

## FROM THE JOURNALS

Chiaffariro E, Parazzini F, et al. **Use of oral contraception and uterine fibroids: results from a case controlled study.** *Br J Obstet Gynaecol* 1999; **106**: 857–860.

This is a study from Italy of 843 women with fibroids diagnosed during the previous 2 years, compared to 1557 controls admitted with non-gynaecological, non-hormonal and non-neoplastic conditions. The Odds Ratio (OR) for the following groups of oral contraception (OC) users versus never users was 1.1 for never users, 0.3 for current users, and 1.1 for ex-users. The risk of fibroids decreased with duration of OC use; the OR for ex-users who had been taking OCs for seven or more years was 0.5. The authors note that the presence of fibroids is often given as a contraindication to oral contraception in pill leaflets, but this is not supported by the present study.

Jobanputra J, Clack AR, et al. **A feasibility study of adolescent sex education: medical students as peer educators in Edinburgh schools.** *Br J Obstet Gynaecol* 1999; **106**: 887–891.

Three of the five co-authors of this paper were medical students. Sex education in schools by medical students was studied by means of a questionnaire in six secondary schools involving 20 teachers and 205 pupils. Some were interviewed. There was also a pilot scheme in one school where medical students, who had received suitable training, conducted sessions with one student to 6–8 pupils. Ninety-four percent of teachers and 93% of pupils were in favour of the scheme. The conclusions were that sex education would benefit from a smaller teacher: pupil ratio, that pupils talk more openly to those of a similar age, and that medical students could be a useful addition to school sex-education programmes.

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Forbes, Jarvis, Burney. **Do hormonal contraceptives influence asthma severity?** *Eur Resp J* 1999; **14**: 1028–1033

This retrospective study of 891 women aged 20–29 registered with 24 general

practices in South London, investigated self-reported asthma severity and hormonal contraceptive use. They used a previously validated asthma scale known as the 'Asthma Quality of Life Questionnaire', and a number of other indicators of asthma morbidity. Six percent of women believed that their asthma was changed by hormonal contraception (4% worse and 2% better). There were no significant differences at all between women who had taken the combined or progesterone-only pill, or between those taking second or third generation combined pill. This study is reassuring in that it found no significant relationship between hormonal contraception use and deterioration in asthma. It is just possible that women with severe asthma might behave differently and a prospective study looking at this sub-group might be justified.

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Ernst E. **Second thoughts about the safety of St John's wort (*Hypericum perforatum*).** *Lancet* 1999; **354**: 2014–2016.

A short communication from the *Lancet* points out that this phenomenally successful herbal antidepressant may be a potent enzyme inducer. Now that there are few doubts about its efficacy, it is likely that more women will use it, not realising that it may interfere with their contraceptive pill.

At least eight cases have been reported that suggest that hypericum extracts are potent inducers of hepatic enzymes, including three women taking a desogestrel combined pill. Other drugs involved have been cyclosporin, warfarin and digoxin.

These observations are supported by in vitro and clinical studies.

The clinical implications of this are that there may be poor cycle control and/or lowered contraceptive efficacy in women taking both the contraceptive pill and St John's wort.

Clinicians need to be aware of this. Alternative therapy is not always harmless.

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