### Conditions and Sub-conditions for Category 3 and 4

#### Pregnancy
- Less than 6 weeks postpartum: NA
- ≥ 6 weeks to < 6 months postpartum: NA
- ≥ 6 months postpartum: NA

#### Breastfeeding
- < 21 days: See i.
- ≥ 21 to 42 days with other risk factors for VTE*: See i.
- ≥ 42 days with other risk factors for VTE*: See i.

#### Postpartum timing of insertion
- ≥ 48 hours to less than 4 weeks: See i.
- Puerperal sepsis: See i.

#### Smoking
- Age ≥ 35 years, < 15 cigarettes/day: NA
- Age ≥ 35 years, ≥ 15 cigarettes/day: NA

#### Multiple risk factors for cardiovascular disease
- Hypertension
  - History of (where BP cannot be evaluated): NA
  - History of antihypertensive therapy: NA
  - BP is controlled and can be evaluated: NA
  - Elevated BP (systolic 140-159 or diastolic 90-99): NA
  - Elevated BP (systolic ≥ 160 or diastolic ≥ 100): NA
- Deep venous thrombosis (DVT) and pulmonary embolism (PE)
  - History of DVT/PE: NA
  - Acute DVT/PE: NA
  - DVT/PE, established on anticoagulant therapy: NA
  - Major surgery with prolonged immobilization: NA

#### Known thrombogenic mutations
- Ischemic heart disease (current or history of): I/C
- Stroke (history of): I/C

#### Complicated valvular heart disease
- Systemic lupus erythematosus
  - Positive or unknown antiphospholipid antibodies: I/C
  - Severe thrombocytopenia: I/C

#### Unexplained vaginal bleeding (prior to evaluation)
- Migraines without aura (age < 35 years): I
- Migraine without aura (age ≥ 35 years): C
- Migraines with aura (at any age): I C C C
- Gestational trophoblastic disease
  - Regressing or undetectable β-hCG levels: I
  - Persistently elevated β-hCG levels or malignant disease: I
- Cancers
  - Cervical (awaiting treatment): I C I C
  - Endometrial: I C I C
  - Ovarian: I C I C
- Breast disease
  - Current cancer: I C
  - Past w/ no evidence of current disease for 5 yrs: I C I C
- Uterine distortion (due to fibroids or anatomical abnormalities)
- STIs/PID
  - Current purulent cervicitis, chlamydia, gonorrhea: I C I C
  - Current pelvic inflammatory disease (PID): I C I C
  - Very high individual risk of exposure to STIs: I C I C
- Pelvic tuberculosis: I C I C
- Diabetes
  - Nephropathy/retinopathy/neuropathy: I C
  - Diabetes for > 20 years: I C
- Symptomatic gall bladder disease (current or medically treated)
- Cholestasis (history of related to oral contraceptives)
- Hepatitis (acute or flare): I C
- Cirrhosis (severe)
- Liver tumors (hepatocellular adenoma and malignant hepatoma)
- AIDS
  - No antiretroviral (ARV) therapy: See ii.
  - Not improved on ARV therapy: See ii.
- Drug interactions
  - Rifampicin or rifabutin: I C
  - Anticonvulsants: I C

This chart shows a complete list of all conditions classified by WHO as Category 3 and 4. Characteristics, conditions, and/or timing that are Category 1 or 2 for all methods are not included in this chart (e.g., menarche to < 18 years, being nulliparous, obesity, high risk of HIV or HIV-infected, < 48 hours and more than 4 weeks postpartum).

### Notes
- **I/C** Initiation/Continuation: A woman may fall into either one category or another, depending on whether she is initiating or continuing to use a method. Where I/C is not marked, the category is the same for initiation and continuation.
- **NA** Not Applicable: Women who are pregnant do not require contraception. If these methods are accidentally initiated, no harm will result.
- **i** The condition, characteristic and/or timing is not applicable for determining eligibility for the method.
- **ii** Women who use methods other than IUDs can use them regardless of HIV/AIDS-related illness or use of ART.
- ***** Other risk factors for VTE include: previous VTE, thrombophilia, immobility, transfusion at delivery, BMI > 30 kg/m2, postpartum hemorrhage, immediately post-caesarean delivery, pre-eclampsia, and smoking.
- **** Anticonvulsants include: phenytoin, carbamazepine, barbiturates, primidone, topiramate, oxcarbazepine, and lamotrigine. Lamotrigine is a category 1 for implants.