

Canada: Comparison of Oral Contraceptives and Non-Oral Alternatives

Products ^{a,b}	Manufacturer	Estrogen	Progestin
LOW-DOSE MONOPHASIC PILLS			
Alesse ^{c,d} Alysena ^{c,d} Audrina ^{c,d} Aviane ^{c,d} Laylaa ^{c,d}	Pfizer Canada Apotex JAMP Pharma Teva Canada Lupin Pharma	EE 20 mcg	Levonorgestrel 0.1 mg
Min-Ovral ^c Ovima ^c Portia ^c	Pfizer Canada Apotex Teva Canada	EE 30 mcg	Levonorgestrel 0.15 mg
Apri ^c Freya ^c Marvelon ^c Miley ^c Mirvala ^c	Teva Canada Mylan Organon Canada Ambicare Pharma Apotex	EE 30 mcg	Desogestrel 0.15 mg
Yasmin ^{c,d} Zamine ^{c,d} Drospirenone/EE ^{c,d}	Bayer Apotex Glenmark	EE 30 mcg	Drospirenone 3 mg
Brevicon 0.5/35 ^c	Pfizer Canada	EE 35 mcg	Norethindrone 0.5 mg
Brevicon 1/35 ^c Select 1/35 ^c	Pfizer Canada Pfizer Canada	EE 35 mcg	Norethindrone 1 mg
BIPHASIC PILLS			
Synphasic ^c	Pfizer Canada	EE 35 mcg	Norethindrone 0.5 mg x 12 days, 1 mg x 9 days
TRIPHASIC PILLS			
Tri-Cira Lo ^c	Apotex	EE 25 mcg x 21 days	Norgestimate 0.18 mg x 7 days, 0.215 mg x 7 days, 0.25 mg x 7 days
Linessa ^c	Aspen Pharmacare Canada	EE 25 mcg x 21 days	Desogestrel 0.1 mg x 7 days, 0.125 mg x 7 days, 0.15 mg x 7 days
Triquilar ^c	Bayer	EE 30 mcg x 6 days, 40 mcg x 5 days, 30 mcg x 10 days	Levonorgestrel 0.05 mg x 6 days, 0.075 mg x 5 days, 0.125 mg x 10 days
Tri-Cira ^{c,d} Tri-Jordyna ^{c,d}	Apotex Glenmark Canada	EE 35 mcg x 21 days	Norgestimate 0.18 mg x 7 days, 0.215 mg x 7 days, 0.25 mg x 7 days

Products^{a,b}	Manufacturer	Estrogen	Progestin
EXTENDED-CYCLE PILLS			
LoLo ⁱ	AbbVie	EE 10 mcg x 26 days	Norethindrone acetate 1 mg x 24 days
Indayo Seasonale	Mylan Teva Canada	EE 30 mcg x 84 days	Levonorgestrel 0.15 mg x 84 days
Seasonique	Teva Canada	EE 30 mcg x 84 days, 10 mcg x 7 days	Levonorgestrel 0.15 mg x 84 days
Mya ^d Yaz ^d Yaz Plus ^{d,e} Drospirenone/EE ^d	Apotex Bayer Bayer Glenmark Canada	EE 20 mcg x 24 days	Drospirenone 3 mg x 24 days
Nextstellis ⁱ	Searchlight Pharma	Estetrol 15 mg x 24 days	Drospirenone 3 mg x 24 days
PROGESTIN-ONLY PILLS-“Mini-pill”			
Jencycla Maeve Movisse	Sandoz Canada Glenmark Mylan	None	Norethindrone 0.35 mg
Slynd	Duchesnay	None	Drospirenone 4 mg x 24 days
EMERGENCY CONTRACEPTION			
Ella	AbbVie	None	Ulipristal (progesterone receptor modulator) 30 mg tablet x 1
Backup Plan Onestep Contingency One MyStep Plan B	Apotex Mylan JAMP Pharma Paladin Labs	None	Levonorgestrel 1.5 mg tablet x 1
NON-ORAL ALTERNATIVES TO ORAL CONTRACEPTION			
Brand Name^b Dose/Route	Manufacturer	Estrogen	Progestin
Depo-Provera ¹ 150 mg/mL IM injection every three months	Pfizer Canada	None	Medroxyprogesterone acetate 150 mg
Evra ^{4,h} Transdermal patch applied weekly for three weeks, followed by a patch-free week (i.e., week four).	Searchlight Pharma	EE 35 mcg/day	Norelgestromin (active form of norgestimate) 200 mcg/day
Kyleena ⁵ (IUS)	Bayer	None	Levonorgestrel Average 9 mcg/day over 5 years. Must be removed after five years.

