

Întrebarea de a doua zi- opțiuni contraceptive în 2021

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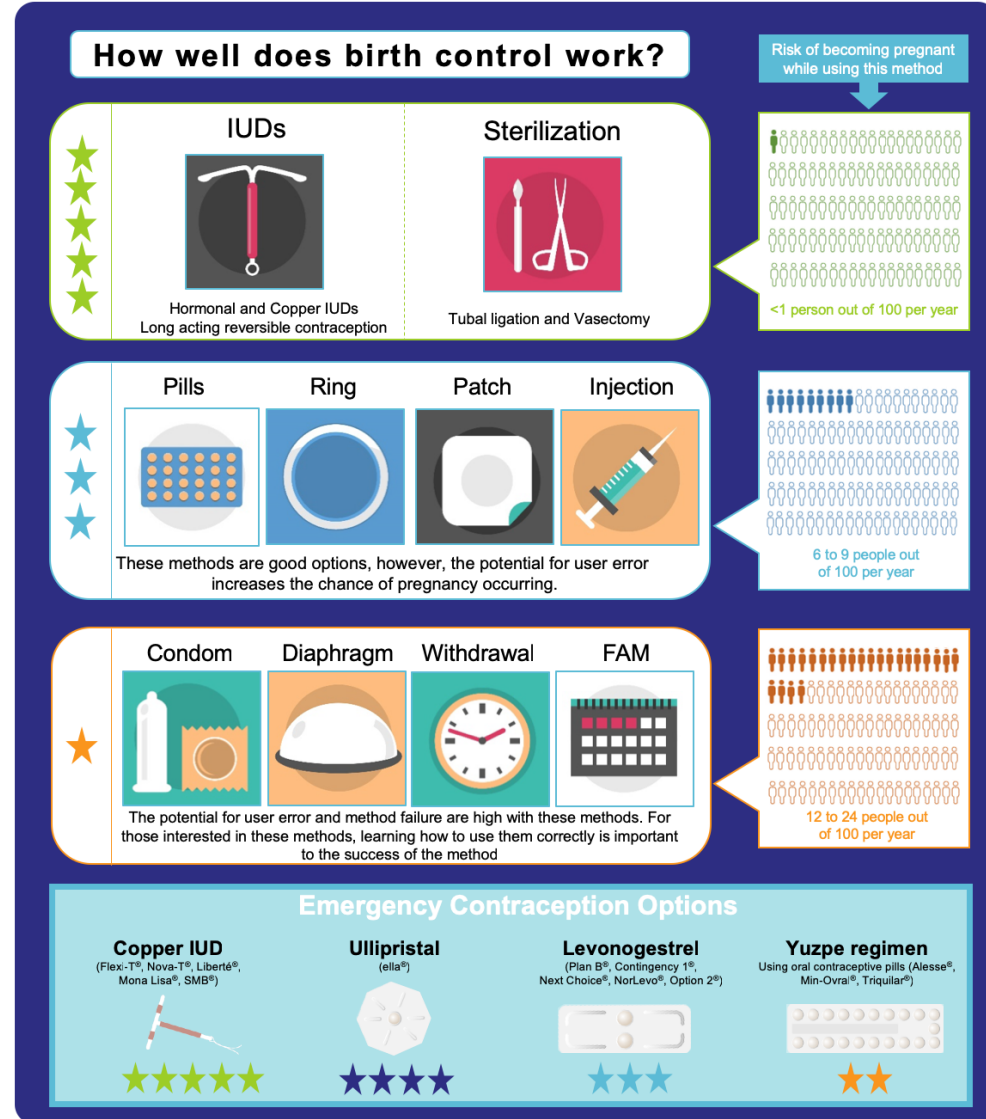
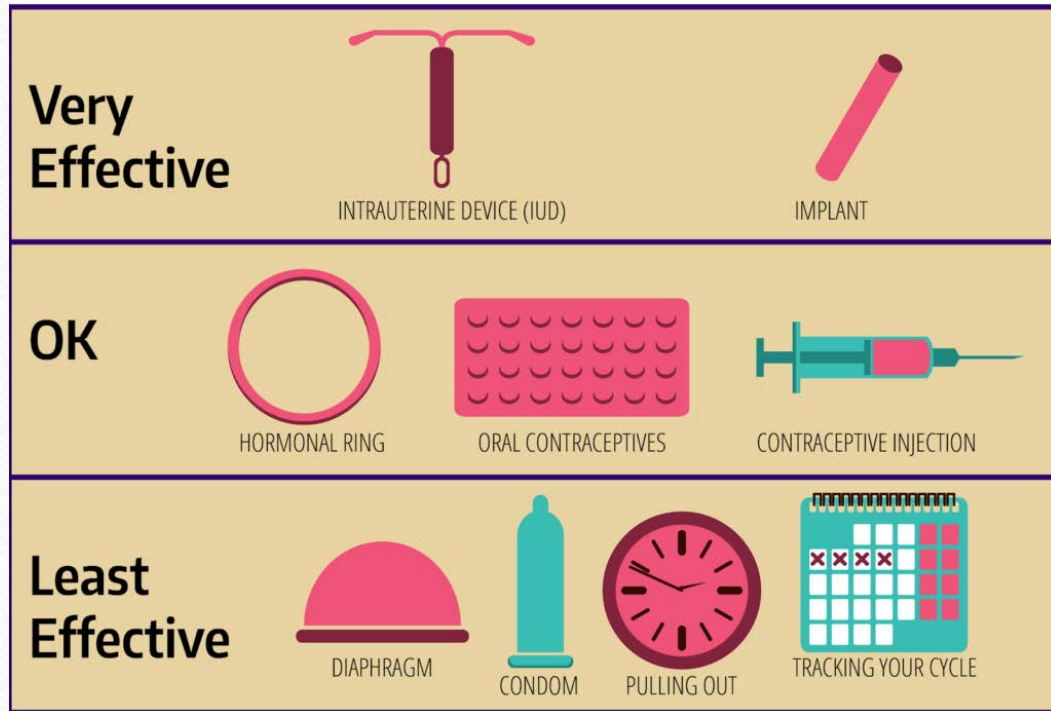


