

Ortho Evra[®] - "The Patch"
Do I need to stop using it?

On November 10, 2005, the FDA required new labeling for the Ortho Evra[®] Contraceptive Patch, warning women who use it that they are being exposed to higher amounts of estrogen than users of most combined oral contraceptives (regular birth control pills). In March 2008 the FDA revised the labeling to update the warning.

According to the new label, "Hormones from ORTHO EVRA[®] get into the blood stream and are removed from the body differently than hormones from birth control pills taken by mouth. **You will be exposed to about 60% more estrogen if you use ORTHO EVRA[®] than if you use a typical birth control pill containing 35 micrograms of estrogen.** [See Figure 1 below.] The risk of venous thromboembolic events (blood clots in the legs and/or the lungs) may be increased with ORTHO EVRA[®] use compared with use of birth control pills. Studies examined the risk of these serious blood clots in women who used either ORTHO EVRA[®] or birth control pills containing one of two progestins (levonogestrel or norgestimate) and 30-35 micrograms of estrogen. Results of these studies ranged from an approximate doubling of risk of serious blood clots to no increase in risk in women using ORTHO EVRA[®] compared to women using birth control pills."

Some of the common side effects associated with higher estrogen levels are breast tenderness, nausea, and fluid retention. The more serious complications associated with higher estrogen doses include blood clots in vessels serving vital organs such as the legs (deep venous thrombosis), lungs (pulmonary embolism) and brain (stroke).

If you are using The Patch and would like to discuss your personal contraceptive concerns and options with a well-informed clinician, call for an appointment at Student Health Gynecology (924-2773).

Figure 1.

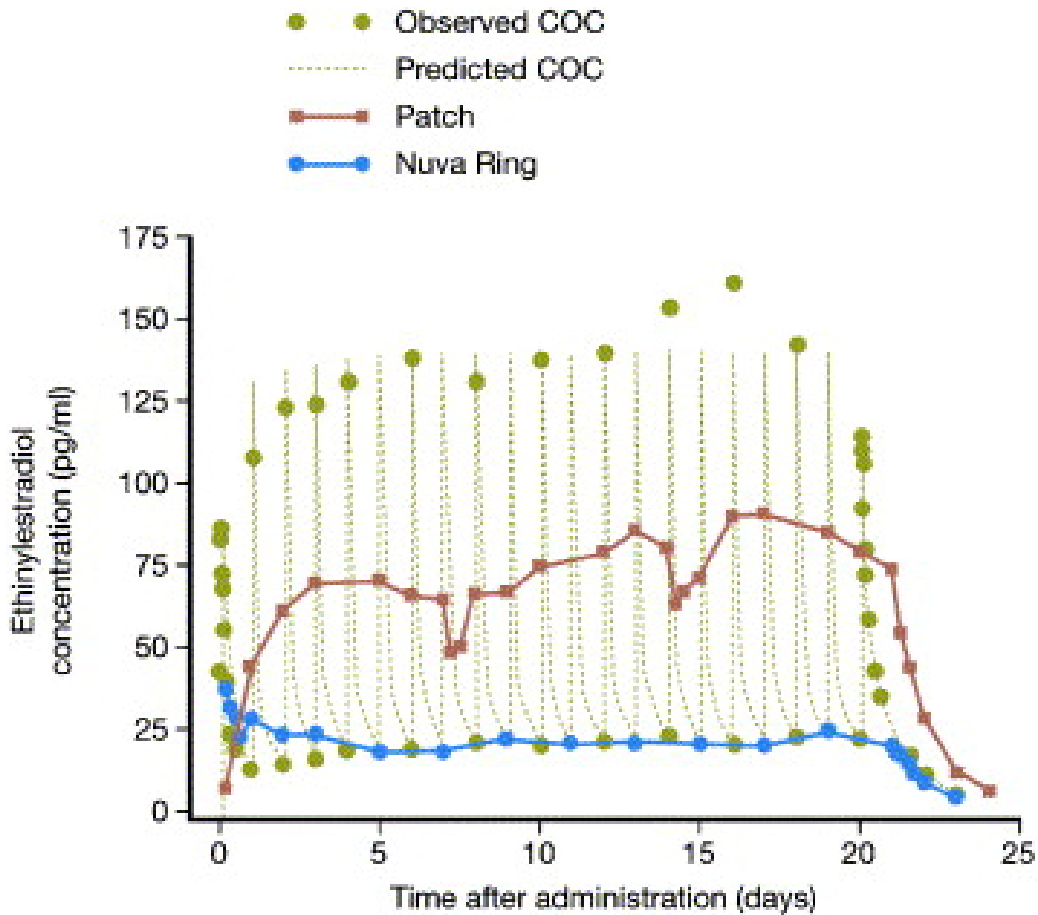


Table 1.

Approximate Risk of Venous Thromboembolic Events				
Not Using The Pill	Using a 35 mcg Pill	Using a 50 mcg Pill	Using The Patch	Within 6 Weeks Following Delivery
4 to 5 per 100,000 women	12 to 20 per 100,000 women	20 to 26 per 100,000 women	12 to 40 per 100,000 women	10 to 15 per 100,000 women