

PRECAUTIONS IN THE PROVISIONS OF COMBINED CONTRACEPTIVES

Table 1

<p>Do not restrict use of combined contraceptives for the following conditions (WHO category #1): *</p>
<p>Postpartum >21 days Post abortion after first or second trimester or immediately after post-septic abortion. History of gestational diabetes Mild headaches (<u>non migraine</u>) Irregular vaginal bleeding patterns, without or with heavy prolonged bleeding and no anemia. Past history of pelvic inflammatory disease (PID). Current or recent history of (within last 3 months) PID. Current or recent history of (within last 3 months) sexually transmitted infection. Vaginitis without purulent cervicitis. Increased risk of sexual transmitted infections (e.g., multiple partners or partner who has multiple partners). HIV positive, high risk of HIV, AIDS Benign breast disease Cervical ectropion Endometrial or ovarian cancer Viral hepatitis carrier Family history of breast cancer Thyroid conditions: simple goiter, hyperthyroidism, hypothyroidism. Benign or malignant trophoblastic disease. Iron deficiency anemia Epilepsy Malaria Current use of antibiotics Nulliparity or parity Severe dysmenorrhea Tuberculosis, including pelvic Schistosomiasis (uncomplicated or with fibrosis of the liver). Endometriosis Benign ovarian tumors Prior pelvic surgery Uterine fibroids with or without distortion of the uterine cavity. Depressive disorders Minor Surgery without immobilization *See WHO precautions for detailed medical eligibility criteria.</p>

Table 2

<p>Advantages generally outweigh theoretical or proven disadvantages and generally can be provided without restrictions in these conditions (WHO category #2): *</p>
<p>Severe headaches that definitely start after initiation of oral contraceptives; migraine headaches without focal neurological symptoms. * Diabetes mellitus: gestational diabetes or diabetes without vascular disease. Insulin or non-insulin dependent. Major surgery without prolonged immobilization. Sickle cell disease or sickle C disease. Moderate blood pressure: 140-159/100-109. Undiagnosed breast mass. Cervical cancer awaiting treatment and cervical intraepithelial neoplasia. Over 50 years of age. Conditions likely to make it very difficult for a woman to take OCs consistently and correctly. Family history of hyperlipidemia. Known hyperlipidemia. * Family history of death of a parent or sibling due to myocardial infarction before the age of 50. Obesity equal to or greater than 30kg/m body mass index. Drug interactions: Antiviral therapy. Drug interactions: Griseofulvin. Smoking and less than 35 years of age Superficial Thrombophlebitis Noninsulin and insulin dependent diabetes Asymptomatic gallbladder disease Undiagnosed abnormal vaginal bleeding History of hypertension during pregnancy, where current BP is measurable and WNL. Family history of DVT/PE in a first degree relative. Uncomplicated valvular heart disease *See WHO precautions for detailed medical eligibility criteria.</p>

PRECAUTIONS IN THE PROVISIONS OF COMBINED CONTRACEPTIVES

Table 3

<p>Exercise caution if combined contraceptives are used or considered in the following situations and carefully monitor for adverse effects (WHO category #3):*</p>
<p>Postpartum <21 days Over 35 and light smoker less than 15 cigarettes per day Lactation (6 weeks to 6 months) Over 35 years of age and light smoker (less than 15 cigarettes/day). Past history of breast cancer but no evidence of recurrence for 5 years. Use of drugs that affect liver enzymes: rifampicin, rifabutin and griseofulvin; anticonvulsants such as phenytoin, carbamazepine, barbiturates, topiramate and primidone and oxcarbazepine. Gallbladder disease: medically treated and current biliary tract disease and history of OC-related cholestasis. Multiple risk factors for arterial cardiovascular disease. * History of hypertension where BP cannot be evaluated(including during pregnancy)* Adequately controlled blood pressure that can be evaluated.* Elevated BP-systolic 140-159 or diastolic 90-99. Known hyperlipidemia * Migraine at or over 35 years old without aura.* Diabetes with nephropathy/retinopathy/neuropathy* Other vascular disease or diabetes of >20 years duration. * Mild cirrhosis *See WHO precautions for detailed medical eligibility criteria.</p>

Table 4

<p>Refrain from providing combined contraceptives for women with the following diagnoses (WHO category #4):*</p>
<p>Deep vein thrombosis or pulmonary embolism, or history thereof. Cerebrovascular accident (stroke), coronary artery or ischemic heart disease, or a history thereof. Valvular heart disease, complicated by pulmonary hypertension, atrial fibrillation, or history of subacute bacterial endocarditis. Diabetes with nephropathy, retinopathy, neuropathy or other vascular disease; diabetes of more than 20 years. Pregnancy. Lactation (<6 weeks postpartum). Liver problems: benign hepatitic adenoma or liver cancer, or a history thereof; active viral hepatitis; severe cirrhosis. Headaches, including migraine, with focal neurologic symptoms. Major surgery with prolonged immobilization or any surgery on the legs. 35 years old and older and currently a heavy smoker (15 or more cigarettes a day). Hypertension, 160+/100+ or with vascular disease. Known thrombogenic mutations (e.g. Factor V Leiden; Prothrombin mutation; Protein S, Protein C and Antithrombin deficiencies). Current breast cancer</p> <p>*See WHO precautions for detailed medical eligibility criteria.</p>