

UKMEC SUMMARY TABLE HORMONAL AND INTRAUTERINE CONTRACEPTION

Cu-IUD = Copper-bearing intrauterine device; LNG-IUS = Levonorgestrel-releasing intrauterine system; IMP = Progestogen-only implant; DMPA = Progestogen-only injectable: depot medroxyprogesterone acetate; POP = Progestogen-only pill; CHC = Combined hormonal contraception

CONDITION	Cu-IUD	LNG-IUS	IMP	DMPA	POP	CHC
	I = Initiation, C = Continuation					
PERSONAL CHARACTERISTICS AND REPRODUCTIVE HISTORY						
Pregnancy	NA	NA	NA	NA	NA	NA
Age	Menarche to <20=2, ≥20=1	Menarche to <20=2, ≥20=1	After menarche =1	Menarche to <18=2, 18-45=1, >45=2	After menarche =1	Menarche to <40=1, ≥40=2
Parity						
a) Nulliparous	1	1	1	1	1	1
b) Parous	1	1	1	1	1	1
Breastfeeding						
a) 0 to <6 weeks postpartum	See below		1	2	1	4
b) ≥6 weeks to <6 months (primarily breastfeeding)			1	1	1	2
c) ≥6 months postpartum			1	1	1	1
Postpartum (in non-breastfeeding women)						
a) 0 to <3 weeks						
(i) With other risk factors for VTE	See below		1	2	1	4
(ii) Without other risk factors			1	2	1	3
b) 3 to <6 weeks						
(i) With other risk factors for VTE	See below		1	2	1	3
(ii) Without other risk factors			1	1	1	2
c) ≥6 weeks			1	1	1	1

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Postpartum (in breastfeeding or non-breastfeeding women, including post-caesarean section)						
a) 0 to <48 hours	1	1	See above			
b) 48 hours to <4 weeks	3	3				
c) ≥4 weeks	1	1				
d) Postpartum sepsis	4	4				
Post-abortion						
a) First trimester	1	1	1	1	1	1
b) Second trimester	2	2	1	1	1	1
c) Post-abortion sepsis	4	4	1	1	1	1
Past ectopic pregnancy	1	1	1	1	1	1
History of pelvic surgery	1	1	1	1	1	1
Smoking						
a) Age <35 years	1	1	1	1	1	2
b) Age ≥35 years						
(i) <15 cigarettes/day	1	1	1	1	1	3
(ii) ≥15 cigarettes/day	1	1	1	1	1	4
(iii) Stopped smoking <1 year	1	1	1	1	1	3
(iv) Stopped smoking ≥1 year	1	1	1	1	1	2
Obesity						
a) BMI ≥30–34 kg/m ²	1	1	1	1	1	2
b) BMI ≥35 kg/m ²	1	1	1	1	1	3

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History of bariatric surgery									
a) With BMI <30 kg/m ²	1	1	1	1	1	1			
b) With BMI ≥30–34 kg/m ²	1	1	1	1	1	2			
c) With BMI ≥35 kg/m ²	1	1	1	1	1	3			
Organ transplant									
a) Complicated: graft failure (acute or chronic), rejection, cardiac allograft vasculopathy	I	C	I	C	2	2	2	3	
	3	2	3	2					
b) Uncomplicated	2	2	2	2	2	2	2		
CARDIOVASCULAR DISEASE (CVD)									
Multiple risk factors for CVD (such as smoking, diabetes, hypertension, obesity and dyslipidaemias)	1	2	2	3	2	3			
Hypertension									
a) Adequately controlled hypertension	1	1	1	2	1	3			
b) Consistently elevated BP levels (properly taken measurements)									
(i) Systolic >140–159 mmHg or diastolic >90–99 mmHg	1	1	1	1	1	3			
(ii) Systolic ≥160 mmHg or diastolic ≥100 mmHg	1	1	1	2	1	4			
c) Vascular disease	1	2	2	3	2	4			
History of high BP during pregnancy	1	1	1	1	1	2			
Current and history of ischaemic heart disease	1	I	C	I	C	3	I	C	4
		2	3	2	3		2	3	
Stroke (history of cerebrovascular accident, including TIA)	1	I	C	I	C	3	I	C	4
		2	3	2	3		2	3	
Known dyslipidaemias	1	2	2	2	2	2			

