Menstrual Suppression and Contraception

PATIENT/FAMILY GOALS

- Menstrual regulation
- Menstrual suppression/lightening
- Symptom management (cramps, acne)
- Contraception

PATIENT HISTORY

Consider obtaining contraception history (prior methods)
- Why did patient stop method?

Does your patient have:

- Personal and/or family history of blood clots (DVT, PE) or clotting disorder?
- History of migraines with aura?
- History of high blood pressure?
- Active cancer or treated for breast cancer in the last 6 months?
- History of liver, kidney, or cardiac disease?

RESOURCES

- Center for Young Women’s Health—youngwomenshealth.org
- CDC US Medical Eligibility Criteria (US MEC)—www.cdc.gov/reproductivehealth/contraception/mmwr/mec/summary.html
- Bedsider—bedsider.org
- Menstrual apps (for patients)—SpotOn, Flo, Clue, Period Tracker, MyCalendar-Period Tracker

If you have clinical questions about prescribing contraceptives for menstrual suppression, email gynecology@cchmc.org.

If you would like additional copies of this tool, or would like more information, please contact the Physician Outreach and Engagement team at Cincinnati Children’s.
Menstrual Suppression and Contraception

**INDICATIONS/SYMPTOMS (Why are you starting the treatment?)**

<table>
<thead>
<tr>
<th>Acne/PCOS</th>
<th>Menstrual headaches</th>
<th>Cyclic mood changes/ depression*</th>
<th>Developmental disorders</th>
<th>Irregular bleeding within 1 year of menarche</th>
</tr>
</thead>
</table>
| Drospirenone  
  - Yaz® (20 mcg Ethinyl Estradiol (EE))  
  - Yasmin® (30 mcg EE)  
  - Slynd® (does not contain EE) | Consider menstrual suppression  
  Consider progesterone only pills | Yaz®/Yasmin®  
  Avoid Depo-Provera®  
  Consider menstrual suppression (continuous dosing skipping placebo)  
  *SSRI first-line for premenstrual dysphoric disorder (PMDD) | Consider chewable OCP (FemCon®)  
  Consider patch (Xulane®)  
  Consider consultation for discussion about long-acting reversible contraception (LARC) options for long-term management | Consider patient’s height and parents’ height  
  Consider the progesterone only pill |

**SIDE EFFECTS (What to do?)**

<table>
<thead>
<tr>
<th>New Acne</th>
<th>Headaches</th>
<th>Nausea</th>
<th>Mood changes</th>
<th>Breakthrough bleeding</th>
</tr>
</thead>
</table>
| Switch to drospirenone containing pill  
  If no estrogen contraindication, increase estrogen content | Decrease estrogen content or switch to progesterone only  
  If associated with aura, switch to progesterone only pill  
  If during placebo week, consider continuous dosing or Mircette® (EE dose during placebo week) | Consider change in time of dose  
  Switch to lower estrogen content | Consider a different progesterone (avoid Depo-Provera®/medroxy-provera/norethindrone)  
  Increase dose of progesterone only pill (POP)  
  Increase estrogen content (10 → 20 → 30 → 35 mcg)  
  Ask about compliance |

**HORMONAL OPTIONS FOR MENSTRUAL MANAGEMENT**

<table>
<thead>
<tr>
<th>Generation</th>
<th>Brand name pills</th>
<th>Progestin characteristics</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td></td>
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</table>
| Norethindrone | Lo Loestrin® (10 mcg EE)  
  Loestrin Fe® 1/20 (20 mcg EE)  
  Loestrin (30 mcg EE) | Pro-gestational (edema, bloating, irritability, anxiety/depression), unscheduled bleeding |
| Medroxyprogesterone | Provera® (no EE) |                           |
| 2nd        |                  |                           |
| Levonorgestrel | Allesse/Aviane® (20 mcg EE)  
  Seasonale® (30 mcg EE)  
  Mirena®, Kyleena® (intrauterine device; no EE) | Improved bleeding  
  More androgen-related side effects (hyperlipidemia, oily skin, acne, facial hair growth) |
| Norgestrel | Lo Ovral® (30 mcg EE) |                           |
| 3rd        |                  |                           |
| Norgestimate | Orthocyclen® (35 mcg EE)  
  Xulane® (patch; 35 mcg EE) | More potent progestin, less androgen side effects |
| Desogestrel | Kariva® (20 mcg EE)  
  Mircette® (placebo pills contain EE)  
  Ortho-Cept® (30 mcg EE)  
  Desogen® (30 mcg EE) |                           |
| Etonorgestrel | Nuvaring® (vaginal ring; 15 mcg EE/day)  
  Nexplanon® (arm implant; no EE) |                           |
| 4th        |                  |                           |
| Drospirenone | Yaz® (20 mcg EE)  
  Yasmin® (30 mcg EE)  
  Slynd® (no EE) | Has anti-mineralocorticoid AND anti-androgenic properties  
  Concern for VTE risk  
  Treatment for premenstrual dysphoric disorder (PMDD) and acne |

For urgent issues, or to speak with the specialist on call 24/7, call the Physician Priority Link® at 1-888-987-7997.