Do Not Use!

Oral Contraceptives Containing Desogestrel with Ethinyl Estradiol (DESOGEN, ORTHO-CEPT)

In the new edition of Worst Pills, Best Pills we listed the combination oral contraceptives containing desogestrel with ethinyl estradiol (DESOGEN, ORTHO-CEPT) among the 160 drugs that you should not use because there are safer and equally effective alternatives available.

The most popular oral contraceptives are combinations of the hor-
mones estrogen and progestin. Combination oral contraceptives are classified as either “second” or “third” generation pills based on their progestin component. In this country, DESOGEN and ORTHO-CEPT are the only available third-generation pills. Both contain 0.15 milligrams of the progestin desogestrel and 0.03 milligrams of the estrogen ethinyl estradiol. Second-generation contraceptives, in contrast, contain the progestins norgestrel, levonorgestrel or norethindrone.

DESOGEN and ORTHO-CEPT accounted for more than 7.6 million prescriptions filled in 1998 in the U.S.

A firestorm of controversy erupted in late 1995 and early 1996 when several observational studies were published showing that the risk of deep venous thrombosis (blood clots) is two times higher with third-generation oral contraceptives than with second-generation birth control pills.

A worldwide study conducted by the World Health Organization (WHO) published in late 1995 in the British medical journal The Lancet found that the third-generation pills containing desogestrel or gestodene (this progestin is not available in the U.S.) were associated with an increased risk of clotting. Shortly thereafter four more observational studies published in rapid succession again in The Lancet and the British Medical Journal, confirmed that the risk of life-threatening blood clots with the third-generation pills was two times greater than with the older second-generation contraceptives.

In October 1995, the United Kingdom’s equivalent of our Food and Drug Administration (FDA), the Committee on Safety of Medicines (CSM), warned the British public that third-generation pills could double the risk of blood clots compared to older second-generation oral contraceptives. British doctors were told that the third-generation products should not be routinely prescribed and that women should be offered the choice to switch to the older, safer second-generation pills. The CSM decided that the increased risk—estimated at 30 cases of blood clots for every 100,000 users of third-generation pills a year, compared with 15 cases for every 100,000 women on second-generation pills a year—was sufficient to warrant an urgent alert to women and prescribers.

Proponents of the third-generation pills, mainly their manufacturers, maintained that any increase in the...
The symptoms of a blood clot in the leg are swelling, tenderness and pain, but a blood clot may occur without symptoms. Breathlessness occurs with a blood clot in the lungs. These symptoms can also occur for other reasons.

If you are taking an oral contraceptive pill and you develop any of these symptoms you should see a doctor immediately. You should be particularly alert to these symptoms if you have a risk factor for blood clots.

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**Selegiline (ELDEPRYL)**
There have been several reports of hallucinations, mania, nightmares, behavioral disturbance, confusion, hypersexuality, and delusions with selegiline.

**Simvastatin (ZOCOR)**
There have been several case reports of anxiety, depression, obsession, and delusions with this and other cholesterol-lowering drugs in the “statin” family.

**Sulindac (CLINORIL)**
Depression, paranoia, and psychosis have been reported with sulindac. These adverse reactions are uncommon.

**Sumatriptan (IMITREX)**
Panic-like symptoms have been reported especially in people with a history of anxiety.

**Theophylline (SLO-BID, THEO-24, THEOLAIR)**
With high blood levels of theophylline withdrawal, mutism (not being able to speak), hyperactivity, anxiety, and mania have been reported.

**Thiabendazole (MINTEZOL)**
Occasionally psychosis has been seen with the use of this drug.

**Tizanidine (ZANAFLEX)**
Visual hallucinations or delusions have been reported in 3 percent of patients using tizanidine.

**Tranylcypromine (PARNATE)**
Mania or hypomania have been reported with this drug.

**Trazodone (DESYREL)**
There are several reports of delirium, hallucinations, paranoia, and mania with the use of trazodone.

**Triazolam (HALCION)**
Rage, hostility, paranoia, hallucinations, delirium, depression, nightmares, amnesia, and mania have been reported during treatment or when the drug is stopped. These adverse effects may be more common in older adults.

**Trihexyphenidyl (ARTANE)**
Trihexyphenidyl is a drug with anticholinergic effects. Anticholinergic drugs block the effects of acetylcholine, a substance produced by the body which is responsible for certain nervous system activities. Drugs with anticholinergic effects (including antidepressants, antihistamines, antipsychotics, and drugs for intestinal problems and Parkinson’s disease) inhibit secretion of stomach acid and slow the passage of food through the digestive system as well as inhibiting production of saliva, sweat, and bronchial secretions, and increase the heart rate and blood pressure. Adverse effects of these drugs include dry mouth, constipation, difficulty urinating, worsening of glaucoma, and blurred vision.

The major adverse psychiatric effects seen with these drugs are confusion, memory loss, disorientation, depersonalization, delirium, auditory and visual hallucinations, fear, paranoia, agitation, and bizarre behavior. Such effects are seen more frequently in older adults and children taking high doses. Sudden incoherent speech, delirium with high fever, hallucinations, and amnesia have been reported from eye drugs, particularly when they are mistaken for nose drops.

**Trimethoprim-Sulfamethoxazole (BACTRIM)**
There are several reports of delirium and psychosis with the use of this drug.

**Valproic Acid (DEPAKENE)**
Agitation, confusion, delirium, depression, psychosis, aggression, mania, serious charges in brain function, and nightmares have been seen with this and other drugs used to treat various types of seizure disorders.

**Verapamil (ISOPTIN)**
There have been several reports of depression with verapamil and other calcium channel blocking drugs.

**Vinblastine (VELBAN)**
Depression and anxiety may occur commonly with this drug.

**Vincristine (ONCOVIN)**
Hallucinations have been reported with the use of vincristine. This reaction appears to be related to the dose of the drug.

**Zolpidem (AMBIEN)**
Psychosis, hallucinations, and sensory distortions have been seen with the use of zolpidem. Women may be at a greater risk of these adverse effects, and higher doses may increase the risk.

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should not take a combination oral contraceptive product. You should tell your doctor if any of these risk factors apply to you. Your risk of having a blood clot can be increased temporarily, for example, by a long flight, being immobilized by injury or illness, or by having surgery.

**What You Can Do**

The risk of blood clots with combined oral contraceptives is small, but it is a real risk, and this risk is greater with the third-generation pills than with the second-generation oral contraceptives. There is no acceptable scientific evidence that a woman taking third-generation pills reduces her risk of heart attack over that of a woman using the second-generation products, and second- and third-generation pills are equally effective in preventing pregnancy. In summary, there is no reason why women should be using third-generation oral contraceptives when equally effective and safer oral contraceptives are available.