Contraceptive Patch (Ortho-Evra)

Each month's supply contains 3 weekly hormonal birth control patches, which release synthetic hormones to protect against pregnancy. Usually, these hormones prevent the ovaries from releasing an egg (ovulation) and thicken the cervical mucus, preventing the sperm reaching an egg. The hormones also affect the lining of the uterus to keep an egg from implanting.

The patch is worn for 1 week and replaced on the same day of the week for 3 consecutive weeks. The 4th week is "patch-free," and the time when your period should begin.

EFFECTIVENESS
When used according to directions, it is 99% effective against pregnancy. Like other hormonal methods of birth control (the pill and Depo-Provera), it provides no protection against STIs (also called STDs). It is important to discuss sexually transmitted infection prevention with your partner prior to intercourse.

ADVANTAGES
Regular Cycles: The patch can help regulate the menstrual cycle, and this is especially helpful for women with periods that come too often or too infrequently.

Reduced Menstrual Cramps: The patch can offer significant relief to women with painful menstrual cramps. It also reduces the amount of blood flow during the period. Less blood loss is helpful in preventing anemia.

Acne: We have known for years that oral contraceptive pills can improve some women's acne. The patch may or may not have a beneficial effect on acne.

Other Benefits: Since the patch contains the same hormones as the pill, it is likely to have the same benefits as taking the pill. The risk of developing benign breast cysts, ovarian cysts, pelvic inflammatory disease, and tubal pregnancy are reduced by taking oral contraceptive pills. The pill is also associated with a markedly decreased risk of uterine and ovarian cancers.

SIDE EFFECTS
The potential side-effects are similar to the side effects from the use of oral contraceptives. Women over 198 lbs. may have decreased pregnancy protection. There is no protection against sexually transmitted infections (STIs). There is the potential for skin irritation at the patch site.

More Common Minor Side Effects:

Nausea. Some women experience some mild nausea when first starting the patch. Usually this goes away within a short time. If you have persistent problems or unusually severe nausea, contact your primary care provider.

Spotting or Breakthrough Bleeding. This is vaginal bleeding that occurs during weeks wearing a patch. This is a very common side effect during the first 3 months of patch use.

Breast Tenderness. Mild breast tenderness may occur after starting the patch. The tenderness can be reduced by decreasing your caffeine and salt intake and by wearing a bra with good support. Usually it gets better within a few weeks. If you notice persistent discomfort or a discrete lump, make an appointment with your primary care provider.

Mood Changes. Some women may notice changes in their emotional status: depressed mood or emotional instability. If you have a history of depression, it is important to monitor your progress carefully when starting the patch. If you notice changes in your mood after beginning the patch, call your primary care provider.

Decreased Sex Drive. While many things affect sex drive, the hormones in the patch can be a factor in decreased sex drive. If you are noticing this side effect, let your primary care provider know.

Weight Gain. Many patients ask about this side effect. Studies have shown that weight changes in young women taking hormonal contraceptives are no different than women who don't take hormones. Some women have noticed mild weight change (1 to 2 pounds) and mild fluid retention when using the patch. Using the patch should not make you gain 10 or 15 pounds.

Cervical Changes. Use of the patch, as well as pregnancy, may be associated with some cellular changes on the cervix, called a cervical ectropion. The delicate mucus secreting cells that line the inside of the cervix become present at the outer opening of the cervix. This can make the cervix more vulnerable to sexually transmitted infections.

Vaginal Discharge. All menstruating women have a cyclical vaginal discharge. Patch users may notice subtle changes, but most women won't notice any changes.

Rare but Serious Side Effects:

Blood Clots. The hormones in the patch can make women more prone to forming blood clots. A blood clot can occur in a vein or artery and can have different symptoms depending on where it forms. Clots can occur in the legs, abdomen, heart, lungs, eye, or brain. In the brain, a clot could manifest as a stroke. The risk of these events occurring is very low, but increases in women over 35, in smokers, and in those with high blood pressure, heart disease, diabetes, clotting tendency, or a family history of clotting abnormalities. The risk of blood clots is slightly higher than for women on birth control.

The warning signs of a blood clot spell out the word ACHES:

A Abdominal pain
C Chest pain (also shortness of breath)
H Headaches (especially those that are new, severe, or associated with persistent dizziness, difficulty speaking, fainting, numbness or weakness in extremities)
E Eye problems (blurred vision or loss of vision)
S Severe leg pain (and/or redness and swelling in the calf or thigh)

If you develop any of the ACHES side effects or jaundice (a yellowing of the eyes or skin) while on the patch, call UHS immediately at 275-2662.

If you need emergency medical attention on campus, call MERT at x13. If off campus, call 911. If out of town, contact a local medical provider or go to a hospital emergency room.
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Rare but Serious Side Effects (continued)

High Blood Pressure. The hormones in the patch can raise your blood pressure, which is the reason blood pressure is checked a few months after you begin using the patch.

Risk of Blood Clots: The risk of blood clots is slightly higher than for women on birth control pills.

Liver Tumors. The hormones in the patch have been associated with an increased risk of forming benign liver tumors. This is a very rare occurrence, but you should contact your primary care provider if you develop upper abdominal pain while using the patch.

Breast Cancer Risk. Many patients ask if hormones in the patch can affect their risk of developing breast cancer. To date, there have been studies that suggest there is a slightly increased risk of breast cancer in women who have used oral contraceptive pills, which have the same hormones as the patch. Women who are considering using the patch and especially those with a strong family history are encouraged to discuss this risk with their primary care provider.

Cervical Cancer Risk. The risk of developing this type of cancer is slightly increased in women who use hormonal contraceptives. Routine Pap smear testing is an excellent screening tool and is recommended on a yearly basis for women using the patch.

GETTING THE PATCH
Before you receive a prescription for the patch, we would like to see you for a visit to take your medical history and perform an exam that usually includes a gynecological examination and Pap smear. Call UHS at 275-2662 to schedule an appointment with your primary care provider or with one of the women’s health nurse practitioners. Let our staff know if this is your first exam. We are very sensitive to and supportive of women having their first exams. You can fill your prescription at a local pharmacy.

SCHEDULING AN APPOINTMENT
Call 275-2662 to schedule an appointment at the University Health Service (UHS). UHS offers a full range of gynecological and contraceptive services. You can schedule an appointment with your primary care provider (PCP) or with one of the women’s health nurse practitioners for gynecological care and to discuss contraceptive options. All visits to UHS are strictly confidential.

LINKS

ORTHO EVRA
http://www.orthoevra.com/

Planned Parenthood
http://www.plannedparenthood.org/bc/030109_OrthoEvra.html