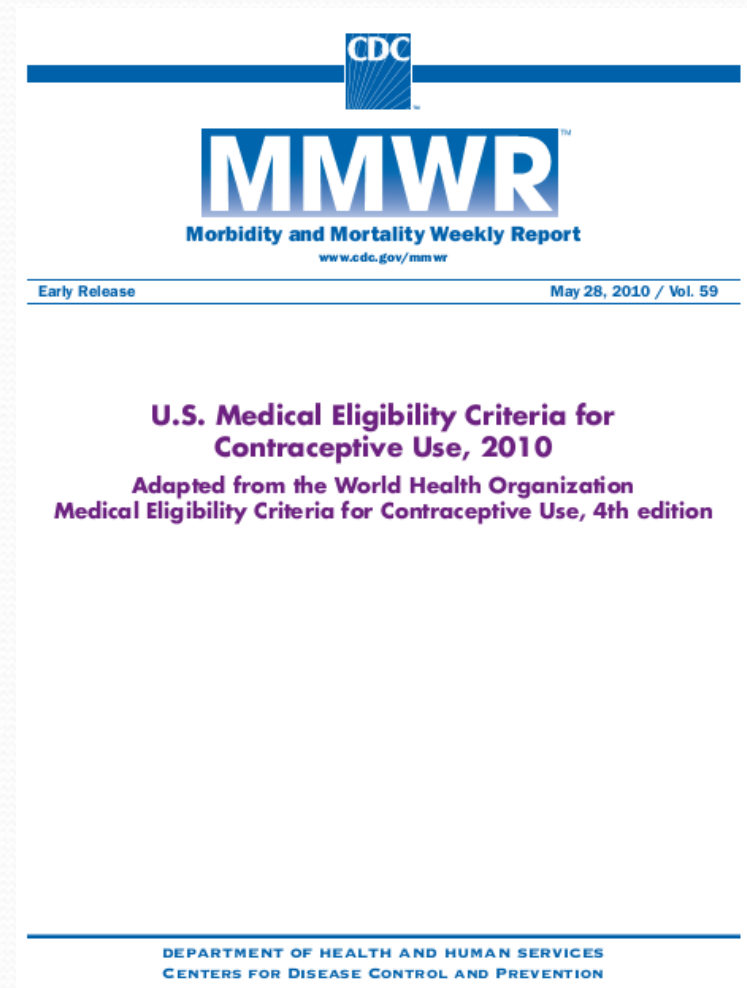
# Reference

- United Kingdom Medical Eligibility Criteria for Contraceptive Use (UKMEC), 2009
- [www.fsrh.org/pdfs/UKMEC2009.pdf](http://www.fsrh.org/pdfs/UKMEC2009.pdf)



# Reference

- United States Medical Eligibility Criteria for Contraceptive Use (U.S. MEC), 2010
- [www.cdc.gov/mmwr/pdf/rr/rr59e0528.pdf](http://www.cdc.gov/mmwr/pdf/rr/rr59e0528.pdf)





# MEC Principles

- Take a clinical history to identify any relevant medical conditions which may influence contraceptive choice
- Some medical conditions can contraindicate the use of particular methods
- Since progestogen-only methods do not increase the risk of VTE, most of the risk assessment relates to combined hormonal contraceptive use

# MEC categories

1	A condition for which there is no restriction for the use of the contraceptive method
2	A condition where the advantages of using the method generally outweigh the theoretical or proven risks
3	A condition where the theoretical or proven risks usually outweigh the advantages of using the method
4	A condition which represents an unacceptable health risk if the contraceptive method is used

CATEGORY	WITH CLINICAL JUDGEMENT	WITH LIMITED CLINICAL JUDGEMENT
1	Use method in any circumstances	<p style="text-align: center;"><b>Yes</b> (Use the method)</p>
2	Generally use the method	
3	Use of method not usually recommended unless other more appropriate methods are not available or not acceptable	<p style="text-align: center;"><b>No</b> (Do not use the method)</p>
4	Method not to be used	

# Use of combined hormonal contraception

- MEC 4 (unacceptable health risk)
  - Current VTE or previous VTE
  - Known thrombogenic mutations
    - Antithrombin-III, protein C or protein S deficiency
    - Factor V Leiden
  - Smokers aged over 35 years ( $\geq 15$  cigarettes/day)
  - Undergoing major elective surgery with prolonged immobilisation
  - SLE and positive or unknown antiphospholipid antibodies

# Use of combined hormonal contraception

- MEC 3 (risks outweigh benefits)
  - Family history of VTE in a first-degree relative aged under age 45 years
  - Before day 21 postpartum
  - Smokers aged over 35 years (< 15 cigarettes/day)
  - Obesity (BMI  $\geq$  35 kg/m<sup>2</sup>)

# If in doubt, refer MEC

- Refer to the MEC for more specific details regarding eligibility for contraceptive use in various medical conditions



**Thank You**