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Venous thromboembolism (VTE)						
a) History of VTE	1	2	2	2	2	4
b) Current VTE (on anticoagulants)	1	2	2	2	2	4
c) Family history of VTE						
(i) First-degree relative age <45 years	1	1	1	1	1	3
(ii) First-degree relative age ≥45 years	1	1	1	1	1	2
d) Major surgery						
(i) With prolonged immobilisation	1	2	2	2	2	4
(ii) Without prolonged immobilisation	1	1	1	1	1	2
e) Minor surgery without immobilisation	1	1	1	1	1	1
f) Immobility (unrelated to surgery) (e.g. wheelchair use, debilitating illness)	1	1	1	1	1	3
Superficial venous thrombosis						
a) Varicose veins	1	1	1	1	1	1
b) Superficial venous thrombosis	1	1	1	1	1	2
Known thrombogenic mutations (e.g. factor V Leiden, prothrombin mutation, protein S, protein C and antithrombin deficiencies)	1	2	2	2	2	4

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Valvular and congenital heart disease						
a) Uncomplicated	1	1	1	1	1	2
b) Complicated (e.g. pulmonary hypertension, history of subacute bacterial endocarditis)	2	2	1	1	1	4
Cardiomyopathy						
a) Normal cardiac function	1	1	1	1	1	2
b) Impaired cardiac function	2	2	2	2	2	4
Cardiac arrhythmias						
a) Atrial fibrillation	1	2	2	2	2	4
b) Known long QT syndrome	I	C	I	C	1	2
	3	1	3	1		
NEUROLOGICAL CONDITIONS						
Headaches						
a) Non-migrainous (mild or severe)	1	1	1	1	1	I
						C
b) Migraine without aura, at any age	1	2	2	2	2	I
						C
c) Migraine with aura, at any age	1	2	2	2	2	4
d) History (≥5 years ago) of migraine with aura, any age	1	2	2	2	2	3

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Idiopathic intracranial hypertension (IIH)	1	1	1	1	1	2
Epilepsy	1	1	1	1	1	1
Taking anti-epileptic drugs	<p>Certain anti-epileptic drugs have the potential to affect the bioavailability of steroid hormones in hormonal contraception.</p> <p>For up-to-date information on the potential drug interactions between hormonal contraception and anti-epileptic drugs, please refer to the online drug interaction checker available on the Medscape website (http://reference.medscape.com/drug-interactionchecker).</p>					
DEPRESSIVE DISORDERS						
Depressive disorders	1	1	1	1	1	1
BREAST AND REPRODUCTIVE TRACT CONDITIONS						
Vaginal bleeding patterns						
a) Irregular pattern without heavy bleeding	1	1	2	2	2	1
b) Heavy or prolonged bleeding (includes regular and irregular patterns)	2	I	C	2	2	1
		1	2			
Unexplained vaginal bleeding (suspicious for serious condition) before evaluation	I	C	I	C	3	2
	4	2	4	2		
Endometriosis	2	1	1	1	1	1
Benign ovarian tumours (including cysts)	1	1	1	1	1	1
Severe dysmenorrhoea	2	1	1	1	1	1
Gestational trophoblastic disease (GTD)						
a) Undetectable hCG levels	1	1	1	1	1	1
b) Decreasing hCG levels	3	3	1	1	1	1
c) Persistently elevated hCG levels or malignant disease	4	4	1	1	1	1

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Cervical ectropion	1	1	1	1	1	1		
Cervical intraepithelial neoplasia (CIN)	1	2	1	2	1	2		
Cervical cancer								
a) Awaiting treatment	I 4	C 2	I 4	C 2	2	2	1	2
b) Radical trachelectomy	3	3	2	2	1	2		
Breast conditions								
a) Undiagnosed mass/breast symptoms	1	2	2	2	2	I 3	C 2	
b) Benign breast conditions	1	1	1	1	1	1		
c) Family history of breast cancer	1	1	1	1	1	1		
d) Carriers of known gene mutations associated with breast cancer (e.g. BRCA1/BRCA2)	1	2	2	2	2	3		
e) Breast cancer								
(i) Current breast cancer	1	4	4	4	4	4		
(ii) Past breast cancer	1	3	3	3	3	3		
Endometrial cancer	I 4	C 2	I 4	C 2	1	1	1	1
Ovarian cancer	1	1	1	1	1	1		

