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PACKAGE LEAFLET: INFORMATION FOR THE USER

Desomono 75 microgram film-coated tablets

Desogestrel

Using Desomono: summary of key points

If this is your first time using Desomono, you must read all of this leaflet carefully before you start taking it.
If you have already used Desomono, you must check this medicine is still right for you.

Here are some **key points to consider** before taking Desomono:
- Desomono is a contraceptive pill for women who want to prevent pregnancy.
- **Take one tablet at the same time every day, without any break between packs**. Always read 'When and how to take the tablets" before starting Desomono.
- **If you forget to take Desomono:**
  - If you are **more than 12 hours late**, take the delayed pill straight away and take your further pills as usual. Desomono will still protect you from pregnancy.
  - If you are **more than 12 hours late**, take the most recently missed pill straight away and leave any earlier missed pills in the strip. Take your further pills as usual. Use extra contraception (e.g. condoms) for the next 7 days. Missing tablets at any time in the cycle can reduce the efficacy of Desomono and risk unwanted pregnancy. The more tablets are missed and the closer to the 7-day tablet-free period that is in the week before missing the tablet, the risk you may get pregnant is higher. Ask your pharmacist for advice.

For full details, **see the chart in section 3**, under *"If you forget to take Desomono"*.
- It is common for women taking Desomono to have bleeding patterns which are different from their usual periods, or to have no periods at all (see section 4, *"Changes you may notice"*).
  In some circumstances it may not be appropriate to take Desomono or it may be necessary to consult a doctor before taking Desomono (see section 2, *"Do not take Desomono"* and *"Warnings and precautions"*).
- Some medicines may reduce the efficacy of Desomono. Tell your pharmacist if you are taking, or may start taking, any other medicines (see section 2, *"Other medicines and Desomono"*).

Now read the rest of this leaflet. It includes other key points on the safe and effective use of this medicine that might be especially important for you.

This leaflet was last revised in June 2024.

Read all of this leaflet carefully before you start using this medicine because it contains important information for you.
- Keep this leaflet. You may need to read it again.
- Ask your pharmacist if you need more information or advice.
- You must contact a doctor if a side effect becomes serious, or if you notice any **unlisted** side effects not listed in section 4 of this leaflet.
- Talk to your doctor if you find Desomono doesn't suit you, or you're finding it difficult to take as instructed.

What is in this leaflet:
1. What Desomono is and what it is used for
2. What you need to know before you take Desomono
3. How to take Desomono
4. Possible side effects
5. How to store Desomono
6. Contents of the pack and other information

1. WHAT DESOMONO IS AND WHAT IT IS USED FOR

Desomono is a daily contraceptive tablet used to prevent pregnancy for women of childbearing age. It is an oral hormonal contraceptive tablet called "the pill". Desomono works primarily by preventing a woman's egg cell from ripening (prevents ovulation); it also has effects on cervical mucus which makes it more difficult for sperm to enter the uterus and on the endometrium (uterine lining) which may reduce the chance of implantation (fertilisation).
For this reason Desomono is called a progestogen-only pill (POP), or a **mini-pill**. Unlike the combined pill, Desomono does not contain an oestrogen hormone in addition to the progestogen.

Other methods of contraception are available with a prescription that might suit you better – see section 6 *"More about contraception and women's health screening"* at the end of this leaflet. Talk to your pharmacist, doctor or family planning nurse if you want more information.

Unlike the combined pill, Desomono can be used by women who cannot take oestrogens and by women who are breast-feeding.

If you think you are post-menopausal, talk to your doctor. You may not need to take contraceptives.

Hormonal contraceptives, including Desomono, do not protect you against HIV infection (AIDS) or any other sexually transmitted disease. Only condoms can protect you from sexually transmitted infections.

This product does not work as an emergency contraceptive. If it's taken every day it will protect against a pregnancy in the future.

