CLINICAL PRACTICE QUESTIONS AND ANSWERS

Contraception in questions and answers

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Which of progestogens used in combined oral contraceptives are associated with a higher risk of thrombosis? Generally speaking, modern combined hormonal contraceptives are associated with only a minor increase in the risk of thrombosis. This risk depends predominantly on progestogen included in the drug, and, to a smaller degree, on the dose of estrogen (at least in the range of 20 to 35 μg of ethinylestradiol). Levonorgestrel seems to be the safest progestogen in the context of venous thromboembolism (VTE). It is used as a reference molecule in most studies assessing the effect of combined oral contraceptives on the risk of VTE. Norgestimate is another progestogen that is associated with a relatively small increase in the risk of VTE. A relatively higher increase in the risk of VTE was observed for combined oral contraceptives containing such progestogens as gestodene, desogestrel, and drospirenone.

Which hormonal contraceptives, if any, can be used in young female smokers? Smoking is not a contraindication to combined oral contraceptives in women younger than 35 years of age. However, simultaneous smoking and using the combined oral contraceptives may increase the risk of VTE, especially in women of late reproductive age. In young female smokers, the use of low-dose combined oral contraceptives, combined oral contraceptives containing natural estrogens (estradiol or estradiol valerate), or an intrauterine device is preferable.

Can emergency contraception be prescribed for a patient with a history of pulmonary embolism or stroke? A history of pulmonary embolism or stroke are not absolute contraindications to emergency contraception with ulipristal acetate.

Which type of contraception may be recommended in women with a history of venous thromboembolism (eg, deep venous thrombosis) or women receiving long-term oral anticoagulant treatment? In patients with a history of VTE only the progestogen-only contraception can be used. An intrauterine device

releasing levonorgestrel seems to be the optimal option for these patients.

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