

## ● NATIONAL FUNDING/ACCESS DECISIONS

### Scottish Medicines Consortium (SMC) decisions

SMC No. 36/03

The *Scottish Medicines Consortium* has advised (September 2003) that *Cerazette*® should be restricted for use in women who cannot tolerate oestrogen-containing contraceptives or in whom such preparations are contra-indicated.

## ● MEDICINAL FORMS

There can be variation in the licensing of different medicines containing the same drug.

### Tablet

#### ▶ Desogestrel (Non-proprietary)

**Desogestrel 75 microgram** Desogestrel 75microgram tablets | 84 tablet [PoM] £9.55 DT = £2.44

#### ▶ Aizea (Besins Healthcare (UK) Ltd)

**Desogestrel 75 microgram** Aizea 75microgram tablets | 84 tablet [PoM] £5.21 DT = £2.44

#### ▶ Cerazette (Merck Sharp & Dohme Ltd)

**Desogestrel 75 microgram** Cerazette 75microgram tablets | 84 tablet [PoM] £9.55 DT = £2.44

#### ▶ Cerelle (Consilient Health Ltd)

**Desogestrel 75 microgram** Cerelle 75microgram tablets | 84 tablet [PoM] £3.50 DT = £2.44

#### ▶ Desomono (MedRx Licences Ltd)

**Desogestrel 75 microgram** Desomono 75microgram tablets | 84 tablet [PoM] £6.50 DT = £2.44

#### ▶ Desorex (Somex Pharma)

**Desogestrel 75 microgram** Desorex 75microgram tablets | 84 tablet [PoM] £2.99 DT = £2.44

#### ▶ Feanolla (Lupin Healthcare (UK) Ltd)

**Desogestrel 75 microgram** Feanolla 75microgram tablets | 84 tablet [PoM] £3.49 DT = £2.44

#### ▶ Moonia (Stragen UK Ltd)

**Desogestrel 75 microgram** Moonia 75microgram tablets | 84 tablet [PoM] DT = £2.44 (Hospital only)

#### ▶ Zelleta (Morningside Healthcare Ltd)

**Desogestrel 75 microgram** Zelleta 75microgram tablets | 84 tablet [PoM] £2.98 DT = £2.44

## Levonorgestrel

29-Oct-2018

## ● INDICATIONS AND DOSE

### Emergency contraception

#### ▶ BY MOUTH

- ▶ Females of childbearing potential: 1.5 mg for 1 dose, taken as soon as possible after coitus, preferably within 12 hours and no later than after 72 hours (may also be used between 72–96 hours after coitus but efficacy decreases with time), alternatively 3 mg for 1 dose, taken as soon as possible after coitus, preferably within 12 hours and no later than after 72 hours (may also be used between 72–96 hours after coitus but efficacy decreases with time). Higher dose should be considered for patients with body-weight over 70 kg or BMI over 26 kg/m<sup>2</sup>

### Contraception

#### ▶ BY MOUTH

- ▶ Females of childbearing potential: 30 micrograms daily starting on day 1 of the cycle then continuously, dose is to be taken at the same time each day, if administration delayed for 3 hours or more it should be regarded as a "missed pill"

### DOSE ADJUSTMENTS DUE TO INTERACTIONS

- ▶ When used orally as an emergency contraceptive, the effectiveness of levonorgestrel is reduced in women taking enzyme-inducing drugs (and for up to 4 weeks after stopping); a copper intra-uterine device should preferably be used instead. If the copper intra-uterine device is undesirable or inappropriate, the dose of levonorgestrel should be increased to a total of 3 mg taken as a single dose; pregnancy should be excluded

following use, and medical advice sought if pregnancy occurs.

- ▶ There is no need to increase the dose for emergency contraception if the patient is taking antibacterials that are not enzyme inducers.
- ▶ With the progestogen-only intra-uterine device, levonorgestrel is released close to the site of the main contraceptive action (on cervical mucus and endometrium) and therefore progestogenic side-effects and interactions are less likely; in particular, enzyme-inducing drugs are unlikely to significantly reduce the contraceptive effect of the progestogen-only intra-uterine system and additional contraceptive precautions are not required.

### JAYDESS® 13.5MG INTRA-UTERINE DEVICE

#### Contraception

##### ▶ BY INTRA-UTERINE ADMINISTRATION

- ▶ Females of childbearing potential: Insert into uterine cavity within 7 days of onset of menstruation, or any time if replacement (additional precautions (e.g. barrier methods) advised for at least 7 days before), or any time if reasonably certain woman is not pregnant and there is no risk of conception (additional precautions (e.g. barrier methods) necessary for next 7 days), or immediately following termination of pregnancy below 24 weeks' gestation; postpartum insertions should be delayed until at least 4 weeks after delivery; effective for 3 years

### KYLEENA® 19.5MG INTRA-UTERINE DEVICE

#### Contraception

##### ▶ BY INTRA-UTERINE ADMINISTRATION

- ▶ Females of childbearing potential: Insert into uterine cavity within 7 days of onset of menstruation, or any time if replacement (additional precautions (e.g. barrier methods) advised for at least 7 days before), or any time if reasonably certain woman is not pregnant and there is no risk of conception (additional precautions (e.g. barrier methods) necessary for next 7 days), or immediately following termination of pregnancy below 24 weeks' gestation; postpartum insertions should be delayed until at least 4 weeks after delivery; effective for 5 years

### LEVOSERT® 20MICROGRAMS/24HOURS INTRA-UTERINE DEVICE

#### Contraception | Menorrhagia

##### ▶ BY INTRA-UTERINE ADMINISTRATION

- ▶ Females of childbearing potential: Insert into uterine cavity within 7 days of onset of menstruation, or any time if replacement (additional precautions (e.g. barrier methods) advised for at least 7 days before), or any time if reasonably certain woman is not pregnant and there is no risk of conception (additional precautions (e.g. barrier methods) necessary for next 7 days), or immediately following termination of pregnancy below 24 weeks' gestation; postpartum insertions should be delayed until at least 4 weeks after delivery; effective for 4 years

### MIRENA® 20MICROGRAMS/24HOURS INTRA-UTERINE DEVICE

#### Contraception | Menorrhagia

##### ▶ BY INTRA-UTERINE ADMINISTRATION

- ▶ Females of childbearing potential: Insert into uterine cavity within 7 days of onset of menstruation, or any time if replacement (additional precautions (e.g. barrier methods) advised for at least 7 days before), or any time if reasonably certain woman is not pregnant and there is no risk of conception (additional precautions (e.g. barrier methods) necessary for next 7 days), or immediately following termination of pregnancy below 24 weeks' gestation; continued →