
Clinical Updates:

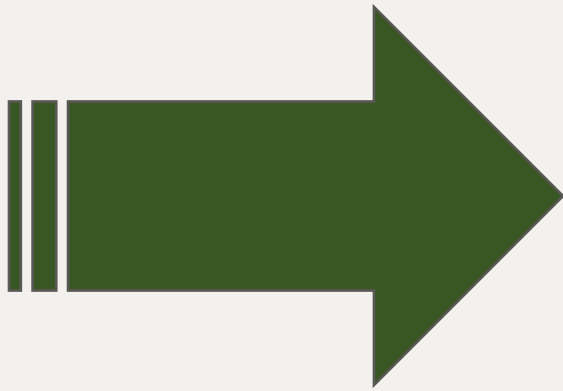
Contraceptive Pills



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Objectives

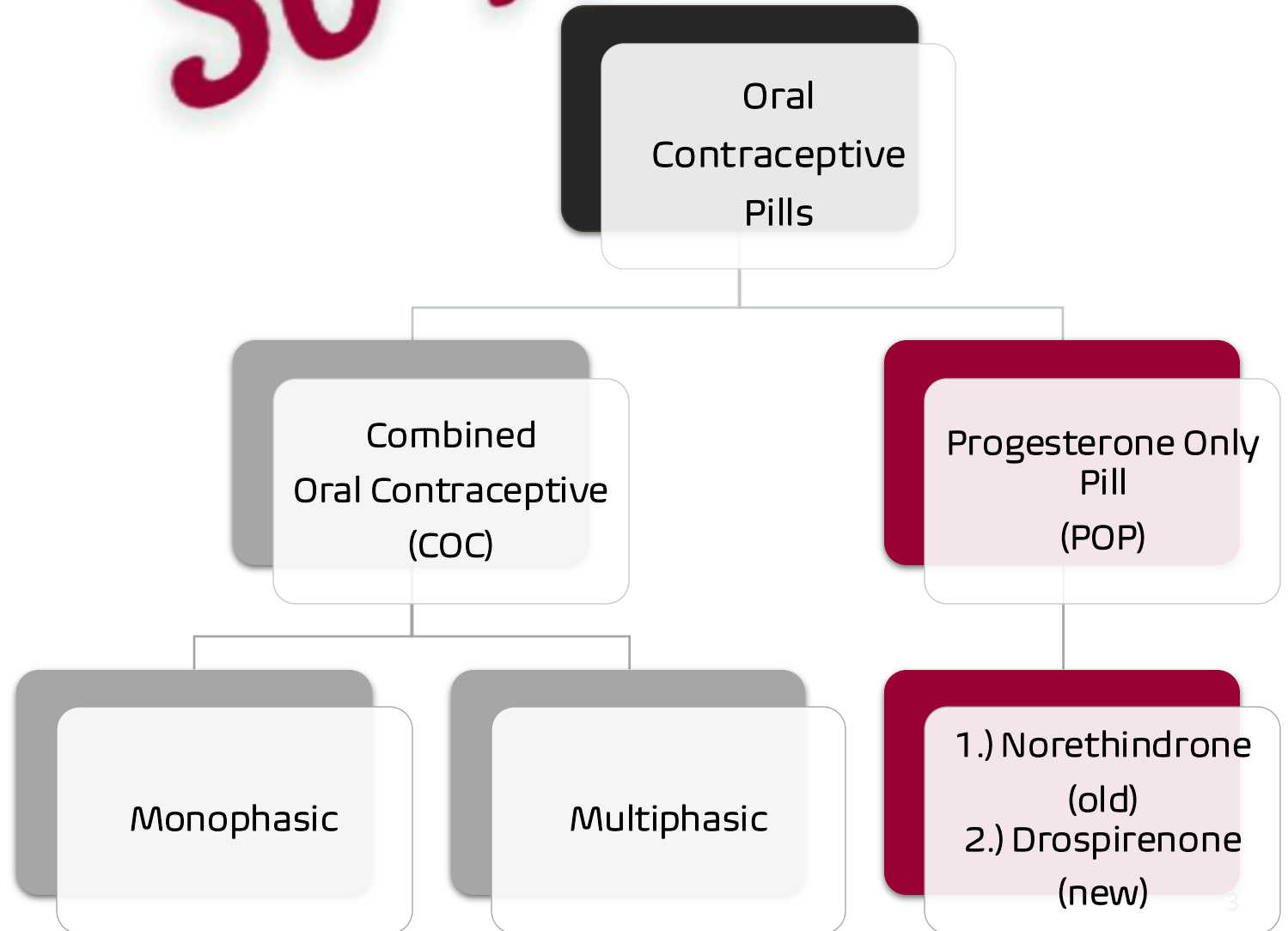


At the conclusion of this presentation, participants should be able to:

- ❑ Feel confident in selecting appropriate OCP's based on goal of treatment and managing side effects.
- ❑ Feel confident in differentiating different types of birth control pills based on hormonal type, amount, and formulation.