Webinar Farma Practic 09-10 aprilie 2021

-Poate porni prevenția din farmacie? -



Mijloace de contracepție și eficiența lor



Mijloace de contracepție și eficiența lor

Effectiveness of birth control methods

Method	Typical Use Rate of Pregnancy	Lowest Expected Rate of Pregnancy
Sterilization:		
Male Sterilization	0.15%	0.1%
Female Sterilization	0.5%	0.5%
Hormonal Methods:		
Implant (<i>Norplant™ and Norplant™-2</i>)	0.05%	0.05%
Hormone Shot (<i>Depo-Provera™</i>)	0.3%	0.3%
Combined Pill (<i>Estrogen/Progestin</i>)	5%	0.1%
Minipill (<i>Progestin only</i>)	5%	0.5%
Intrauterine Devices (IUDs):		
Copper T	0.8%	0.6%
Progesterone T	2%	1.5%
Barrier Methods:		
Male Latex Condom ¹ w/o spermicide	14%	3%
Diaphragm ²	20%	6%
Vaginal Sponge (<i>no previous births</i>) ³	20%	9%
Vaginal Sponge (<i>previous births</i>) ³	40%	20%
Cervical Cap (<i>no previous births</i>) ²	20%	9%
Cervical Cap (<i>previous births</i>) ²	40%	26%
Female Condom	21%	5%
Spermicide: (gel, foam, suppository, film)		
	26%	6%
Natural Methods:		
Withdrawal	19%	4%
Natural Family Planning (<i>calendar, temperature, cervical mucus</i>)	25%	1-9%
No Method:		
	85%	85%

Also see Table 10.1 p. 268

FDA, 1997

TYPES of contraception

iviDonor

1. Barrier contraceptives



CONDOMS



SPERMICIDE



FEMALE CONDOMS



THE DIAPHRAGM



THE VAGINAL SPONGE

2. Hormonal contraceptives



THE PILL



THE PROGESTOGEN-ONLY MINI PILL



THE MORNING-AFTER PILL (MAP)



THE CONTRACEPTIVE PATCH



THE CONTRACEPTIVE PATCH



THE CONTRACEPTIVE INJECTION



THE CONTRACEPTIVE IMPLANT

3. Intrauterine contraceptives



INTRAUTERINE DEVICE (IUD)

