

CONTRACEPTIVE IMPLANT

What is a Contraceptive Implant?

Contraceptive implants are soft capsules, about 1 ½ inch long, under the skin in a woman's upper, inner arm. The capsules constantly give off tiny amounts of an artificial hormone called progestin. This prevents pregnancy by thickening the cervical mucus so that sperm can't get into the uterus and by stopping ovulation.

There are different types of contraceptive implants being used around the world. The one used in the United States is called Implanon, and is a single rod that lasts three years. It can be used for less than three years because it can be taken out at any time.

Effectiveness

In all of the studies so far, Implanon has been 99% effective. In the study that was done in the United States to test Implanon's effectiveness, no one got Implanon who weighed more than a certain amount for a given height. If a woman weighs more than the weight on this chart, Implanon is probably over 99% effective, just as it is for other women, but it hasn't been fully studied.

5 ft.	130 pounds	5 ft. 1 in.	136 ½ pounds
5 ft. 2 in.	143 pounds	5 ft. 3 in.	149 ½ pounds
5 ft. 4 in.	156 pounds	5 ft. 5 in.	162 ½ pounds
5 ft. 6 in.	169 pounds	5 ft. 7 in.	175 ½ pounds
5 ft. 8 in.	182 pounds	5 ft. 9 in.	188 ½ pounds
5 ft. 10 in.	195 pounds	5 ft. 11 in.	201 ½ pounds
6 ft.	208 pounds	6 ft. 1 in.	214 ½ pounds

Use

Before having the implant put in, it's important to be sure you're not pregnant. For this reason, it is usually inserted within the first five days of a woman's menstrual period, after she has a pregnancy test. To avoid getting pregnant in the first two weeks after insertion, it is a good idea to use another method of birth control such as condoms.

When the implant is inserted, they will give you a card with the insertion and removal dates. The removal date is important because you cannot count on your implant to prevent pregnancy after that date.

Pregnancies are very rare with the implants but if you do get pregnant while you have one, you have a higher chance of tubal or ectopic pregnancy than other women. This is a very

dangerous type of pregnancy where the fertilized egg grows outside the uterus. If you have an implant and think you might be pregnant or if you have severe abdominal pain, get medical help right away.

Insertion and Removal

Insertion of a contraceptive implant is simple and quick. Removal is a little more difficult.

Insertion: The implant is inserted in a clinic or doctor's office. All the instruments used should be sterile. If you are right-handed it is usually put in your upper, inner left arm. If you are left-handed, it is usually put in the upper, inner right arm. You will lie down on an exam table with your arm resting over your head. They will clean your arm with antiseptic and numb the area of insertion with lidocaine. This is the same numbing medication used by dentists.

The implant will be put into a special inserter, which punctures your skin. Then the implant is slipped in just under the skin. You can't see it, but you can feel it if you press gently. A pressure bandage prevents bleeding for the first 24 hours. There will probably be some bruising or soreness in your arm for a few days.

Removal: The implant is removed through a small incision. Usually it is just under the skin and the incision is very small, less than a half inch. As when the implant was inserted, your upper, inner arm is numbed. After the incision is made, a sterile gauze or forceps are used to rub off any scar tissue around the implant. Then it is gently slipped out with forceps. The incision is usually held closed by small adhesive bandages and a pressure bandage stays on for 24 hours. Soreness and bruising are common. You can get pregnant immediately after it is removed.

Rarely, when the implant was inserted too deeply or if it has moved since the insertion, it may not come out easily. You might have to have it located by ultrasound or MRI and you might have to have a deeper incision done in an operating room. This is very unlikely.

Reinsertion: You need to have the implant removed when it expires. You can however, have a new one inserted at the same time the old one is taken out.

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Changes in Menstruation

Most women using implants have changes in their menstrual periods. Many women have unpredictable light spotting. Other women stop bleeding altogether. Some women have heavier bleeding. If bleeding is a problem for you, your healthcare provider may be able to help control it by prescribing birth control pills or other medications.

Your Health

You should not use the contraceptive implant if you are or think you might be pregnant or if you have any of the following health conditions:

- ◆ History of serious blood clots such as blood clots in your legs (deep venous thrombosis) in your lungs (pulmonary embolism) in your eyes (retinal thrombosis)
- ◆ History of heart attack or stroke
- ◆ Unexplained vaginal bleeding
- ◆ Liver disease
- ◆ Any breast cancer now or in the past
- ◆ Allergy to anything in the implant

Women who have diabetes, high blood pressure, high cholesterol or high triglycerides, headaches, epilepsy, depression, gallbladder disease, kidney disease, or are breastfeeding may not be able to use the implant. Certain medications or herbal products can stop it from working.

Risks

It is possible to get an infection where the implant was inserted or removed. If you notice any redness, heat or irritation of the skin after an insertion or removal, you should contact your healthcare provider. Most women have a tiny scar from insertion and removal but rarely there can be large amounts of scar tissue formed. It is possible that the implant could be very difficult or even impossible to remove. This could happen if it moves, breaks or is inserted too deeply. It is possible that the implant could be expelled, although you would most probably notice this. If you notice it coming out, you should contact your healthcare provider.

It is not known if contraceptive implants increase a woman's risk for serious internal blood clots called thrombosis. We do know that birth control pills and pregnancy increase this risk and contraceptive implants contain one of the hormones that are in birth control pills.

Side Effects

Some women with implants may have weight gain, headache, mood swings, acne and depression. Other possible side effects are vaginal inflammation or dryness, breast pain, stomach or back pain, nausea, dizziness and pain where the implant was inserted. Side effects that are very rare include extra hair on the body or face, trouble with contact lenses, and spotty darkening of the skin, especially on the face.

Drug Interactions

The effectiveness of the Contraceptive Patch is lowered when taken with certain medications, including antibiotics, anti-seizure, tuberculosis, and migraine medications. Some drugs used to treat HIV or AIDS may also interfere with the Patch. If you are taking any medications, tell your clinician. When taking medications that may interfere with hormonal birth control, consider adding a backup method, like condoms and spermicide. As with all drugs, it is useful to inform all your medical providers if you are using the Contraceptive Patch.

Danger Signs

Women who experience any of the following symptoms while using the Contraceptive Patch should call the clinic immediately:

- Abdominal pains (severe)
- Chest pain or shortness of breath
- Headaches (severe)
- Eye problems, such as blurred vision
- Severe leg or arm pain or numbness

Advantages

- ◆ Easy to use
- ◆ Can be worn for three years
- ◆ Affects fertility one month at a time
- ◆ Does not interrupt sex play

Disadvantages

- ◆ Does not protect against sexually transmitted infections, including HIV/AIDS
- ◆ Raised risk of heart attack and stroke
- ◆ Requires a prescription

Further Resources

- ◆ Emergency Contraception: ec.princeton.edu
- ◆ OrthoEvra (the manufacturer) www.OrthoEvra.com
- ◆ Feminist Women's Health Center: www.FWHC.org and www.Birth-Control-Comparison.info