

Dr. E. Jackson, M.S. of Minister

Monash University

DEPARTMENT OF OBSTETRICS AND GYNAECOLOGY
THE QUEEN VICTORIA MEMORIAL HOSPITAL
MELBOURNE AUSTRALIA 3000

TELEPHONE : 66 6046

Professor Carl Wood (Ext. 317)

Associate Professor W. A. W. Walters (Ext. 420)

Associate Professor John F. Lenton (Ext. 467)

10th April, 1979.

Dr. Heather Manning,
Psychiatrist Superintendent,
Health Commission of Victoria,
Childrens Clinic,
Batman Avenue,
MELBOURNE. Vic. 3000

Dear Dr. Manning,

re: I.M. Depot Provera - your Ref: HM:pm.

Thank you for your letter enquiring about recent information on the use of Depot Provera for contraceptive purposes.

I have little to add to my earlier attitude on Depot Provera three years ago except to say that it is still a widely used method of contraception in all countries except Australia and the United States. A significant ruling regarding this treatment was received from the Federal Department of Health and I have enclosed a photocopy of this report. The last paragraph is significant from that Department in at least offering a positive attitude regarding the use of Depot Provera for contraception.

The Family Planning Associations throughout Australia are using this drug with increasing frequency and it is still used in selected cases in my own clinic at the Queen Victoria Hospital.

The medical literature concerning Depot Provera is relatively voluminous although no studies have yet been reported from this country. Certainly no untoward or serious side effects have been noted with its use and the side effects have been well documented on your consent form which I believe should be continued in its present form. I can locate overseas articles on the use of Depot Provera, largely from I.P.P.F. or W.H.O. sources, but again these reports are favourable to its use and the conclusions made are strongly supportive of its role in contraceptive services.

NB. The use of Pap smears is a vexed question and no agreement on routine cytology screening schedule is available. I agree that these tests should be done on sexually active girls even aged under 18 as the risk of cervical dysplasia and in situ carcinoma are becoming increasingly prevalent in this group. The Medical Advisory Committee of the Australian Federation of Family Planning Associations suggested last year that^a cytology smear be taken initially at the first visit and then repeated twelve months later. If both these tests were negative, then repeats could be carried out at three yearly intervals. This is only a suggestion but I would certainly say that cervical smears should be carried out on all women, irrespective of age, at two yearly intervals.

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Dr. Heather Manning

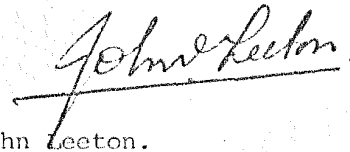
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11th April, 1979.

As for routine follow up with Depot Provera, I do not believe that this drug requires added surveillance as it is oestrogen-free and therefore has none of the stigmata of a combined pill i.e. thrombo-embolic or vascular problems. I would therefore suggest in this age-group of girls under 21 that a two-yearly examination be carried out including a Pap smear, vaginal examination, blood pressure check and routine check list for possible symptoms already outlined on the consent form.

I remain,

Yours sincerely,

John Leeton.