2. WHAT YOU NEED TO KNOW BEFORE YOU TAKE DESOMONO

Do not take Desomono
- if you are **allergic** to desogestrel or any of the other ingredients of this medicine (listed in section 6).
- if you have a blood clot in a blood vessel (thrombosis or lung pulmonary embolism) see section *"Blood clots"* in section 2 *"Warnings and precautions"*.
  if you have or have had **jaundice** (yellowing of the skin or whites of the eyes) or **severe liver disease** and blood tests show your liver is not working properly.
  if you have or are suspected to have a **cancer** that is affected by sex hormones, such as certain types of breast cancer, ovarian cancer, endometrial (uterine) cancer.
  if you have any **unexplained vaginal bleeding** between your periods, or if you repeatedly have bleeding after sex.
  if you are pregnant or think you may be pregnant

Talk to your doctor or family planning nurse if any of these apply to you. Your doctor or family planning nurse may advise you to use a different method of birth control.

Warnings and Precautions
Talk to your doctor, pharmacist or family planning nurse before taking Desomono, if
- you have had cancer that is affected by progestogen hormones, such as certain types of breast cancer, ovarian cancer, endometrial (uterine) cancer.
- you have any other long-term health problems.
- you have had a blood clot in the legs (deep vein thrombosis) or lungs (pulmonary embolism).
  you suffer from epilepsy (see section 2 *"Other medicines and Desomono"*).
  you have diabetes (see section 2 *"Other medicines and Desomono"*).
  you have tuberculosis.
  you have high blood pressure.
  you have or have had chloasma (yellowish-brown pigmentation patches on the skin, particularly of the face)

If any of these apply to you, you may still be able to take Desomono but your doctor may want to see you from time to time.
It is common for women taking Desomono to have bleeding patterns that are different from their usual periods. Unusual bleeding patterns may reduce the efficacy of the pill and may mean that Desomono is less suitable for you. It may settle with time. A change in your bleeding pattern is not something you should normally be worried about if you are taking your pill as directed – see section 4 *"Changes to your periods"*.

Breast Cancer
Breast cancer is rare in women under 40 years old. The risk increases as women get older. See your doctor as soon as possible if you feel a lump in your breast, or if your breasts change.
The risk of breast cancer is slightly higher in women taking any contraceptive pill, as compared to women of the same age not on the pill. The risk with progestogen-only pills, such as Desomono, is thought to be similar to that in women on the combined pill. It may be lower, though more research is needed to be certain.

A woman's risk while on the combined pill is more affected by how old she is, rather than for how long she takes the pill.
- In every 10 000 women who take the PIR for up to 5 years but stop taking it by the age of 20, there would be 4 extra cases of breast cancer diagnosed up to 10 years after stopping, in addition to the 4 cases normally diagnosed in this age group.
- Likewise, in 10 000 women who take the PIR for up to 5 years but stop taking it by the age of 30, there would be 16 extra cases of breast cancer up to 10 years after stopping, in addition to the 16 cases normally diagnosed in the 5 years but stop taking it by the age of 40, there would be 26 extra cases in addition to the 160 cases normally diagnosed.

Compared to the risk of getting breast cancer ever in life, the increased risk associated with the combined pill is low. It may be that women on the combined pill were examined more often, so that the breast cancer was noticed earlier.

When women stop taking the pill, their risk of breast cancer gradually reduces so that, within 10 years of stopping, there risk is the same as for those who have never taken it.

Blood clots
Blood clots in major arteries and veins are rare but can cause serious health problems. The risk of a blood clot is higher in women on any type of contraceptive pill but no higher than the risk in pregnant women. The risk with progestogen-only pills, such as Desomono, is thought to be lower than in women on the combined pill, but this has yet to be confirmed.

