

Contraceptives

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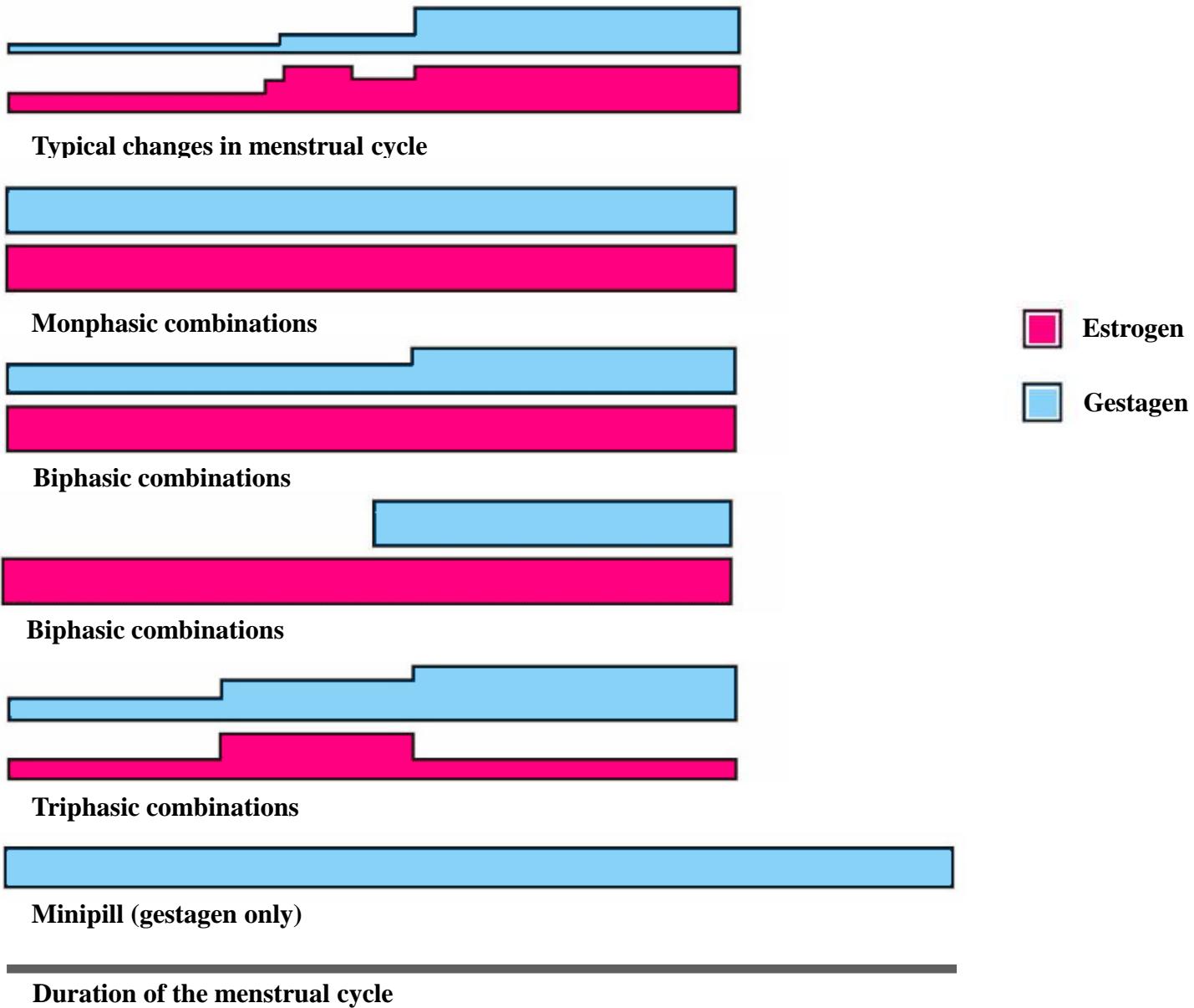
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Hormonal contraception

- **oral contraceptives**
- **parenteral (depot) contraceptives**
- **transdermal contraceptives**
- **contraceptive implantates**
- **local contraceptives**
- **postcoital contraceptives**

Oral contraceptives



Oral contraceptives estrogen + progestin combinations

- monophasic
 - estrogen component (mg): **ethinylestradiol (0,02-0,035-0,05)**
 - progestin component (mg): **levonorgestrel (0,1-0,25)**, **norgestimate (0,25)**, **desogestrel (0,15)**, **gestodene 0,075**), **chlormadinone (1,71)**, **drospirenone (3)**
- biphasic: days 1-10, 11-21
 - **ethinylestradiol (0,03-0,05) + levonorgestrel (0,05→0,125 mg)** or **desogestrel (0,025→0,125 mg)**
- triphasic: eg. days 1-7, 8-14, 15-21
 - **ethinylestradiol 0,03→0,04→0,03 + gestoden (0,05→0,07→0,1 mg)** or **levonorgestrel (0,05→0,075→0,125 mg)**