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Uterine fibroids								
a) Without distortion of the uterine cavity	1		1		1	1	1	1
b) With distortion of the uterine cavity	3		3		1	1	1	1
Anatomical abnormalities								
a) Distorted uterine cavity	3		3					
b) Other abnormalities	2		2					
Pelvic inflammatory disease (PID)								
a) Past PID (assuming no current risk factor for STIs)	1		1		1	1	1	1
b) Current PID	I	C	I	C	1	1	1	1
	4	2	4	2				
Sexually transmitted infections (STIs)								
a) Chlamydial infection (current)	I	C	I	C				
(i) Symptomatic	4	2	4	2				
(ii) Asymptomatic	3	2	3	2	1	1	1	1
b) Purulent cervicitis or gonorrhoea (current)	4	2	4	2	1	1	1	1
c) Other current STIs (excluding HIV & hepatitis)	2		2		1	1	1	1
d) Vaginitis (including Trichomonas vaginalis and bacterial vaginosis) (current)	2		2		1	1	1	1
e) Increased risk for STIs	2		2		1	1	1	1

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HIV INFECTION						
HIV infection						
a) High risk of HIV infection	2	2	1	2	1	1
b) HIV infected						
(i) CD4 count ≥ 200 cells/mm ³	2	2	1	1	1	1
(ii) CD4 count < 200 cells/mm ³	I	C	I	C	1	1
	3	2	3	2		
c) Taking antiretroviral (ARV) drugs	<p>Certain ARV drugs have the potential to affect the bioavailability of steroid hormones in hormonal contraception.</p> <p>For up-to-date information on the potential drug interactions between hormonal contraception and ARV drugs, please refer to the online HIV drugs interaction checker (www.hiv-druginteractions.org/Interactions.aspx).</p>					
OTHER INFECTIONS						
Tuberculosis						
a) Non-pelvic	1	1	1	1	1	1
b) Pelvic	I	C	I	C	1	1
	4	3	4	3		
ENDOCRINE CONDITIONS						
Diabetes						
a) History of gestational disease	1	1	1	1	1	1
b) Non-vascular disease						
(i) Non-insulin dependent	1	2	2	2	2	2
(ii) Insulin dependent	1	2	2	2	2	2
c) Nephropathy/retinopathy/neuropathy	1	2	2	2	2	3
d) Other vascular disease	1	2	2	2	2	3

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Thyroid disorders							
a) Simple goitre	1	1	1	1	1	1	
b) Hyperthyroid	1	1	1	1	1	1	
c) Hypothyroid	1	1	1	1	1	1	
GASTROINTESTINAL CONDITIONS							
Gallbladder disease							
a) Symptomatic							
(i) Treated by cholecystectomy	1	2	2	2	2	2	
(ii) Medically treated	1	2	2	2	2	3	
(iii) Current	1	2	2	2	2	3	
b) Asymptomatic	1	2	2	2	2	2	
History of cholestasis							
a) Pregnancy related	1	1	1	1	1	2	
b) Past COC related	1	2	2	2	2	3	
Viral hepatitis							
a) Acute or flare	1	1	1	1	1	I	C
						3	2
b) Carrier	1	1	1	1	1	1	
c) Chronic	1	1	1	1	1	1	
Cirrhosis							
a) Mild (compensated without complications)	1	1	1	1	1	1	
b) Severe (decompensated)	1	3	3	3	3	4	

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Liver tumours						
a) Benign						
(i) Focal nodular hyperplasia	1	2	2	2	2	2
(ii) Hepatocellular adenoma	1	3	3	3	3	4
b) Malignant (hepatocellular carcinoma)	1	3	3	3	3	4
Inflammatory bowel disease (including Crohn's disease and ulcerative colitis)	1	1	1	1	2	2
ANAEMIAS						
Thalassaemia	2	1	1	1	1	1
Sickle cell disease	2	1	1	1	1	2
Iron deficiency anaemia	2	1	1	1	1	1
RHEUMATIC DISEASES						
Rheumatoid arthritis	1	2	2	2	2	2
Systemic lupus erythematosus (SLE)						
a) No antiphospholipid antibodies	1	2	2	2	2	2
b) Positive antiphospholipid antibodies	1	2	2	2	2	4
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DRUG INTERACTIONS						
Taking medication	See section on drug interactions with hormonal contraception.					

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