A clot in the deep veins of the leg (called a *deep vein thrombosis*, or DVT) can cause the following symptoms, usually in the calf:
- swelling of the leg
- painful sensation in the leg
- severe pain in the leg

A clot in the leg can travel to the lungs and stop there (a *pulmonary embolism*), which can be fatal. Signs of a blood clot in the lungs include:
- chest pain
- breathlessness
- coughing up blood

Contact your doctor immediately if you notice any of the signs above. Do not take Desomono if you have a blood clot.

Rising immediate can increase your risk of a blood clot. Consult your doctor at least four weeks before planned surgery to see whether you should stop using Desomono during that time.

Pregnancy outside the womb (ectopic pregnancy)
Desomono is very effective at preventing pregnancy (less than 1) and so reduces the risk of pregnancy outside the womb. However, contact your doctor immediately if you have sudden or severe pain in the lower abdomen or stomach area with or without vaginal bleeding, even if you don't think you are pregnant.

Mental Health
Some women using hormonal contraceptives including Desomono have reported depression or depressed mood. Depression can be serious and sometimes it causes a change in mood and feelings. If you notice mood changes and depressive symptoms contact your doctor for further medical advice as soon as possible.

High blood pressure (hypertension)
If you develop high blood pressure during the use of Desomono, or if your blood pressure remains high despite treatment you have been given, contact your doctor to decide whether Desomono should be stopped.

Effect on bone mineral density
Because Desomono prevents ovulation, it reduces the overall level of estrogen hormone in the bloodstream. It is not known whether this reduction has any effect on bone density and risk of fracture in later life.

Children and adolescents
No clinical data on efficacy and safety are available in adolescents below 18 years.

Other medicines and Desomono
Tell your pharmacist, doctor or family planning nurse if you are taking any other medicines, have recently taken any, or might in the future. This includes medicines that you buy without a prescription, and herbal remedies.

If any pharmacist, doctor or family planning nurse prescribes you another medicine, tell them that you take Desomono. They can tell you if the other medicine is OK to take at the same time, and whether you need to use extra contraception (for example, condoms).

If you are using these medicines or herbal remedies listed below either **chronically** or for **long-term treatment**, you should **consult your doctor** as an alternative method of contraception may be more appropriate for you.

Substances which may lead to unexpected bleeding and/or contraceptive failure in women using Desomono

These include treatments for:
- epilepsy (e.g. primidone, phenytoin, barbiturates, carbamazepine, oxcarbazepine; felbamate, topiramate and rufinamide)
- tuberculosis (e.g. rifampicin, rifabutin)
- HIV infections (e.g. efavirenz)
- depressive moods (herbal remedy St. John's Wort)
- fungal infections (e.g. griseofulvin)
- pulmonary arterial hypertension: high blood pressure in the blood vessels of the lungs (bosentan)

All these medicines or herbal remedies can stop Desomono working properly.

If you are using any of these medicines or herbal remedies for **short-term** treatment, you can continue taking Desomono, but **you must also use extra contraception** (for example, condoms) every time you have sex during treatment and until 28 days after stopping the last dose of the other medicine or herbal remedy.

If you are using any of these medicines or herbal remedies either **chronically** or for a **long-term** treatment, you should **consult your doctor for further advice**.

Substances increasing the blood levels of Desomono
The effectiveness of Desomono may be reduced when used with
- fungal infections (e.g. ketoconazole, itraconazole, fluconazole)
- certain bacterial infections (e.g. clarithromycin, erythromycin)
- high blood pressure; angina or certain abnormal heart rhythm (e.g. diltiazem)

The leaflet for these medicines needs to be consulted to identify potential interactions and any recommendations. **Ask your pharmacist for advice.**

Substances with variable effects on the blood levels of Desomono
These include treatments for:
- HIV infections (e.g. ritonavir, nelfinavir, nevirapine)
- hepatitis C virus infection (e.g. boceprevir, telaprevir)

The leaflet for these medicines needs to be consulted to identify potential interactions and any recommendations. **Ask your pharmacist for advice. In case of doubt, you must use extra contraception (for example, condoms) during treatment with these medicines.**

Desomono may also interfere with how other medicines work, causing them to either have an increased effect (e.g. medicines containing ciclosporin) or a decreased effect.

