



CHC and Covid

FSRH CEU has issued the above recommendations for women using combined hormonal contraceptive methods during the pandemic.(December 2020)

- 1- Individuals requesting CHC should be counselled about the risk of thromboembolism as usual.
- 2- All individuals requesting/taking CHC should be asked whether they currently suffer from COVID-19 infection, and if so How severe is the illness ?
 - 1- **asymptomatic** – can continue with CHC though offer switch to POP. Patient should made aware that the risk of Thromboembolism may last longer after stopping CHC.
 - 2- **symptomatic Covid-19 infection not requiring hospitalisation:** depending on the severity of the illness taking in consideration the duration of immobility, **discontinuation of CHC and initiation of a progestogen-only pill (POP) should be considered.** Where appropriate, emergency contraception should be discussed.
 - 3- **Individuals with severe Covid-19 infection requiring hospitalisation:** **Patients should discontinue CHC.** Where appropriate, emergency contraception should be discussed. An alternative effective contraceptive method such as a POP should, where appropriate, be initiated prior to discharge from hospital. (this applies to MAU and GPs)

After recovery, the individual may wish to continue POP or to consider an alternative contraceptive method that is not associated with increased risk of thromboembolism. Restarting CHC may be considered when the individual is no longer systemically unwell and has regained full mobility, bearing in mind that it is not known how long elevated thromboembolic risk associated with Covid-19 infection persists.