

A short guide to Combined Hormonal Contraception [CHC]

There are 3 types of CHC:

Oral	
Patch	[Apply one patch per week]
Vaginal Ring	[Insert one vaginal ring for 3 weeks]

How to take:

- 1] Cyclically: Take every 21 days with a 7 day break
- 2] Tricycle: Use continuously for 9 weeks then have a 7 day break
- 3] Continuously: Use the method on a continuous basis [there is no increase in harm]

What is required?

- 1] Every woman needs a blood pressure check prior to first administration of any CHC, plus a follow up BP check at 3 months. After this an annual BP check is required.
- 2] A body mass index [BMI] must be recorded for all women and checked annually
- 3] After the initial supply of 3 months has been given, if all is well then 12 months of supplies for the oral and patch can be given out. The vaginal ring can only be given out in 3 months' supply due to storage requirements.

Risks:

- 1] Antibiotics do not reduce the effectiveness of CHC and therefore women do not need to be advised to use extra precautions. There are 2 antibiotics that are liver enzyme inducers and will reduce effectiveness and these are: **RIFAMPICIN** and **RIFABUTIN**
- 2] Women taking Lamotrigine should not use CHC due to the risk of reduced seizure control.
- 3] The absolute VTE risk is small.

Which women should NOT be given CHC as risks outweigh benefits:

- 1] Women over 35 years old and who are smoking
- 2] Women with a BMI of 35 or more
- 3] Systolic BP > 160
- 4] Diastolic BP > 95

5] Personal history of VTE

6] Family history of first degree relative having had a VTE under the age of 46 years

7] Women who suffer with migraine which are associated with aura.

For more information please follow this link:

<http://www.fsrh.org/pdfs/CEUGuidanceCombinedHormonalContraception.pdf>