For more advice, ask your pharmacist.

Taking emergency contraception containing ulipristal acetate
Using Desomono and emergency contraception containing ulipristal acetate together can alter the effect of both these medicines, resulting in reduced contraception effect and increased risk of pregnancy.

If you have used emergency contraception containing ulipristal acetate during your cycle, you must wait 5 days before starting Desomono. Your doctor may need to do a pregnancy test before you start taking Desomono if the medical conditions every time you have sex during the 5 days while you wait to start or resume taking Desomono and for the first 7 days of taking Desomono (ie, for a **total of 12 days**).

For more advice, ask your pharmacist, doctor or family planning nurse.

Pregnancy and breast-feeding

Pregnancy
Do not use Desomono if you are pregnant, or think you may be pregnant.

Take a pregnancy test or talk to your pharmacist, doctor or family planning nurse if your period is late after missing any pills in the last month, or if you think you may be pregnant. If you become pregnant, **stop taking Desomono and see your doctor.**

Signs that you may be pregnant include: a missed period, tender breasts, feeling sick, tiredness, and mood swings.

Breast-feeding
Desomono may be used while you are breast-feeding. Desomono does not appear to influence the production or the quality of breast milk. However, there have been infrequent reports of a decrease in breast milk production associated with combined hormonal pills. Little data is available on the transmission of Desomono to the milk of mothers of children breast-fed for 7 months whose mothers were using Desomono has been studied up to 2.5 years of age. No effects on the growth and development of the children were observed. If you are breast feeding and want to use Desomono, please contact your doctor.

If you want to get pregnant
If you stop taking if want to become pregnant, simply stop taking Desomono. Desomono will not delay your ability to get pregnant.

Driving and using machines
Desomono has no known effect on your ability to drive or use machines.

Desomono contains lactose
If you have been told by your doctor that you have an intolerance to some sugars, contact your doctor before taking this medicine.

Regular Check-ups
It is important that you continue to have regular smear tests (cervical screening) while taking Desomono.

If you are worried you may have got a Sexually Transmitted Infection (STI) including HIV (AIDS), go for a check-up at a Genito-Urinary Medicine (GUM) clinic, or a Sexual Health Clinic. Blood tests can be used to diagnose many STIs. You may not know for sure that you do not have an STI or to get tested. Only barrier methods such as condoms can protect you from sexually transmitted infections.

Contact your doctor:

Immediately
- if you have severe pain or swelling in either of your legs; unexplained pains in the chest, breathlessness, an unusual cough, or if you cough up blood (possibly a sign of a **blood clot**);
- if you have a sudden or severe pain in the lower abdomen or stomach area with or without vaginal bleeding, even if you don't think you are pregnant (possibly a sign of an **ectopic pregnancy**, a pregnancy outside the womb);
- if you have a sudden severe stomach ache or look jaundiced (you may notice yellowing of the skin and the whites of the eyes, or dark urine, possibly signs of **liver diseases**);

As soon as possible
- if you think a lump or see changes in your breast (possibly a sign of **breast cancer**);
- if you have unusually heavy **vaginal bleeding** or if you repeatedly have bleeding after sex
- if you think you are **pregnant**

If you are due to have surgery that will make you immobile, consult your doctor at least four weeks in advance.

3. HOW TO TAKE DESOMONO

Always take this medicine exactly as described in this leaflet or as your doctor, pharmacist or family planning nurse told you. Check with your doctor, pharmacist or family planning nurse if you are not sure.

When and how to take the tablets?

Desomono will not prevent pregnancy unless taken exactly as directed.
Take one tablet at the same time every day, without a break between packs.
Take the tablet orally.
Choose a convenient time of day. It is best to link this to something you already do at the same time every day. For example, when you wake up, or when you brush your teeth.
Don't skip your daily tablet. Take it every day, even when you bleed or have spotting (see Section 4, *"Possible side effects"*).