4. Permanent contraception



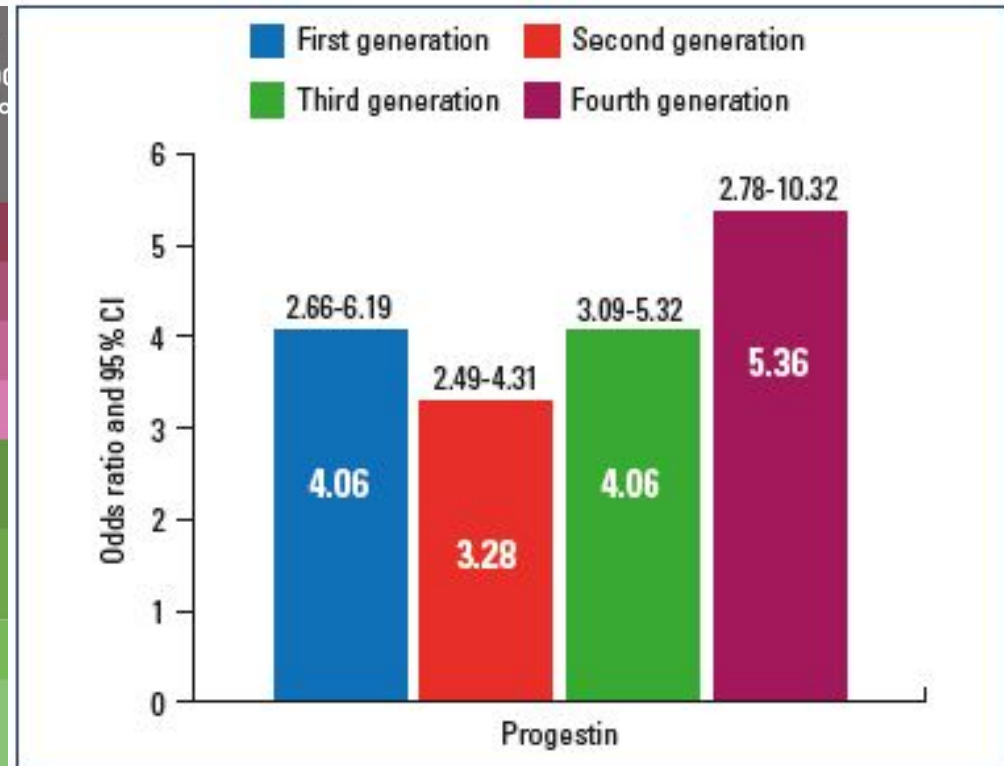
VASECTOMY



TUBAL LIGATION

Contracepția și riscul de TEP

Type of contraception	Evidence of increased risk of blood clots compared to no hormonal contraception	Risk compared to taking no hormonal contraception (range)	Approximate no. of women out of 10,000 who would get a blood clot if followed for year*
Pregnant woman	Yes	5 - 10 times higher	20 (2)
Transdermal patch	Yes	up to 7 times higher	9.7 (1)
Vaginal ring	Yes	4 - 10 times higher	7.9 (1)
Combined pill	Yes	2 - 5 times higher	5.4 (1)
Non contraceptive user	No	Baseline risk: 2 - 6	2.1 women (1)
Progestosterone only pill	No	2 - 6	2.1 (1)
Implant	No	2 - 6	1.7 (1)
Intrauterine device (progestogen only)	No	2 - 6	1.4



Farmacistul este...

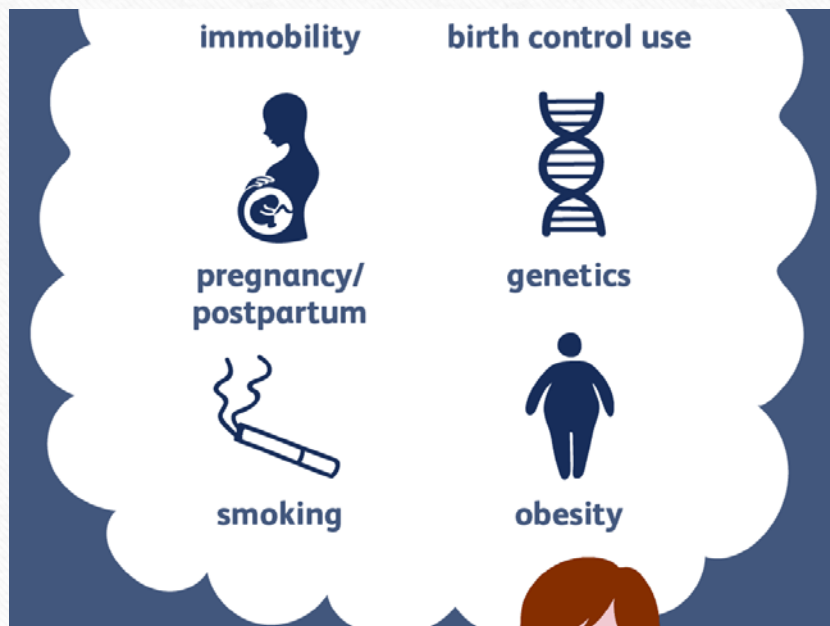
Indicat să: ...