SO MANY PILLS....



Progesterone Only Pill

- Prior to 2019, only one POP-
Norethindrone 0.35 mg
- Camilla, ERRIN, Micronor, Norlyda
- 28 active hormonal tabs, no placebo
- Short $\frac{1}{2}$ life=**3 hour** delay window
- Ridged schedule can lead to non-compliance and birth control failure
- Best for people with **contraindications to estrogen** (HTN, clotting risks, migraines, breast feeding)
- Only inhibit ovulation 50-70%, but they also thicken cervical mucus
- No placebo pills=**variable bleeding** schedule

- "NEW": **Drospirinone 4 mg** :"**SLYND**"
- 24 hormonal pills, 4 placebo=scheduled bleed
- Derivative of Spironolactone=Great antiandrogenic effects (Great for PCOS, acne, hirsutism, ovarian cysts, **Mittelschmerz**)
- 24 hour $\frac{1}{2}$ life=better compliance, less failure



New & Improved



Still great for all these patients!

- **Suppress ovulation up to 90%, and up to 24 hours**
- Still has some bleeding variation, but typically improves with withdrawal bleed and over time

PRESCRIBING SLYND

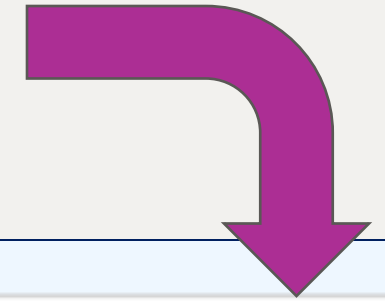
Not generic yet but can get cheaper by doing the following:

1. Have patient register for savings program

- <https://slynd.com/wp-content/uploads/2023/08/Slynd-Copay-Card-ECSLYNDHT-1.pdf>
- text SLYND to 31700

2. Send Rx to specific mail order pharmacy

- <https://carepoint.pharmacy/prescriptions/>



Patient Savings Program

Slynd[®]
(drospirenone) tablets, 4mg

PATIENT SAVINGS PROGRAM

ELIGIBLE PATIENTS MAY
PAY AS LITTLE AS

\$25* PER 1-MONTH
OR 3-MONTH
PRESCRIPTION FILL

3 MONTH FILL MAY COST PATIENT
\$8.33 PER MONTH

NO ACTIVATION NEEDED!

Simply ask your
pharmacist to apply
the savings to
your prescription.

Powered by:
CHANGE HEALTHCARE

BIN# 004682
PCN# CN
GRP# ECSLYNDHT
ID# SLYND

*Maximum savings limits apply; patient out-of-pocket expense will vary depending on insurance coverage. Offer not valid for patients enrolled in Medicare, Medicaid, or other federal or state healthcare programs. Please see back of card for Program Terms, Conditions, and Eligibility Criteria.

ELIGIBLE PATIENTS MAY
ALSO ACCESS SAVINGS
ONLINE OR VIA **TEXT**



Visit
SLYND.COM



Text
SLYND2 to 31700

*Text SLYND2 to 31700 to receive your Exeltis Women's Health Savings Card. Message and data rates may apply. Message frequency varies. Text STOP to opt out. Text HELP for help. For Privacy Policy: <https://exeltisusa.com/privacy-policy/>. For SMS Terms: <https://exeltis.online/SMSText>.

Questions? If you have questions about the **Patient Savings Program**, PLEASE DO NOT call your healthcare provider. Simply call us with questions at 1-833-210-5451.


Suggested		Search Results			
Results found: 1.					
E-Ctrld?	Name	Address	City	Phone	Fax
Yes	CAREPOINT PHARMACY - SCHAUMBURG, IL - 9 E. COMMERCE DRIVE	9 E. Commerce Drive	Schaumburg	855-237-9112	855-237-9113

Combined Pills

✦ There are still a TON to pick from! ✦

- *Most* pills contain Ethinyl Estradiol (20, 25, 30, 35 mcg) and 1 of 12 different synthetic progestins
- They work by suppressing ovulation (Estrogen) and thinning lining/thicken mucus (Progestin)
- Start lower "E" and increase as needed ----- All "P's" are antiandrogenic, some more than others.