The Desomono pack contains 28 tablets. Each day corresponds with one tablet. On the back of the blister you will see the days of the week printed on the foil as well as arrows between each tablet. Every time you start a new pack of Desomono, take a tablet from the top row. Do not start with just any tablet. For example if you start on a Wednesday, you must take a tablet marked with a Wednesday. Continue taking one tablet from the next tablet in the row until the pack is empty, always following the direction indicated by the arrows. By looking at the back of your pack you can easily check if you have already taken your tablet on a particular day. When a pack is empty, you must start with a new pack of Desomono on the next day – without a **break** and without waiting for a bleed.

Starting your first pack of Desomono

When no hormonal contraceptive has been used in the past month.

If you are not using hormonal contraceptive use in the past month (for example, pill, vaginal ring, skin patch, injection, implant, hormone-containing coil (IUS)), wait for your period to begin.

- It is preferable to take your first tablet on day 1 of your period. When doing so, you do not need to use extra contraception
- If you start your first tablet on days 2–5 of your period, use extra contraception (for example, condoms) for the first 7 days of taking the tablets.

Changing from a combined pill
- if you have had your usual break from a combined pill, take the first Desomono tablet on the day after your break, or when you have taken all the inactive tablets of your other contraceptive. **If you follow these instructions, make sure you use extra contraception (for example, condoms) for the first 7 days of taking Desomono.**
- if you haven't had your usual break from a combined pill, start taking Desomono on the day after you take the last tablet from your present pill pack. Even if your other pill pack contains inactive tablets, you can start Desomono on the day after you take the last active tablet of your other contraceptive. If you follow these instructions, you do not need extra contraception.

Changing from a vaginal ring or skin patch
- if there has been a break between removal of the vaginal ring or skin patch (ie. you are not starting Desomono on the day of removal of the ring or patch), make sure you use extra contraception (for example condoms) for the first 7 days of taking Desomono.
- if you start taking Desomono on the day of removal of the vaginal ring or skin patch, you do not need extra contraception

When changing from another progestogen-only pill (mini-pill).
You may stop taking it any day and start taking Desomono right away. You need not take extra contraceptive precautions.

When changing from an injection, implant or hormone-containing coil (IUS)
When changing from an injection, start using Desomono on the same day the injection is due. You do not need extra contraception.
When changing from an implant or hormone-containing coil (IUS), start Desomono the same day the IUS or implant is removed. Your doctor will advise you when the IUS should be removed and whether you need any extra contraception.

Starting or resuming Desomono following emergency contraception
Ask your pharmacist for advice on how to start taking or resume taking Desomono following emergency contraception. If you are using emergency contraception, it is advisable to wait until day 1 of your next menstrual period before taking Desomono.

Emergency contraception containing **levonorgestrel** can be used with Desomono. If you have used emergency contraception containing levonorgestrel during your cycle, you can start or continue taking Desomono the same day, but you **must use additional contraception** (for example, condoms) every time you have sex for the next 7 days.

Using Desomono and emergency contraception containing **ulipristal acetate** together can alter the effect of both these medicines, resulting in reduced contraception effect and increased risk of pregnancy. If you have used emergency contraception containing ulipristal acetate during your cycle, you must wait 5 days after taking ulipristal acetate before taking Desomono and you **must also use additional contraception** (for example, condoms) every time you have sex during the 5 days while you wait to start or resume taking Desomono and for the first 7 days of taking Desomono (ie, for a **total of 12 days**).

After having a baby
You can start Desomono any day between day 1 and day 21 after the birth of your baby. If you start later, make sure you use additional contraceptive method (barrier method) for the first 7 days of tablet taking. If you have already had unprotected sex, take a pregnancy test or talk to your doctor before starting Desomono. Additional information for breast-feeding women can be found in "Pregnancy and Breast-feeding" in section 2. Your doctor can also advise you.

