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Oral Contraceptives and Depression

Question

What is the percentage of depression in women taking *Ortho Tri-Cyclen*, and of oral contraceptives in general?



Response from Andrew M. Kaunitz, MD

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Mood disorders, including depression, are common in general, and particularly among women. Use of oral contraceptives (OCs) is also common among women. Although many trials of OC use report on mood complaints/depression as adverse events, few trials of OC use have included mood disorder/depression as a primary outcome, using a validated definition and assessing this outcome at baseline and during OC use.

In most women, use of progestin, with or without estrogen, is not accompanied by mood-related complaints. However, in some women, particularly those with a history of depression, premenstrual syndrome (PMS), or postpartum depression, use of progestins alone, or combined with estrogen, results in dysphoria substantial enough to result in medication discontinuation.

In a small, placebo-controlled, double-blind clinical trial performed in Manila and Edinburgh focusing on mood as a primary outcome, use of combined oral contraceptives was associated with "modest" negative effects on mood.^[1]

In a small, 6-cycle study of an OC containing 20 mcg estrogen and 100 mcg levonorgestrel (*Allesse, Levlite*), 1 of 32 women discontinued due to "intolerable mood changes."^[2]

In a large (N = 2894), 13-cycle study, 0.5% of participants randomized to an OC containing 25 mcg estrogen and triphasic norgestimate (*Ortho Tri-Cyclen Lo*) discontinued OC use due to emotional lability; the corresponding percentage with those randomized to 20 mcg estrogen combined with 1 mg norethindrone acetate (*Loestrin Fe 1/20*) was 0.3%.^[3]

Clinical Recommendations

Few women using OCs report depression or other negative mood symptoms. A history of depression, PMS, or postpartum depression does not represent a contraindication to use of OCs. Nonetheless, clinicians should be aware that in some women (many of whom have the high-risk history mentioned above) use of any progestin-based medication (including OCs) may cause unpleasant or even intolerable dysphoria. In this latter circumstance, it may be appropriate to discontinue or avoid OC use.

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