• NOT JUST CONTRACEPTION!

- PMS/PMDD
- FIBROIDS
- PAIN
- PCOS
- BONE HEALTH
- ENDOMETRIOSIS
- MENOPAUSE SX
-  UTERINE/OVARIAN CANCER

- Pills come in 21/7 and 24/4 formulations
- 24/4 formulations with migraines, menorrhagia, dysmenorrhea, PMDD to shorten misery!
- Quick start vs. Sunday start for any pill.

Summary Chart of U.S. Medical Eligibility Criteria for Contraceptive Use

Condition	Sub-Condition	Cu-IUD		LNG-IUD		Implant		DMPA		POP		CHC	
		I	C	I	C	I	C	I	C	I	C	I	C
Age		Menarche to <20 yrs:	Menarche to <20 yrs:	Menarche to <18 yrs:	Menarche to <18 yrs:	Menarche to <18 yrs:	Menarche to <18 yrs:	Menarche to <18 yrs:	Menarche to <18 yrs:	Menarche to <18 yrs:	Menarche to <18 yrs:	Menarche to <40 yrs:	Menarche to <40 yrs:
		2	2	1	1	1	1	1	1	1	1	1	1
		≥20 yrs:1	≥20 yrs:1	18-45 yrs:1	18-45 yrs:1	18-45 yrs:1	18-45 yrs:1	18-45 yrs:1	18-45 yrs:1	18-45 yrs:1	18-45 yrs:1	≥40 yrs:2	≥40 yrs:2
Anatomical abnormalities	a) Distorted uterine cavity	4	4										
	b) Other abnormalities	2	2										
Anemias	a) Thalassemia	2	1	1	1	1	1	1	1	1	1	1	1
	b) Sickle cell disease [†]	2	1	1	1	1	1	1	1	1	1	2	2
	c) Iron-deficiency anemia	2	1	1	1	1	1	1	1	1	1	1	1
Benign ovarian tumors	(including cysts)	1	1	1	1	1	1	1	1	1	1	1	1
Breast disease	a) Undiagnosed mass	1	2	2*	2*	2*	2*	2*	2*	2*	2*	2*	2*
	b) Benign breast disease	1	1	1	1	1	1	1	1	1	1	1	1
	c) Family history of cancer	1	1	1	1	1	1	1	1	1	1	1	1
	d) Breast cancer [†]												
	i) Current	1	4	4	4	4	4	4	4	4	4	4	4
ii) Past and no evidence of current disease for 5 years	1	3	3	3	3	3	3	3	3	3	3	3	
Breastfeeding	a) <21 days postpartum					2*	2*	2*	2*	2*	2*	4*	4*
	b) 21 to <30 days postpartum												
	i) With other risk factors for VTE					2*	2*	2*	2*	2*	2*	3*	3*
	ii) Without other risk factors for VTE					2*	2*	2*	2*	2*	2*	3*	3*
	c) 30-42 days postpartum												
	i) With other risk factors for VTE					1*	1*	1*	1*	1*	1*	3*	3*
	ii) Without other risk factors for VTE					1*	1*	1*	1*	1*	1*	2*	2*
d) >42 days postpartum					1*	1*	1*	1*	1*	1*	2*	2*	
Cervical cancer	Awaiting treatment	4	2	4	2	2	2	2	2	1	1	2	2
Cervical ectropion		1	1	1	1	1	1	1	1	1	1	1	1
Cervical intraepithelial neoplasia		1	2	2	2	2	2	2	2	1	1	2	2
Cirrhosis	a) Mild (compensated)	1	1	1	1	1	1	1	1	1	1	1	1

Condition	Sub-Condition	Cu-IUD		
		I	C	
Diabetes	a) History of gestational disease	1		
	b) Nonvascular disease			
	i) Non-insulin dependent	1		
	ii) Insulin dependent	1		
	c) Nephropathy/retinopathy/neuropathy [†]	1		
	d) Other vascular disease or diabetes of >20 years' duration [†]	1		
Dysmenorrhea	Severe	2		
Endometrial cancer [†]		4	2	
Endometrial hyperplasia		1		
Endometriosis		2		
Epilepsy [†]	(see also Drug Interactions)	1		
Gallbladder disease	a) Symptomatic			
	i) Treated by cholecystectomy	1		
	ii) Medically treated	1		
	iii) Current	1		
	b) Asymptomatic	1		
Gestational trophoblastic disease [†]	a) Suspected GTD (immediate postevacuation)			
	i) Uterine size first trimester	1*		
	ii) Uterine size second trimester	2*		
	b) Confirmed GTD			
	i) Undetectable/non-pregnant β-hCG levels	1*	1*	
	ii) Decreasing β-hCG levels	2*	1*	
	iii) Persistently elevated β-hCG levels or malignant disease, with no evidence or suspicion of intrauterine disease	2*	1*	
	iv) Persistently elevated β-hCG levels or malignant disease, with evidence or suspicion of intrauterine disease	4*	2*	
	Headaches	a) Nonmigraine (mild or severe)	1	