After a miscarriage or abortion
You can start Desomono immediately or within 5 days of a miscarriage or an abortion. You do not need extra contraception. If in doubt, your doctor or family planning nurse will advise you.

If you forget to take Desomono

When were you due to take this missed pill?

Less than 12 hours ago
- Take the delayed pill straight away.
- Take your further pills as usual. This may mean taking two tablets one day.
- Don't worry, your contraceptive protection should not be reduced.

More than 12 hours ago
- Take the most recently missed pill straight away. Leave any earlier missed pills in the strip.
- Take your further pills as usual. This may mean taking two tablets in one day.
- **Use extra contraception (e.g. condoms) for the next 7 days.**
- If you have missed one or more tablets, you may be at risk of taking Desomono and bad sex in the week before missing the tablets, the risk of getting pregnant is higher than at any other time in your cycle. Ask your pharmacist for advice and if you need to use emergency contraception.

If your period is late after missing any pills in the last month, or if you think you may be pregnant, take a pregnancy test. Stop taking Desomono and see your doctor if you become pregnant (see section 2 *"Pregnancy and breast-feeding"*).

If you vomit or have severe diarrhoea
If you vomit within 3-4 hours of taking Desomono, the pill should be considered 'missed' and the advice under section 3 *"If you forget to take Desomono"* followed. If you have severe or persistent vomiting or severe diarrhoea, Desomono may not have been completely absorbed and contraceptive effect may be reduced. You should use additional contraceptive precautions while you are sick and for the next 7 days after the illness and for the first 7 days of normal pill taking. If you are not sure what to do, ask your pharmacist for advice.

If you take more Desomono than you should
There have been no reports of serious harmful effects from taking too many Desomono tablets at one time. Symptoms that may occur are nausea, vomiting and, in young girls, slight vaginal bleeding. For more information ask your pharmacist, doctor or family planning nurse.

If you stop taking Desomono
You can stop taking Desomono whenever you want. From the day you stop you are no longer protected against pregnancy.

If you have any further questions on the use of this medicine, ask your pharmacist, doctor or family planning nurse.

4. POSSIBLE SIDE EFFECTS

Like all medicines, this medicine can cause side effects, although not everybody gets them.

Tell your pharmacist, doctor or family planning nurse if you notice any unwanted effect, especially if severe or persistent.

Serious side effects are rare

Severe allergic reactions
You may experience signs of a severe allergic reaction (hypersensitivity) including:
- swollen face, lips, tongue and/or throat
- difficulty swallowing or breathing

Get medical advice immediately if you get any of these.

Ectopic pregnancy (pregnancy outside the womb)
Family women taking Desomono have had an ectopic pregnancy, where the baby develops outside the womb. Symptoms might include:
- a sudden or severe pain in the lower abdomen or stomach area with or without vaginal bleeding

Contact a doctor immediately if you get these.

Blood clots
Hormonal contraceptive pills are at increased risk of blood clots – see 'Blood clots' in section 2 *"Warnings and precautions"*. Symptoms might include:
- swelling, redness or pain in the leg
- chest pain, breathlessness or coughing up blood

Contact your doctor immediately if you notice these.
Changes to your periods
You may notice significant changes in your periods while using Desomono. You do not need to take any action, just continue taking Desomono exactly as directed, even if you start to have these changes:
- irregular periods: your periods may be less or more frequent, shorter or longer, lighter or heavier than before starting Desomono
- spotting or bleeding when you are not having your period. This may be just slight staining which may not even require a pad, or heavier bleeding like a light period. You may need to use tampons or sanitary towels
- stop having periods while taking Desomono

Contact your doctor or family planning nurse if you start to have these changes:
- *your menstrual period* differs from that which would be expected with Desomono
- *your menstrual period* is more frequent than you find acceptable
- *your menstrual period* is very heavy
- you repeatedly have bleeding that is brought on by sex

Meanwhile, you must continue to take Desomono every day.