- Recomande
 - Consult de specialitate
 - Contracepție de barieră și/sau spermicide
 - Să ofere informații relevante prin pliante
 - Să ofere asistență în limita competenței
- Să ofere informații despre riscuri și efecte adverse
- Să menționeze riscul de contactare a ITS pt metoda aleasă
- Ofere prompt contracepție de urgență, dar nu în mod regulat

Nu este indicat să: ...

- Ofere contracepție hormonală fără o recomandare **recentă** de specialitate în prealabil
- Doar să vândă un produs pt un target de marketing
- Se substituie specialistului în OB-Gin sau planning familial

Contracepția hormonală



OESTROGEN CONTENT	PROGESTOGEN CONTENT	BRAND	RISK
Ethinylestradiol 20 micrograms	Desogestrel 150 micrograms	Gedarel® 20/150	4.26 times
Ethinylestradiol 30 micrograms		Mercilon®	
		Gedarel® 30/150 Marvelon®	
Estradiol valerate 2 mg	Dienogest 2mg	Qlaira®	4.2 times
Ethinylestradiol 30 micrograms	Drospirenone 3 mg	Yasmin®	4.12 times
Ethinylestradiol 20 micrograms	Gestodene 75 micrograms	Femodette®	3.64 times
		Millinette® 20/75	
		Sunya® 20/75	
		Femodene®	
		Katya® 30/75	
Ethinylestradiol 30 micrograms		Millinette® 30/75	
		Femodene® ED	
Ethinylestradiol 35 micrograms	Norethisterone 1 mg	Norimin®	2.56 times
Mestranol 50 micrograms		Norinyl-1®	
Ethinylestradiol 35 micrograms		Synphase®	
	Norethisterone 500 micrograms	Brevinor®	
Ethinylestradiol 35 micrograms	Norgestimate 250 micrograms	Cilest®	2.536 times
	Levonorgestrel 125 micrograms	Logynon®	2.38 times
		TriRegol®	
	Logynon® ED		
	Levest®		
	Microgynon® 30		
Ethinylestradiol 30 micrograms	Levonorgestrel 150 micrograms	Ovranelle®	
		Rigevidon®	
		Microgynon® 30 ED	
	Levonorgestrel 50 micrograms	Logynon®	
		TriRegol®	
		Logynon® ED	
		Logynon®	
Ethinylestradiol 40 micrograms	Levonorgestrel 75 micrograms	TriRegol®	
		Logynon® ED	
Estradiol (as hemihydrate) 1.5 mg	Nomegestrol acetate 2.5 mg	Zoely®	no data

Contracepția hormonală

WOMEN FACE HIGHER RISK OF STROKE

NEW GUIDELINE OFFERS WAYS TO LOWER YOUR RISK

WOMEN HAVE MORE STROKES THAN MEN, AND STROKE KILLS MORE WOMEN THAN MEN. Talk to your healthcare provider about how to lower your risk, using the below information from the new American Heart Association/American Stroke Association prevention guidelines.

Stroke RISK GOES UP due to ...

- PREGNANCY**: About 3 out of 10,000 pregnant women have a stroke during pregnancy compared to 2 out of 10,000 young women who are not pregnant.
- PREECLAMPSIA**: This is a term for high blood pressure that develops during pregnancy, and it doubles the risk of stroke later in life.
- BIRTH CONTROL PILLS**: May double the risk of stroke, especially in women with high blood pressure.
- HORMONE REPLACEMENT THERAPY**: Once thought to lower stroke risk, this in fact increases the risk.
- MIGRAINES WITH AURAS + SMOKING**: Strokes are more common in women with migraines with aura who also smoke.
- ATRIAL FIBRILLATION**: Quadruples stroke risk and is more common in women than men after age 75.

LOWER YOUR RISK for stroke by ...

- Pregnant women with very high blood pressure should be treated with safe blood pressure medications.
- Talk to your healthcare provider about whether you should follow the guideline recommendation of low-dose aspirin starting in the second trimester (week 12) to lower preeclampsia risk.
- Women should be screened for high blood pressure before taking birth control pills. Women should not smoke, and they should also be aware that smoking and the use of oral contraceptives increases the risk of stroke.
- Hormone replacement therapy should not be used to prevent stroke in postmenopausal women.
- Smokers who have migraines with aura should quit to avoid higher stroke risk.
- All women over age 75 should be screened for atrial fibrillation.

