

## Predictors of Unscheduled Spotting and Bleeding in Women using Oral Drospirenone 4.0 mg 24/4 for Contraception

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## DISCLOSURES

- David F. Archer MD:
- Consultations: AbbVie, Agile Therapeutics, Endoceutics, Exeltis, Radius Health, Shionogi, TherapeuticsMD
- Investigator: AbbVie, Bayer Healthcare, Endoceutics, Exeltis, Merck, Myovant, Radius, Shionogi, TherapeuticsMD
- Enrico Colli MD and Dominique Drouin are Exeltis Employees

## Estrogen Free Contraception

- Estrogen Free contraceptives are effective in preventing pregnancy when administered by mouth, injection, or subcutaneous implants
- Estrogen Free oral contraceptives are more acceptable due to increased VTE risk with combined (estrogen plus progestin) oral contraceptives
- Estrogen Free Contraceptives deliver continuous progestin
- Despite their efficacy and safety, tolerability can be improved as these methods are associated with unscheduled spotting and bleeding in 40% of cycles
- There is a new contraceptive option designed to provide the benefits of the estrogen free contraception with improved cycle control

Zigler RE. AJOG 2017;216:443; Archer DF. Contraception 2015;92:439

## Scheduled and Unscheduled Bleeding Spotting

- **Scheduled:** Bleeding or Spotting that began during the hormone free interval Days 25 -28±1
- **Bleeding up to 8 days after onset considered scheduled**
- **Unscheduled:** Bleeding or spotting that occurred during active hormone use Days 2 -23 except days considered Scheduled
- **Prolonged Bleeding:** More than 14 continuous days of bleeding or spotting

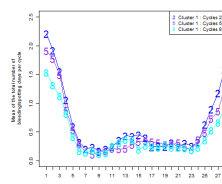
Archer DF. Contraception 2015;92:439

## Clusters and Associations

- Four Clusters identified based on Scheduled and Unscheduled spotting/bleeding
- Associations were sought within each cluster based on frequency of identified events. For example elevated systolic or diastolic blood pressure
- Associations are not Causes or Etiology of the spotting/bleeding. *They are clinical observations, and potential predictors of outcome.*

## Clusters and Associations

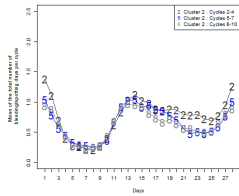
Cluster 1 89 Participants 14%



- Cluster 1: Scheduled withdrawal bleeding and minimal unscheduled bleeding
- Optimal Bleeding Pattern
- No associations found
- Consistent Bleeding pattern throughout study

### Clusters and Associations

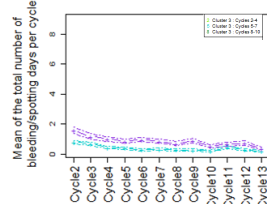
#### Cluster 2: 176 Participants 28%



- Cluster 2: Scheduled withdrawal bleeding and higher number of unscheduled bleeding days
- Acceptable Bleeding Pattern based on scheduled bleeding; unscheduled bleeding decreased during study
- Associations: Age <20 years, higher education, smokes 1 to 5 cigarettes per day
- Decreased systolic BP between baseline and month 4 visit
- Consistent Bleeding pattern throughout study

### Clusters and Associations

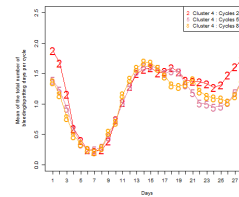
#### Cluster 3 283 Participants 45%



- Minimal Scheduled withdrawal bleeding and Unscheduled bleeding
- Most Acceptable Bleeding Pattern
- Associations: Higher BMI at baseline associated with higher rates of amenorrhea during the study
- Baseline SBP >130, DBP >85, High Cholesterol

### Clusters and Associations

#### Cluster 4 82 Participants 13%



- Cluster 4: Most Unfavorable Bleeding pattern
- Associations: Heavy Menstrual Bleeding before study, worse bleeding compared to prior COC, Low level of acceptability and high adverse event rate
- Subgroup n=8 prior hormone therapy and anti-bacterials, pulse >77, low lymphocytes
- Consistent Bleeding Pattern: Switch to COC after 2 to 3 cycles

87% of women had a favorable experience with DRSP 4mg 24/4® (clusters 1, 2, and 3)

Cluster	% of women	Mean number of days of bleeding/spotting by cycle
1	45	1.24 +/- 0.11
2	14	3.59 +/- 0.17
3	28	4.63 +/- 0.21
4	13	9.33 +/- 0.30

87%

### Conclusions

- Four distinct spotting/bleeding patterns (Clusters) were identified in cycles 2 to 13 of DRSP 24/4
- The unique Cluster pattern was apparent by cycle 2 and was maintained throughout the study.
- 87% of women using this new estrogen free contraceptive reported they were satisfied and found acceptable their cycle control
- The Cluster patterns and Associations are important counseling tools