https://www.cdc.gov/reproductivehealth/contraception/pdf/summary-chart-us-medical-eligibility-criteria_508tagged.pdf

Absolute Contraindications to COC's:

- Current breast disease
- Severe cirrhosis or liver tumors
- Major surgery with prolonged immobilization
- Migraines with aura
- Ischemic/valvular heart disease
- Stroke or history of blood clots
- Cardiomyopathy
- < 21 days postpartum and breastfeeding
- History or clotting disorders or lupus
 - Diabetes with nephropathy or vascular disease
- Current hypertension > 140 SBP
- Smokers over 35 years of age
- Multiple risks for atherosclerosis



Monophasic Pills

Progestin/Eth. Estradiol	Examples	Fe	Dosing	TIPS and Facts
Drospirenone 3/EE 20	Nikki Yaz		24/4	<u>FDA Approved</u> for Acne and PMDD
Levonorgestrel .1/EE 20	Aviane Lessina		21/7	Levonorgestrel better for Libido
Norethindrone Ace 1/EE 20	Junel Microgestin	With or w/o FE	24/4 or 21/7	If there are mood concerns, try lower estrogen level
Norethindrone Ace 1.5/ EE 30	Hailey Larin			Norethindrone also great for acne
Desogestrel .15/EE 30	Apri Isibloom		21/7	
Drospirenone 3/EE 30	Ocella Yasmin		21/1	Drospirenone is MOST Anti-Androgenic
Levonorgestrel .15/EE 30	Portia Levora		21/7	<div style="border: 1px solid black; border-radius: 15px; background-color: #fff9c4; padding: 10px; text-align: center;"> <p>Same hormone amount daily = Ability to skip cycles!</p> </div>
Norethindrone .5/EE 35	Necon		21/7	
Norethindrone 1/EE35	Nortrel			
Norgestimate .25/EE 35	Sprintec Estarylla		21/7	Great for Menorrhagia and Dysmenorrhea Norgestimate better for Libido

Multiphasic pills (biphasic or triphasic)

Can lessen overall hormone amount and **POTENTIALLY** reduce side effects

<u>LOWEST:</u> Norethindrone acetate (1,0)	Ethinyl estradiol (10,10)	•Lo Loestrin Fe	26 active, 2 FE tabs
Desogestrel (0.15,0,0)	Ethinyl estradiol (20,0,10)	•Azurette •Viorele	26 active, 2 placebo
Norethindrone acetate (1,1,1)	Ethinyl estradiol (20,30,35)	•Tilia Fe •Tri-Lagest Fe	Approved for acne. 21/7
Norgestimate (0.18,0.215,0.25)	Ethinyl estradiol (25,25,25) Ethinyl estradiol (35,35,35)	Tri-Lo-Sprintec Tri Sprintec	21/7 Approved for acne
Desogestrel (0.1,0.125,0.15)	Ethinyl estradiol (25,25,25)	•Velivet	<ul style="list-style-type: none"> ○ Different amount every week-no continuous use. ○ <u>Extended cycle options:</u> Jolessa Seasonique, Quartette <ul style="list-style-type: none"> - (Levo/EE) - 91 active, then cycle
Levonorgestrel (0.05,0.075,0.125)	Ethinyl estradiol (30,40,30)	•Levonest •Trivora (28)	
Norethindrone (0.5,0.75,1)	Ethinyl estradiol (35,35,35)	• Nortrel 7/7/7	
Norethindrone (0.5, 1, 0.5)		• Arnelle	

References:

- Up to Date
- CDC.gov
- Slynd.com

To claim CME credit (Must complete by 12-27-2024)



- Scan QR Code or click on the link below-
 - iPhone: use camera to take you to the site
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- <https://survey.alchemer.com/s3/7645302/CME-Clinical-Updates-ENDURING-MATERIAL>
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