STROKE BY THE NUMBERS

- About **55,000** more women than men have a stroke each year.
- Stroke is the **#3** cause of **DEATH** in Women and **#4** cause of **DEATH** in Men.
- Number of **STROKE DEATHS IN ONE YEAR**: Women **77,109**, Men **52,367** (from 2010, the most recent year the statistics are available).

FAST Do you know how to identify a stroke and when emergency help is needed? Learn how to spot a stroke F.A.S.T. at StrokeAssociation.org/warningsigns

Table 2: Hormone Function and Relative Balance Side Effects in Contraceptives^{4,5}

	Function	Deficiency	Excess
Estrogenic effects	<ul style="list-style-type: none"> • Suppression of FSH and LH = partial inhibition of ovulation depending on dose • Alter secretory and cellular structures of the endometrium 	<ul style="list-style-type: none"> • Irritability, nervousness • Early and/or mid-cycle breakthrough bleeding • Increased spotting • Hot flushes • Hypomenorrhea • Amenorrhea • Painful intercourse 	<ul style="list-style-type: none"> • Nausea, bloating • Cervical mucorrhea • Hypermenorrhea • Hyperpigmentation • Uterine or leg cramps • Hypertension • Migraine headaches • Breast tenderness • Dizziness, vertigo • Cyclic weight gain • Fibroid growth
Progestational effects	<ul style="list-style-type: none"> • Suppression of LH = inhibition of ovulation • Thickening of cervical mucus • Decreased glandular development of endometrium = hampered implantation • Possible decrease in the sperm's capacity to penetrate the ovum 	<ul style="list-style-type: none"> • Amenorrhea • Late breakthrough bleeding • Hypermenorrhea • Weight loss 	<ul style="list-style-type: none"> • Increased appetite • Persistent weight gain • Tiredness, fatigue • Hypomenorrhea • Acne, oily scalp • Hair loss • Depression • Hirsutism • Breast regression • Changes in libido
Androgenic effects*			<ul style="list-style-type: none"> • Acne • Hirsutism • Masculinization • Oligomenorrhea

Educația privind prevenirea BTS/ITS

PREVENT TEST TREAT



Prevention in the palm of your hand!

PREVENT TEST TREAT

Take the upper hand against HIV!



PREVENT TEST TREAT



Hands Down! Know your status!

PREVENT TEST TREAT



Working hand in hand for your health!

PIEMA COUNTY
PIEMA COUNTY HEALTH DEPARTMENT



THE LOWDOWN ON HOW TO PREVENT SEXUALLY TRANSMITTED DISEASES

Every year, there are an estimated **20 MILLION** new STD infections in the United States. Anyone who is sexually active can get an STD.

Some groups are disproportionately affected by STDs:

- Adolescents and young adults
- Sex workers and their partners
- Men who have sex with men
- Men and women who have sex with multiple partners

The Good News

STDs **ARE** preventable. There are steps you can take to keep yourself and your partner(s) healthy.

Abstinence

The surest way to avoid STDs is to not have sex.



This means not having vaginal, oral, or anal sex.

Partners

Agree to only have sex with one person who agrees to only have sex with you.



Make sure you both get tested to know for sure that neither of you has an STD. This is one of the most reliable ways to avoid STDs.

Let's both get tested together!

Why take a chance when we can know for sure?

It might be uncomfortable to start the conversation, but protecting your health is your responsibility.

Partner

Talk with your sex partner(s) about STDs and staying safe before having sex.

Use Condoms

Using a condom correctly every time you have sex can help you avoid STDs.

Condoms lower the risk of infection for all STDs. You still can get certain STDs, like herpes or HPV, from contact with your partner's skin even when using a condom.



Most people claimed they used a condom the first time they ever had sex, but when asked about the last 6 weeks, less than one quarter said they used a condom every time.

Get Vaccinated

The most common STD can be prevented by a vaccine.

The HPV vaccine is safe, effective, and can help you avoid HPV-related health problems like genital warts and some cancers.

Who should get the HPV vaccine?

Routine vaccination for boys & girls ages 11 to 12.

Catch-up vaccination for:

- Young women that ages 13 through 26 and young men that ages 16 through 21
- Men, women, & other ages who have sex with other people
- Men with compromised immune systems that ages 15 through 26

Get Tested

Many STDs don't have symptoms, but they can still cause health problems.



Get your health care provider to test you.

Search for local health departments.

Make a location pin for your city.

The only way to know for sure if you have an STD is to get tested.

If You Test Positive...

Getting an STD is not the end! Many STDs are curable and all are treatable.