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Ethinylestradiol/ Chlormadinone Acetate A Viewpoint by Ulrich Winkler

Department of Obstetrics and Gynecology, Klinikum Wetzlar-Braunfels, Wetzlar, Germany

Ethinylestradiol/chlormadinone acetate (EE/CMA) 0.03/2 mg/day is a new monophasic oral contraceptive that combines the advantages of a low-dose EE preparation with high efficacy in the treatment of acne, seborrhoea, alopecia and hirsutism. Published data on exposure to EE/CMA in 22 337 cycles reveal good contraceptive efficacy, with an adjusted Pearl index of 0.27.

CMA was rapidly absorbed after oral administration, steady state was achieved after 8–15 days, and no accumulation of either EE or CMA was observed in women using EE/CMA for 6 months.

CMA has high affinity for the progesterone receptor, while exhibiting negligible binding to estrogen, androgen and mineralocorticoid receptors. The antiandrogenic effects of EE/CMA are attributed to competition of CMA with androgens in target tissues and a pronounced elevation of sex-hormone binding globulin plasma levels associated with increased binding of free plasma androgens.

Effects of EE/CMA on haemostasis, lipid metabolism and glucose tolerance were similar to those previously reported with other low-dose oral contraceptives. Post-marketing surveillance data suggest that the risk of deep vein thrombosis and pulmonary embolism with EE/CMA is comparable to or lower than that expected for this class of oral contraceptives.

EE/CMA exhibits good cycle control. Postmarketing surveillance studies suggest that EE/CMA substantially reduces irregular bleeding and dysmenorrhoea in >60% of women who experience these side effects while using other preparations. In postmarketing surveillance studies, demonstrated a very low withdrawal rate (<5%) due to irregular bleeding or other adverse effects.

Published data have shown that EE/CMA is an effective, well tolerated low-dose oral contraceptive particularly useful in women suffering from mild and moderate acne, seborrhoea and hirsutism. If evidence from postmarketing surveillance is confirmed, EE/CMA may be an excellent alternative in women suffering from common adverse effects, such as bleeding irregularities and dysmenorrhoea, while using other oral contraceptives.