



THE EFFICACY OF ORAL MICRONIZED PROGESTERONE VERSUS MEDROXYPROGESTERONE ACETATE IN THE CONTROL OF MILD TO MODERATE ABNORMAL UTERINE BLEEDING – OVULATORY DYSFUNCTION (AUB-O) IN ADOLESCENTS: AN OPEN LABEL RANDOMIZED CONTROLLED TRIAL

Angeline G. Santos, MD, Mary Carmona-Tan, MD, Ma. Socorro C. Bernardino, MD
Section of Pediatric and Adolescent Gynecology
Philippine Children's Medical Center



Introduction

Abnormal uterine bleeding is one of the most common reasons for consultation in adolescent gynecology; most caused by ovulatory dysfunction.

Current treatment is to give a combined oral contraceptive, or a progestogen in the form of Medroxyprogesterone Acetate (MPA). Both may have significant side effects. Oral micronized progesterone (OMP) has been introduced in the market.

The objective is to determine the efficacy of micronized oral progesterone (OMP) versus Medroxyprogesterone Acetate (MPA) in the control and regulation of mild to moderate abnormal uterine bleeding in adolescents with ovulatory dysfunction.

Methods

This was an Open Labelled Randomized Controlled Trial. Fifty patients were randomized to treatment with Medroxyprogesterone Acetate or Oral Micronized Progesterone.

Results

- There was no significant difference in the control of bleeding for patients with moderate abnormal bleeding.
- There was no significant difference in the regularity of cycles and length of bleeding.
- There was a difference in and amount of bleeding (1-4 pads versus 2-4 pads for MPA and OMP respectively), but both were within normal amount ($p=0.009$).
- The adverse effects (mostly dizziness) experienced for patients taking OMP was significant as compared to MPA ($p= 0.001$).

Conclusions

Oral Micronized Progesterone is just as effective as Medroxyprogesterone Acetate in the control and regulation of mild to moderate abnormal uterine bleeding in adolescents with ovulatory dysfunction. However, more patients experienced adverse effects with the dose of OMP used.

Recommendations

Recommendations include a larger sample size, a lower dose of OMP for adolescents at 100 mg, and a separate study on mild and moderate AUB.

Keywords

Abnormal Uterine Bleeding, Combined Oral Contraceptive Pills, Oral Micronized Progesterone, Medroxyprogesterone Acetate