

## Oral contraceptives – Active or placebo tablet?



A pharmacist recently alerted us to a risk of confusion between the week one active tablets and the week four placebo tablets of the oral contraceptive Tri-Estarylla (norgestimate and ethinyl estradiol), a therapeutic equivalent to Ortho Tri-Cyclen. A patient had been receiving Tri-Linyah, another therapeutic equivalent of Ortho Tri-Cyclen, from her previous pharmacy. However, her new pharmacy carried Tri-Estarylla. After receiving Tri-Estarylla for the first time, the patient called the pharmacy and asked why the placebo tablets in the calendar pack were green instead of white. When investigating the issue, the pharmacy found that Tri-Estarylla has different color tablets for weeks one and four than does Tri-Linyah (Table 1). This difference in color confused the patient, but thankfully she called the pharmacy before taking the wrong tablets at the wrong time of the month. The pharmacist was able to explain the differences between the products.

**Table 1. Tablet colors of Ortho Tri-Cyclen and selected therapeutic equivalent products.**

Brand name	Week 1 (active)*	Week 2 (active)†	Week 3 (active)‡	Week 4 (placebo)
Ortho Tri-Cyclen	White	Light blue	Blue	Green
Tri-Estarylla	White	Light blue	Blue	White
Tri-Linyah	Green	Light blue	Blue	Green
Tri-Mili	White	Light blue	Dark blue	White
Tri-Sprintec	Grey	Light blue	Blue	Light green
Tri-Previfem	White	Light blue	Blue	Dark green

\*Each tablet contains 0.18 mg norgestimate and 0.035 mg ethinyl estradiol

†Each tablet contains 0.215 mg norgestimate and 0.035 mg ethinyl estradiol

‡Each tablet contains 0.25 mg norgestimate and 0.035 mg ethinyl estradiol

As shown in **Table 1**, there are some inconsistencies in the colors used for week one and week four tablets among the selected products. This is of concern, especially for patients and pharmacists who switch products. Patients may inadvertently take the placebo tablets when they should be taking the week one active tablets and negatively impact the effectiveness of the oral contraceptive. This risk may be compounded if the labeling on the calendar pack is poor or difficult to read.

We recommend that therapeutic equivalent products of the original brand name oral contraceptive use the same or similar tablet colors for the same weeks of treatment for continuity and consistency. We urge the Food and Drug Administration and manufacturers to work together to accomplish this. Standardization not only can help patients use the product correctly but also help them identify if they have been dispensed a drug that is not a therapeutic equivalent. Be sure to alert patients to this issue, especially if they are switching products. ■

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