Berne, November 2015

Combined hormonal contraceptives (CHC)[1]: The referral procedure for all CHCs is concluded. The product information is harmonised, particularly concerning warnings and precautions on the risk of venous and arterial thromboembolism (VTE/ATE)

The referral procedure for all combined hormonal contraceptives is concluded. Swissmedic initiated this procedure when the EU completed its re-evaluation of the benefits and risks of these preparations in January 2014.

Swissmedic co-ordinates the information on the above-mentioned issue in order to simplify the process, since the important notice concerns several authorisation holders: Actavis Switzerland AG, Bayer (Switzerland) AG, Berlis AG, Dermapharm AG, Effik SA, Gedeon Richter (Switzerland) AG, Janssen-Cilag AG, Labatec Pharma SA, Mepha Pharma AG, MSD Merck Sharp & Dohme AG, Pfizer AG, Pro Farma AG, Sandoz Pharmaceuticals AG, Spirig HealthCare AG.

Summary

- **The product information (information for healthcare professionals and for patients) for all CHCs authorised in Switzerland was updated, harmonised and made more comprehensible concerning warnings and precautions on the VTE and ATE risk.**
- **The existing assessments of the VTE/ATE risk remain unchanged:**
  - **While the use of a CHC increases the VTE risk compared to non-use, this risk is lower than that during pregnancy and puerperium.**
  - **The absolute VTE risk is small for all low-dose CHCs (< 50 µg ethinylestradiol).**
  - **Currently available data indicate that those CHCs containing the progestogens levonorgestrel, norgestimate or norethisterone are associated with the lowest VTE-risk (see table below).**
  - **There is no evidence for differences between the low-dose CHCs in their risk of ATE.**
- **When deciding to prescribe a CHC, careful consideration should be given to the individual woman's current risk factors, particularly those for VTE, and the difference in risk of VTE between the products.**
- **Since risk factors for VTE can change over time they should be reassessed at regular intervals.**
- **The VTE risk is at its highest during the first year of use or if the use of a CHC is resumed after a break of at least 4 weeks.**
- **There is no need to discontinue or change the selected CHC if it has been well tolerated to date and if no new risk factors for VTE have emerged over time.**
- **Concerning the selection and use of a CHC, the prescribing doctor should inform the user comprehensively and in a transparent manner about the risks, the precautions and the action to take in the event of problems. In this context, Swissmedic strongly recommends using the information material issued by the Swiss Society of Gynaecology and Obstetrics (SGGG).**
- **It is also important to raise awareness of the symptoms of VTE and. The women should be informed of the signs and symptoms and instructed in the procedure to follow if a VTE or ATE is suspected.**
- **In connection with the review procedure, the product information for all CHCs authorised in Switzerland has also been updated and harmonised in respect of other safety-related findings (particularly concerning other precautions and interactions) and CHC properties.**

[1] An overview of the CHCs authorised in Switzerland, as well as all hormonal contraceptives can be found on the Swissmedic website: www.swissmedic.ch > Market surveillance > Human medicines > Specific topics > Hormonal contraceptives and thromboembolism

Background information

With this referral procedure Swissmedic has taken another step forward in raising awareness among users of combined hormonal contraceptives (CHCs) and healthcare professionals about the risk of these preparations, so that they are able to make an "informed decision" when selecting the most suitable method of contraception.

Swissmedic relied on the results and recommendations from the benefit-risk analysis concluded by the European Medicines Agency (EMA) in January 2014. Swissmedic's evaluation of the risk of VTE and ATE conforms to that of the EU, as do the measures taken to date. When correctly indicated, and provided the contraindications, precautions and individual risk factors are respected, the risk-benefit ratio of these preparations remains positive.

The updated and harmonised product information is based on the current epidemiological data on the estimated VTE risk (Table 1):

Table 1: Estimated VTE risk for CHCs

Progestogen*	Relative VTE risk compared to levonorgestrel	Estimated VTE incidence (per 10,000 women during a year of use)
Non-pregnant non-users	-	2
Levonorgestrel	Reference	5-7
Norgestimate/norethisterone	1.0	5-7
Gestodene/desogestrel/drospirenone	1.5-2.0	9-12
Etonogestrel/norelgestromin	1.0-2.0	6-12
Chlormadinone acetate/dienogest/nomegestrol acetate	Insufficient data**	Insufficient data**

* Most of the progestogens are combined with ethinylestradiol; the exceptions are the two listed at the bottom of the table: dienogest is also available in combination with estradiol valerate, while nomegestrol acetate is only available in combination with estradiol hemihydrate.

** There are currently insufficient data to allow a definitive evaluation about the VTE risk compared to CHCs containing levonorgestrel. Further studies are ongoing or planned.

Further information on this issue:

www.swissmedic.ch > Market surveillance > Human medicines > Specific topics > Hormonal contraceptives and thromboembolism.

Measures and instructions/recommendations for healthcare professionals

The current product information for the CHCs will be continuously published on the Swissmedic website at www.swissmedicinfo.ch by 31 December 2015 at the latest.

The information material issued by SGGG can be found on its website and also on the Swissmedic website (www.swissmedic.ch > Market surveillance > Human medicines > Specific topics > Hormonal contraceptives and thromboembolism).

Reporting adverse reactions

For reports of adverse drug reactions (ADRs) Swissmedic recommends the use of the reporting portal developed for this purpose. ADRs can be recorded directly using the Electronic Vigilance System (EIViS). However, it is also still possible to use the corresponding report form and send it to the regional Pharmacovigilance Centre. This form can be found on the Swissmedic website or can be ordered directly from Swissmedic (tel. 058 462 02 23). (All the necessary information can be found at www.swissmedic.ch > Market surveillance > Pharmacovigilance).