

Ethinylestradiol 30mcg plus drospirenone 3mg (Yasmin or Lucette) Combined Oral Contraceptive

Recommendation

Ethinylestradiol 30mcg plus drospirenone 3mg is available as the following two branded products; Yasmin[®] or Lucette[®]

It is less cost effective than other Combined Oral Contraceptives (COCs).

It is not licensed for acne.

If prescribed, Lucette is a more cost effective brand than Yasmin

Once control has been achieved, an alternative gestodene containing COC may be an option.

Evidence for combined oral contraceptives for use in acne

There is evidence from placebo-controlled trials that COCs are effective in the treatment of women with acne. Only Dianette is licensed for acne but should only be used after topical therapy or systemic antibiotic treatments have failed.

A Cochrane review has found that there is no evidence from good-quality comparative trials to demonstrate that any one particular combined oral contraceptive (COC) is superior to another.

Yasmin[®] (ethinylestradiol 30mcg plus drospirenone 3mg) is not licensed for the treatment of acne but has been used by local consultants where other COCs have been used and found ineffective. Lucette is a cost effective equivalent product. Local opinion also notes a trial swap to gestodene based COC may be an option once control has been achieved.

The Scottish Medicines Consortium does not recommend Yasmin[®] for use within NHS Scotland because no evidence was found that Yasmin[®] is superior to other standard strength COCs with respect to acne, premenstrual symptoms, or well-being, and it is substantially more expensive than alternative products.

This concurs with two other evidence-based reviews one in the Drug and Therapeutics Bulletin and another in MeReC Bulletin.

Risk of venous thromboembolism with Combined Oral Contraceptives

Evidence shows that combined oral contraceptive containing drospirenone, such as Yasmin[®], have a 1.5–2 times statistically significant increase a risk of venous thromboembolism compared

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with levonorgestrel-containing pills. This risk is similar to that of co-cyprindiol (Dianette®) and contraceptives that contain desogestrel or gestodene.

The NICE Clinical Knowledge Summary for acne vulgaris states:

“Treatment with a combined oral contraceptive (COC) should be considered for all women with acne who require contraception or in whom there is a suspected hormonal basis for the acne.

For most women, a 'standard' COC is suitable.

A monophasic preparation containing 30 micrograms of ethinylestradiol (standard strength) with norethisterone or levonorgestrel (first-line progestogens) is recommended.

Yasmin®, a COC containing the progestogen drospirenone, has been previously promoted for use in women with acne. However, it is not specifically licensed for this indication, and is not recommended for first-line treatment.”

References

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3. Faculty of Sexual and Reproductive Healthcare Clinical Effectiveness Unit. Clinical Guidance: Combined Hormonal Contraception. October 2011 (revised August 2012).
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5. Arowojolu AO, Gallo MF, Lopez LM, Grimes DA. Combined oral contraceptive pills for treatment of acne. Cochrane Database of Systematic Reviews 2012, Issue 7. Art. No.: CD004425. DOI: 10.1002/14651858.CD004425.pub6.
6. Parkin L, Sharples K, Hernandez RK, Jick SS. Risk of venous thromboembolism in users of oral contraceptives containing drospirenone or levonorgestrel: nested case-control study based on UK General Practice Research Database. BMJ 2011;340:d2139.
7. NICE Clinical Knowledge Summary for Acne Vulgaris last revised July 2013 (accessed 23 May 2014)
8. DTB (2002) Is Yasmin a "truly different" pill? Drug & Therapeutics Bulletin 40(8), 57-59
9. MeReC (2006) Contraception - current issues. MeReC Bulletin 17(2), 1-9

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