



The Contraceptive Skin Patch

What is the contraceptive patch?

The contraceptive patch (Ortho Evra™ transdermal system) is a weekly hormonal birth control method that received Food and Drug Administration approval in November 2001. The product is an adhesive patch, similar to a large Band Aid®, that a woman places onto her skin to prevent pregnancy. The patch contains hormones that are released through the skin and into the bloodstream.

How does it work?

The contraceptive patch works very much like oral contraceptive pills. It contains the same hormones (estrogen and progestin) found in commonly used birth control pills and releases these hormones at the same daily rate as the pill. Wearing the patch keeps a woman from ovulating, which means she does not release an egg that could be fertilized by a man's sperm. The patch also thickens a woman's cervical mucus, which makes it harder for sperm to enter the womb.

What does the patch look like?

The product is about 1¾ inches square—roughly the size of a matchbook. It is thin, smooth, and beige. The patch has three layers: (1) a protective outer layer; (2) a middle layer that contains the hormones and adhesive; and (3) a clear liner that the woman peels off to expose the sticky layer.

How effective is it?

When used correctly, the patch is 99% effective. It may be less effective in women weighing more than 198 pounds. The patch begins to work during the first cycle of use, although a woman should use an alternate birth control method (such as a condom) during the first week. This is not necessary if the woman begins using the patch within 24 hours of getting her menstrual period.

How is it used?

The patch is used on a weekly 28-day cycle, similar to birth control pills. Each box contains three patches. A patch is worn for a 7-day period, then removed and replaced with a new patch. Every new patch should be applied on the same day of the week. After using three patches in a row, no patch is worn during the fourth week. This "hormone-free" week allows a woman to get her menstrual period. After the patch-free week, the woman begins using a new box of patches. (For more detailed instructions, speak with your clinician and refer to the package insert.)

	Month						
1st Patch >	1	2	3	4	5	6	7
2nd Patch >	8	9	10	11	12	13	14
3rd Patch >	15	16	17	18	19	20	21
No Patch >	22	23	24	25	26	27	28

Each patch is worn for a 7-day period. After using three patches in a row, no patch is worn during the fourth week.

Wearing the Patch

The contraceptive patch can be worn on four places on your body.



Abdomen



Upper Outer Arm



Upper Torso
(front or back, but not your breasts)



Buttocks

Source: Ortho-McNeil Pharmaceutical, 2001

Where can a woman wear the patch?

The patch can be applied to four areas of the body (see Figure): (1) abdomen; (2) upper outer arm; (3) upper torso (front or back, but not on the breasts); and (4) buttocks. When replacing an old patch with a new one, the woman should not stick the new patch to the same place on the skin. This is to help prevent skin irritation or rash.

Will the patch fall off if I swim, bathe, or sweat?

Probably not. The adhesive is designed to stay put even when under water. In clinical studies, only a small number of patches (5%) became partially or fully detached. A woman should be careful not to apply creams or oils (such as suntan lotion) under or near the patch, as this can make it more likely to fall off.

What happens if a patch becomes loose or falls off?

First, the woman should try to reattach it. If the detached patch is no longer sticky, the woman should replace it with a new patch. This new patch should be worn until the next "patch change day," then replaced. If the patch was off the skin for more than 24 hours, however, the woman should begin a new cycle of patches and may need to use another form of contraception (such as a condom) for the first week of this new cycle. (For more detailed instructions, speak with your clinician and refer to the package insert.)

What are the side effects?

The side effects of the patch are similar to those for oral contraceptive pills. During the first cycle of use, about one in five women may experience spotting or breakthrough bleeding between menstrual periods. This effect decreases after the first several cycles. Other side effects reported by women in clinical studies included headache, nausea, application site reactions (rash or irritation), and breast discomfort.

How do I know if the patch is right for me?

The patch is an effective contraceptive that can be used safely by most women. The patch does not protect against sexually transmitted diseases (STDs) or the virus that causes acquired immunodeficiency syndrome (AIDS). Women at risk of STDs should also use a female condom or male latex condom to prevent disease. Your clinician can give you more information and help you decide if the patch is right for you

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