





ADULT

MEDROXYPROGESTERONE

This document should be read in conjunction with this [DISCLAIMER](#)

<p>Presentation</p>	<p>Tablet: 5mg, 10mg, 100mg, 200mg Vial: 150mg/1mL</p> <p><u>Combination Products:</u> Tablet: 2.5mg with Conjugated Estrogen 625microg Tablet: 5mg with Conjugated Estrogen 625microg</p>
<p>Dose</p>	<p><u>Contraception</u> IM Injection: 150mg every 12 weeks</p> <p><u>Endometriosis</u> IM Injection: 150 mg every 12 weeks Oral: 10 mg 3 times daily</p> <p><u>Heavy Menstrual Bleeding (anovulatory)</u> Oral: 5–10 mg daily in 1 or 2 doses for 10–14 days during assumed second half of cycle</p> <p><u>Secondary Amenorrhoea</u> Oral: Without estrogen 2.5–10 mg once daily for 5–10 days during assumed second half of cycle Oral: With estrogen 5–10 mg once daily for 10 days.</p> <p><u>Management of Menopausal Symptoms:</u> Refer to Management of Menopausal Symptoms after Breast Cancer</p>

Administration	<p><u>Oral:</u> Take with or without food</p> <p><u>IM:</u> Deep intramuscular injection into the gluteal or deltoid muscle. Shake injection before use.</p>				
Pregnancy	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; padding: 5px;"> <p>IM and oral dose < 30mg: 1st Trimester: Considered safe to use 2nd Trimester: Considered safe to use 3rd Trimester: Considered safe to use</p> </td> <td style="width: 40%; padding: 5px; border: 2px solid black;"> <p>Inadvertent exposure to contraceptive doses is unlikely to cause harm to the developing fetus, but discontinuation of oral and high dose treatment is recommended as soon as pregnancy is detected.</p> </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> <p>Oral daily dose > 30mg: 1st Trimester: Contraindicated 2nd Trimester: Contraindicated 3rd Trimester: Contraindicated</p> </td> </tr> </table>	<p>IM and oral dose < 30mg: 1st Trimester: Considered safe to use 2nd Trimester: Considered safe to use 3rd Trimester: Considered safe to use</p>	<p>Inadvertent exposure to contraceptive doses is unlikely to cause harm to the developing fetus, but discontinuation of oral and high dose treatment is recommended as soon as pregnancy is detected.</p>	<p>Oral daily dose > 30mg: 1st Trimester: Contraindicated 2nd Trimester: Contraindicated 3rd Trimester: Contraindicated</p>	
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Breastfeeding	<p>Considered safe to use</p>				
Clinical guidelines and Policies	<p>Contraception: Post-Partum Depot Medroxyprogesterone Acetate (DMPA) SHQ Contraception Injection Information for Patients Management of Menopausal Symptoms after Breast Cancer</p>				
References	<p>Australian Medicines Handbook. Medroxyprogesterone. In: Australian Medicines Handbook [Internet]. Adelaide (South Australia): Australian Medicines Handbook; 2017 [cited 2017 July 14]. Available from: https://amhonline.amh.net.au/</p> <p>The Royal Women's Hospital. Medroxyprogesterone In: Pregnancy and Breastfeeding Medicines Guide [Internet]. Parkville (Victoria): The Royal Women's Hospital; 2016 [cited 2017 July 14]. Available from: https://thewomenspbmg.org.au/</p> <p>Society of Hospital Pharmacists of Australia. Medroxyprogesterone. In: Australian Injectable Drugs Handbook [Internet]. [St Leonards, New South Wales]: Health Communication Network; 2017 [cited 2018 Jan 16]. Available from: http://aidh.hcn.com.au</p>				

Keywords:	Medroxyprogesterone, Menopause, Contraception, Menstrual Disorder, HRT, Depo Ralovera, Depo Provera, DMPA		
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