

FSRH CEU Statement: Contraception for women using known teratogenic drugs or drugs with potential teratogenic effects

14 February 2018

This statement provides guidance on contraceptive options for women taking (or whose male partners are taking) known teratogenic drugs or drugs with potential teratogenic effects.

FSRH guidance¹ advises that women of reproductive age who are taking known teratogenic drugs or drugs with potential teratogenic effects should always be advised to use highly effective contraception both during treatment and for the recommended timeframe after discontinuation to avoid unintended pregnancy.

Detailed information regarding teratogenic drugs or drugs with potential teratogenic effects is available from the UK teratogenic information service (UKTIS) website (www.uktis.org).²

Advice given in the Summaries of Product Characteristics (SPC)³ regarding the use of contraception is not consistent for different teratogenic drugs. In some instances, “effective contraception” is recommended. In others, use of “two methods of effective contraception” is advised. Sometimes no advice is given. It is unclear which methods of contraception are considered ‘effective’ or why use of more than one method is sometimes advised.

To support clinicians in providing high quality and consistent contraceptive advice, **the FSRH CEU makes the following recommendations for women using (or whose partners are using) known teratogenic drugs or drugs with potential teratogenic effects :-**

- ▶ Women should be made aware that no method of contraception is 100% effective.
- ▶ Methods of contraception which are considered ‘highly effective’ in this context include the long-acting reversible contraceptives (LARC) copper intrauterine device (Cu-IUD), levonorgestrel intrauterine system (LNG-IUS) and progestogen-only implant (IMP) and male and female sterilisation, all of which have a failure rate of less than 1% with typical use. **(Note that women using IMP must not take any interacting drugs that could reduce contraceptive effectiveness).**
- ▶ Additional contraceptive precautions (e.g. condoms or a second effective contraceptive method) are not required if a Cu-IUD, LNG-IUS, IMP or male or female sterilisation is being used. However, a woman may choose to use condoms in addition to reduce risk of unintended pregnancy even further and for protection against sexually transmitted infections.

- ▶ The typical use failure rate of combined hormonal contraception (CHC) and the progestogen-only pill (POP) is 9%; for progestogen-only injectables including depot medroxyprogesterone acetate (DMPA) it is 6%. Given the importance of avoiding pregnancy during use of known teratogenic drugs or drugs with potential teratogenic effects, the CEU recommends that in this situation women using CHC, POP or DMPA should be advised to use additional contraceptive precautions (e.g. condoms). **(Note that women using CHC or POP must not take any interacting drugs that could reduce contraceptive effectiveness).**
- ▶ Use of barrier methods, withdrawal and fertility awareness methods alone is not recommended.

References

1. Faculty of Sexual and Reproductive Healthcare. FSRH Guidance Drug interactions with Hormonal Contraception. November 2017. <https://www.fsrh.org/standards-and-guidance/current-clinical-guidance/drug-interactions/> [accessed 14/02/2018]
2. UK teratogenic information service. http://www.uktis.org/html/uktis_summaries.html [accessed 14/02/2018]
3. eMC. Summary of Product Characteristics. <https://www.medicines.org.uk/emc/> [accessed 14/02/2018]

The Clinical Effectiveness Unit (CEU) was formed to support the Clinical Effectiveness Committee of the Faculty of Sexual and Reproductive Healthcare (FSRH), the largest UK professional membership organisation working at the heart of sexual and reproductive healthcare. The FSRH CEU promotes evidence based clinical practice and it is fully funded by the FSRH through membership fees. It is based in Edinburgh and it provides a member's enquiry service, evidence based guidance, new SRH product reviews and clinical audit/research. [Find out more here.](#)