Oral contraceptives: estrogen + progestin effects on sexual organs

- contraceptive mechanism of action: inhibition of pituitary function, inhibition of ovulation, changes in the cervical mucus, endometrium, motility, secretion
- chronic use depresses ovarian function, and the ovary becomes smaller (when drugs are discontinued – longer amenorrheic period is possible)
- uterus: cervix hypertrophy (polip formation), thicker and less copious cervical mucus, preparations containing 19-norsteroids – glandular atrophy, less bleeding
- breast: enlargement, suppression of lactation

Oral contraceptives: estrogen + progestin side effects

advantageous side effects

- lower incidence of ovarian and endometrial cancer, ovarian cysts, mastopathies
- less bleeding, lower incidence of anemias
- improvement of endometriosis, dysmenorrhea

Oral contraceptives: estrogen + progestin side effects

disadvantageous side effects

- mild adverse effects
 - nausea, mastalgia, edema, endocrine changes, headache, loss of withdrawal bleeding
- moderate adverse effects
 - breakthrough bleeding, weight gain, skin pigmentation, acnes, hirsutism, ureteral dilation, vaginal infections, amenorrhea
- severe adverse effects
 - increased risk of vascular disorders: venous thromboembolism, myocardial infarction, cerebrovascular disease
 - increased risk of gastrointestinal disorders: cholestasis, gallbladder disease, hepatic adenomas
 - mental depression
 - cervical and breast cancer – controversial studies

Oral contraceptives: estrogen + progestin

Contraindications

- **thromboembolism, cerebrovascular disorders**
- **estrogen-dependent neoplasms**
- **vaginal bleeding with unknown origin**
- **before the epiphyseal closure is completed**

Oral contraceptives progestins alone („minipill”)

- daily progestin tablets: **norethindrone (0,35) or norgestrel (0,075)**
- useful in patients for whom estrogens are undesired or contraindicated (e.g. hepatic disease, prior thromboembolism)
- side effects: headache, dizziness, weight gain, impaired glucose tolerance, abnormal (irregular) bleeding

Parenteral (depot) contraceptives

- injection of depot **medroxyprogesterone acetate** (150 mg i.m.) every 2-3 months
 - common side effects: headache, impaired glucose tolerance, disadvantageous lipid changes, abnormal (irregular) bleeding
 - long amenorrheal episodes after the discontinuation of the treatment (6-12 months)
- **estrogen+progestin** depot injections - like the oral combinations

Contraceptive patches

- estrogen+progestin combinations
 - **ethinylestradiol 0,6 mg + norelgestromin 6 mg (active metabolite of norgestimate)**
 - daily release of 20 µg ethinylestradiol és 0,15 mg norgestromin
 - adverse effects - like oral combinations
 - less liver effects - both advantageous and disadvantageous

Contraceptive implants

- sc. implants of **norgestrel** or **etonorgestrel** (active metabolite of desogestrel)
 - duration of action: 3-6 years
 - low incidence of adverse effects (low hormone level)
 - headache, dizziness, acnes, alopecia, mood changes, breast tenderness, decreased libido, weight gain, vasomotor problems
 - major bleeding disturbances (mostly irregular cycles)

Local contraceptives

- intrauterine device cont. **levonorgestrel**
 - duration of action: 5 years
 - daily levonorgestrel release 20 µg
 - low systemic hormone level
- vaginal ring
 - 15 µg **ethinylestradiol** and 12 mg **etonorgestrel** released every day
 - 3 week use - 1 week pause
- spermicidal disinfectants
 - benzalkonium, nonoxinol
 - less effective, but inhibit the transmission of STD

Hormonal contraception postcoital contraceptives

- „morning after” pill
 - progestin alone or in combination with estrogen (combination doesn't have any beneficial effect over the progestin monotherapy)
 - within 72 hours after coitus (best within 12h)
 - high dose (e.g. 0,75-1,5 mg **levonorgestrel**)
 - common side effects: nausea, vomiting, headache, dizziness, breast tenderness, abdominal and leg cramps
 - ulipristal-acetate
 - SPRM, within 5 days (best – earlier)
 - side effects: similar to progestins
- abortion pill
 - mifepristone (RU 486)