

CONTRACEPTIVE PATCH (Xulane)

(Based on Managing Contraception Pocket Guide 2019-2020)

Effectiveness: 99.7% with perfect use; 91.0% with typical use

Mechanism: The Xulane Patch delivers estrogen and progestin daily to prevent pregnancy.

Advantages/Benefits:

- Nothing to do daily, each patch lasts for 1 week. Attractive for women who forget to take pills
- Decreased blood loss and decreased anemia (decrease of red blood cells) may decrease menstrual (period) cramps/pain, and more predictable menses
- May bath, swim and do normal activities
- Due to less fear of pregnancy may have more sexual enjoyment; does not interrupt intercourse
- Your ability to become pregnant returns after you stop using the patch

Disadvantages/Risks:

- When using the first pack of patches, about 1/5 (20%) of patch users experienced breakthrough bleeding or spotting. This improved with time
- Use a backup method for 7 days when using first (initial) patch
- **Must** remove and replace weekly
- May experience skin irritation or allergic skin reaction at site of patch, some nausea, headaches and/or breast tenderness
- Women who weigh more than 198 pounds are not good candidates for the patch (decreased effectiveness)
- Application site problems include partial detachment or complete detachment. Also pigment changes have been noted under the site of patch application. Border of patch may become dirty, picking up lint, hairs or fabric.
- “Hormones from patches applied to the skin get into the blood stream and are removed from the body differently than hormones from birth control pills taken by mouth”. **You will be exposed to about 60% more estrogen if you use XULANE than if you use a typical birth control pill containing 35 micrograms of estrogen.** Women choosing the patch should be informed of **the possibility** of an increase in risk of adverse events, such as blood clots
- No protection against STD’s or HIV. (Use a condom if at risk)
- Do not use if breastfeeding

Xulane PATCH

(continued)

Instructions:

- Review this sheet carefully and report any questions or concerns to your health care provider
- The patch can be started anytime with backup for 7 days, if you are reasonably sure you are not pregnant. Each patch lasts for 7 days
- Apply a new patch once a week on the same day for 3 weeks in a row. During 4th week do not wear a patch and your period will occur. At end of that week start another cycle of patches
- Apply patches in different areas of the body each week in the cycle. Location of patch should not be altered in mid-week
- If the PATCH-FREE interval is more than 9 days (late restart), apply a new patch and use backup contraception for 7 days
- Smooth the edges down when you first put it on
- Should check the patch daily to make sure all edges remain closely adherent to skin
- Do not skip patches, even if periods are irregular
- Store at room temperature away from extreme heat, cold and moisture
- Apply to clean, dry skin and avoid irritated (red) skin and the breast area
- Only wear one patch at a time
- No band-aids, tattoos, or decals on top of patch as this might alter absorption of hormones
- If a patch comes off or is delayed in application for more than 48 hours, use a backup method or avoid sexual intercourse until a patch has been worn for 7 consecutive days and you may consider emergency contraception (if you had unprotected sex)
- When you remove a patch, fold it in half and place in waste can. Do not flush it
- Report the following problems:
 - Abdominal pain (severe)
 - Chest pain (severe), cough, shortness of breath or sharp pain when breathing in
 - Headache (severe), dizziness, weakness, or numbness, especially if one sided
 - Eye problems (vision loss or blurring), speech problems
 - Severe leg pain (calf or thigh)

Partial detachment is a very important problem because the contraceptive hormones are actually in the adhesive.