# Combined Oral Contraceptive for Heavy Menstrual Bleeding Available on Formulary—Effective Immediately

**What:** A combined oral contraceptive (COC) with guideline recommended hormones is available on Legacy hospital formulary. At this time, the brand **Elinest is stocked** (monophasic norgestrel/ethinyl estradiol 0.3 mg/30 mcg). Other COCs are not on formulary. For contraception, patient's own medication, with their specific product, may continue to be utilized, per policy and procedure.

IV conjugated estrogen (Premarin) remains available on formulary. However, this medication is impacted by drug shortages, requires IV access, and is more expensive.

**Why:** American College of Obstetricians and Gynecologists (ACOG) Guidelines from 2019 recommend tapered COC therapy as a treatment option for the management of heavy menstrual bleeding in adolescent patients without a contraindication to estrogen, who are admitted to the hospital. Prior ACOG guidelines also recommend COCs as a treatment option for broader non-pregnant reproductive-aged women with heavy menstrual bleeding.

This update is as a result of the formulary class review process.

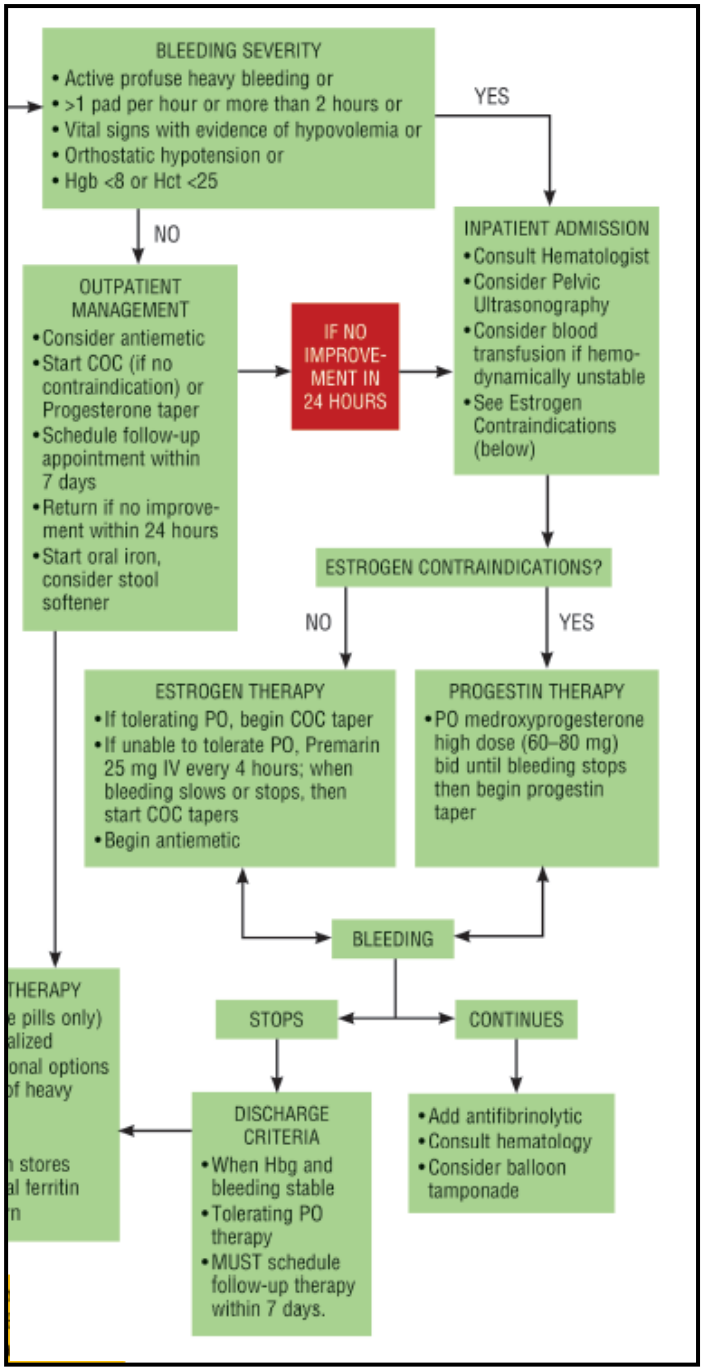
**Key Practice points—See algorithms and recommendations from ACOG Guidelines**

**COC TAPER**
- Use monophasic 30–50 micrograms EE with norgestrel or levonorgestrel
- Start monophasic 30–50 mg EE containing COC every 6–8 hours and taper as tolerated to maintain control of bleeding
- Skip placebo pills and start next packet active pills

**ESTROGEN CONTRAINDICATION EXAMPLES**
- Migraine with aura
- Hypertension
- Prior DVT/PE
- Transplant
- Congenital cardiac anomalies
- Increased risk for blood clots

LEGACY HEALTH

**2019 ACOG Guidelines—Adolescents**




**2013 ACOG Guidelines— Non-Pregnant Reproductive-Aged Women**