Brand Name ^b Dose/Route	Manufacturer	Estrogen	Progestin
NON-ORAL ALTERNATIVES TO ORAL CONTRACEPTION, continued			
Mirena ^{2,f} (IUS)	Bayer	None	Levonorgestrel Average 13 mcg/day over eight years (15 mcg/day over 5 years). Effective for contraception for eight years (effective for menorrhagia for 5 years).
Nexplanon ^{6,g} Implanted subdermally just under the skin at the inner side of the non-dominant arm.	Organon Canada	None	Etonogestrel (active form of desogestrel) After about 5 to 6 weeks: 60 to 70 mcg/day, then at the end of first year: ~35 to 45 mcg/day, at the end of second year: ~30 to 40 mcg/day, and at the end of third year: ~25 to 30 mcg/day. Must be removed after three years.
NuvaRing, ³ Haloette ⁸ Vaginal ring inserted and left in place for three weeks, followed by a ring-free week (i.e., week four). Repeat cycle with a new ring.	Organon Canada (NuvaRing) Searchlight Pharma (Haloette)	EE 15 mcg/day	Etonogestrel (active form of desogestrel) 120 mcg/day
Ringza ^{12,k} Vaginal ring inserted and left in place for three weeks, followed by a ring-free week (i.e., week four). Ring should be washed and reused for up to 13 cycles.	Duchesnay	EE 13 mcg/day	Segesterone acetate 150 mcg/day
Nova-T Flexi-T Liberte Mona Lisa SMB	Bayer Prosan 7-Med Industrie Searchlight Pharma SMB Medical Devices	Non-hormonal , copper IUDs. ^{11,j} Time to removal ranges from 2.5 to 10 years, depending on the product. Consult product labeling for specific timing.	

Abbreviations: EE = ethinyl estradiol; IM = intramuscular; IUD = intrauterine device; IUS = intrauterine system.

- a. Products are grouped together based on hormone content. This grouping is not an indication of therapeutic equivalence for purposes of substitution.

- b. For information on which hormonal contraceptive to use, see our chart, *Choosing a Contraceptive and Emergency Contraception*.
- c. Available in 21- and 28-day packs. 28-day packs have seven placebo pills.
- d. Health Canada-approved for contraception and acne.
- e. Yaz Plus contains levomefolate 451 mcg in each tablet of the 28-day regimen.
- f. Health Canada-approved for contraception and idiopathic menorrhagia.²
- g. Contraceptive effectiveness of Nexplanon has not been studied in patients who are overweight (i.e., >130% of ideal body weight). Etonogestrel serum concentrations are inversely related to body weight and decrease over time; therefore, removal and replacement before three years should be considered in females who are overweight, due to the potential for reduced efficacy.⁶
- h. Contraceptive efficacy may be reduced in females with a body weight ≥ 90 kg.⁴
- i. The safety and efficacy of Nextstellis and LoLo in patients with a BMI >35 kg/m² has not been studied.^{7,9} [Note that US product labeling states that Nextstellis may be less effective in patients with a body mass index (BMI) ≥ 30 kg/m², and that reduced efficacy may be associated (evidence is conflicting) with increasing BMI.]¹⁰
- j. Copper IUDs are also indicated as emergency contraceptives.¹¹
- k. Ringza has not been studied in patients with a BMI >29 kg/m².¹²

Users of this resource are cautioned to use their own professional judgment and consult any other necessary or appropriate sources prior to making clinical judgments based on the content of this document. Our editors have researched the information with input from experts, government agencies, and national organizations. Information and internet links in this article were current as of the date of publication.

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