Common side effects
These may affect up to 1 in 10 women
- altered mood, depressed mood
- decreased sexual drive (libido)
- headache
- nausea
- acne
- breast pain
- irregular or no periods
- increased body weight

Uncommon side effects
These may affect up to 1 in 100 women
- infection of the vagina
- difficulties in wearing contact lenses
- vertigo
- hair loss
- painful periods
- ovarian cysts
- tiredness

Rare side effects
These may affect up to 1 in 1,000 women
- rash
- hives
- painful blue-red skin lumps (erythema nodosum)

As well as these side effects, you may notice breast secretion or leakage.

Reporting of side effects
If you get any side effects, talk to your doctor, pharmacist or Family Planning Nurse. This includes any possible side effects not listed in this leaflet. You can also report side effects via the national Yellow Card Scheme. Website: www.mhra.gov.uk/yellowcard or search for MHRA Yellow Card in the Google Play or Apple App Store. By reporting side effects you can help provide more information on the safety of this medicine.

5. HOW TO STORE DESOMONO

Keep this medicine out of the sight and reach of children.
Do not use this medicine after the expiry date which is stated on the carton label and blister foil after EXP. The expiry date refers to the last day of that month.
Do not store above 30°C.
Store in the original foil pouch to protect from moisture.
Do not throw away any medicines via wastewater or household waste. Ask your pharmacist how to throw away medicines you no longer use. These measures will help protect the environment.

6. CONTENTS OF THE PACK AND OTHER INFORMATION

What Desomono contains
The active substance is Desogestrel.
One film-coated tablet contains 75 microgram desogestrel.
The other ingredients are lactose monohydrate; maize starch; povidone; stearic acid; hypromellose; macrogol 400; titanium dioxide (E 171); lactose monohydrate (see section 2).

What Desomono looks like and the contents of the pack
Desomono 75 microgram film-coated tablets are round, white film-coated tablets without break-marks.
Each blister is enclosed in an aluminium foil pouch.
Each carton contains 1 or 3 blister packs.
Not all pack sizes may be available.

Marketing Authorisation Holder:
Cello Healthcare UK
9 St George's Yard, Castle Street, Farnham, Surrey, GU9 7LW, UK.

Manufacturer:
Pharbil Waltrop GmbH
Im Wörngen 25, D-45731 Waltrop, Germany.

This medicinal product is authorised in the Member States of the EEA under the following names:
UK: Desomono 75 microgram film-coated tablets

This leaflet was last revised in June 2024.

More about contraception and women's health screening

Regular contraception
There are many different types of contraception available, and you should be able to find the right method for you. The different contraception options are listed below from the most effective to the least effective. **You can ask your doctor or family planning nurse for advice.**

Male and female sterilisation	Permanent method
Progestogen-only implant	Long-lasting method (3 years)
Hormone-containing coil (IUS)	Long-lasting method (5 years)
Copper coil (IUD)	Long-lasting method (5 to 10 years)
Progestogen-only injectable	Long-lasting method (8 to 13 weeks)
Combined oral contraception (COC) pill; progestogen-only pill (POP); Transdermal patch (patch); vaginal ring	Daily method (pill) Weekly or monthly method
Male and female condoms	With every episode of sex
Female diaphragm	With every episode of sex
Natural family planning	Avoid sex during fertile time

Emergency contraception
Use emergency contraception after unprotected sex, or if your contraceptive method has failed (for example, a condom has split or you have missed a pill). Ask any pharmacist for advice.

Women's health screening
Smear tests (cervical screening) are offered by the NHS to women aged 25 to 64 to check the health of cells in the cervix. Breast screening is also offered to women aged 50 to 71 to detect early signs of breast cancer. For cervical screening and breast screening, contact your doctor. You can also contact your local breast screening unit.

Other sources of information
For further information on all methods of contraception, emergency contraception or screening, go to: https://www.nhs.uk/

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