

# TIME

## Women Who Stand By Their NuvaRing

*Some are finding it difficult to dump a contraceptive that has been known in some cases to lead to death*

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There's the 24-year-old who stopped breathing, had two heart attacks, and died on life support. There's the mother whose two-year-old son watched her go into a seizure. And there's the college student who started spitting up blood while having lunch with her dad.

The accounts of women experiencing the negative side effects of the NuvaRing contraceptive are gruesome, and their stories are part of the evidence that led to the \$100 million settlement last week with NuvaRing maker Merck & Co. The pharmaceutical company agreed to hand over \$100 million for liability lawsuits claiming the ring caused blood clots that sometimes led to heart attacks and even death, although Merck denied fault. The women argued they were not adequately warned about these side effects, and about 3,800 of them are eligible to partake in the settlement.

Despite the well-publicized risks, some women are finding it difficult to ditch a contraceptive that has provided them with consistency and convenience. Oftentimes, finding the right birth control takes years of trial and error, and side effects range from weight gain to decreased libido. For this reason, when women find the right contraceptive, they tend to develop a certain loyalty to it.

Sarah, 26, a graduate student in New York City, struggled with finding the right birth control since she was 20 years old. During the year she was on the pill, she put on weight and was constantly having mood swings. She'd feel depressed one day and highly irritable the next. She switched to the NuvaRing five years ago after a friend suffering similar effects made the swap, and it has been smooth sailing ever since. "I hated the whole contraceptive experience, but with the NuvaRing I don't experience any of that," she says.

The NuvaRing ring is a flexible ring that women insert inside their vagina and remove for the week of their period. Like an oral contraceptive, it releases the hormones progestin and estrogen (though at lower levels), preventing ovulation and sperm from reaching the egg, but you don't have to remember to take a pill every morning. Women prefer it for its convenience, the localized hormones, and the fact that there's less accountability. In 2012, there were about 5.2 million prescriptions in the U.S. for the NuvaRing, according to IMS Health, a healthcare technology and information company.

According to the American College of Obstetricians and Gynecologists (ACOG)—the medical authority on all things related to baby-making—NuvaRing leads to a slight increased risk of deep vein thrombosis, heart attack, and stroke. And, as highlighted in a safety warning on NuvaRing's website, the danger is higher for some women, like those over 35 who smoke more than 15 cigarettes a day or women who have multiple risk factors for heart disease. Its typical use failure rate is 9%, the equivalent of an oral contraceptive, according to the CDC.

Following the settlement Friday, Merck issued a statement saying, "We stand behind the research that supported the approval of NuvaRing, and our continued work to monitor the safety of the medicine."

Though the side effects of the NuvaRing are very real, for many women it bears no complications. "I am extremely busy with very irregular hours and travel for my job," says Julie\*, 27, who works for a film production company in Los Angeles, California, "so the NuvaRing is the ideal fit for my lifestyle. I have virtually no side effects, so I plan to remain on it for the foreseeable future."

Other women simply shrug off the dangers. “Every drug you take comes with risks, from Aspirin to birth control to allergy medicine,” says Ricci Ellis, 31, a respiratory therapist in Little Rock, Arkansas, who switched from the pill after consistently forgetting to take it. “For me, the benefits of NuvaRing far outweigh the risks.” Because she’s not a smoker and leads an active and healthy lifestyle, Ellis considers herself relatively safe from the risks of blood clots, strokes, and sudden death.

“It is absolutely essential that people are aware of the risks associated with each method of contraception,” says Bill Albert, the chief program officer at The National Campaign to Prevent Teen and Unplanned Pregnancy. The American Heart Association (AHA) recently recommended that women considering birth control get screened for high blood pressure, which can put them at a greater risk for clots and stroke. “Equally important, however, is how such risks compare to those of other methods, and to pregnancy as well.”

According to Albert, the side effects need to be placed in a broader context so that they are neither dismissed nor viewed with disproportionate alarm. “One of the highest risk of blood clots comes with pregnancy. Consequently, if an individual is having sex and doesn’t want to get pregnant, skipping birth control altogether for fear of blood clots is not the best way to protect your health,” says Albert. “This is not meant to be cavalier, but the doubling of a rare risk is still rare.”

Medical experts are careful to not trivialize the risks, but Dr. Eve Espey, the chair of ACOG’s Committee on Health Care for Underserved Women and a professor in the Department of Ob-Gyn at the University of New Mexico’s School of Medicine, says the NuvaRing settlement hasn’t changed how she counsels her patients. “It’s always tragic and horrible when a woman has a bad outcome or dies from a blood clot. But to then label that method as dangerous often translates into more unintended pregnancies with a higher risk than using the method,” says Dr. Espey. Though popular for its convenience, the NuvaRing isn’t the most effective form of birth control out there. And neither is the pill. The intrauterine device (IUD) and the implant are considered the two safest and most effective forms of birth control available, with a typical use failure rate of 0.8% and 0.05% respectively.

When asked if women currently using NuvaRing should talk to their doctors about other options, Dr. Espey said, “How do you prepare for the event that’s so rare?”

But it’s making Sarah think twice. “I’m definitely concerned about the risks,” she says. “I am making an appointment with my gynecologist to discuss options.”

*\*Name has been changed for privacy.*