

Northeast Iowa Community Action Corporation
Family Planning Program
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IMPLANON – A PROGESTERONE ONLY – IMPLANTABLE BIRTH CONTROL METHOD

What is it and how does it work?

Implanon is a progesterone only implantable birth control method. It is a flexible plastic rod the size of a matchstick that is put under the skin of your arm in an in – office procedure. It is placed using a local anesthetic and generally takes a few minutes. It prevents pregnancy by stopping the release of an egg from ovary. It also works by causing thickening of the cervical mucous which creates a barrier to prevent sperm from entering the uterus. Since 1998, there have been over 2.5 million women using Implanon.

Who should use Implanon:

The advantages of a progesterone only implant are no estrogen. Certain women are good candidates:

- Breastfeeding women
- Smokers over the age of 35
- Women with migraine headaches
- Women with high blood pressure
- Women who cannot take estrogen
- Women who have difficulty remembering other birth control methods

Who should not use Implanon:

- If you think you may be pregnant
- Have history of serious blood clots, such as blood clots in your legs, lungs, eyes, heart or head
- Unexplained vaginal bleeding
- Have liver disease
- Have or have had breast cancer
- Allergy to anything in Implanon

A few women who use birth control that contain hormones may get:

- High blood pressure
- Gallbladder problems
- Rare cancerous or non-cancerous liver tumors

Insertion of Implanon

- The timing of insertion of Implanon will depend on whether you are currently using birth control and what method you are currently using. You may also need to use a back up method of birth control such as condoms for seven days after insertion.
- Some women may feel a pinch, similar to a shot or injection when Implanon is inserted
- A local anesthetic is used to decrease the discomfort
- Both you and your clinician should check that Implanon is in your arm by feeling the Implanon implant.

- After insertion a women might experience mild soreness at the insertion site that shouldn't last more than a day or two. If your symptoms do not resolve in a day or two, you should contact Family Planning.

Benefits

- No estrogen, latex or silicone
- It is more than 99% effective if inserted correctly
- It prevents pregnancy in several ways
- Most women can't even see Implanon after it is inserted
- No need to remember daily birth control
- It is effective for three years, may be removed sooner if necessary
- It is reversible. Once removed, woman's ability to become pregnant usually returns quickly

Possible risks with using Implanon

1. Possible complications of insertion or removal
 - a. Pain, irritation, swelling, or bruising
 - b. Scaring
 - c. Infection
 - d. Implanon breaks making removal difficult
 - e. Failed insertion
 - f. Thick scar tissue forming around Implanon making removal difficult
 - g. Rarely, expulsion of the implant
 - h. Rarely, need for surgery in the hospital for removal of Implanon
2. Ectopic pregnancy, In the rare chance of pregnancy this is a possibility
3. Interaction with other medications
4. Ovarian cyst - These usually go away without treatment
5. Breast cancer – It is not known whether Implanon changes the risk of breast cancer. Do not use Implanon if you have or have had breast cancer.
6. Implanon does not protect from sexually transmitted infections or HIV

- Depression

When Implanon maybe less effective

1. Overweight women – it is not known if Implanon is as effective in very overweight women
2. Certain prescription medications and over the counter medications

Most common side effects

- Irregular and unpredictable bleeding - the most common side effect is a change in your menstrual periods. In studies, about one in ten women stopped Implanon because of bleeding problems. Expect your period to be irregular and unpredictable throughout the time you are using Implanon. You may have more bleeding, less bleeding, or no bleeding. The time between periods may vary, and in between periods you may have spotting.
- Mood Swings
- Weight gain
- Headache
- Acne

Tell your Clinician if you have any of the following, you may have a higher chance of serious problems:

- You have or have had diabetes
- High cholesterol or triglycerides
- Headaches
- Seizures
- Gallbladder or kidney disease
- Depression
- High blood pressure
- An allergic reaction to anesthetics or antiseptics

Major Problems:

Since there is no estrogen in Implanon, it carries less of a risk for serious complications. However you should be aware of the following possible major side effects:

- Blood clots in lungs or legs
- Stroke – blood clot in the brain
- Heart attack
- Liver tumor

Call Family Planning or your Doctor right away if you have any of the warning signs listed below:

- A – Abdominal pain (severe)
- C – Chest pain or shortness of breath
- H – Headaches (severe)
- E – Eye problems (blurred vision, loss of vision, flashing lights)
- S – Severe leg pain or swelling (calf or thigh)

Also call if:

- Yellowing of the skin or whites of the eyes
- Breast lumps
- Heavy vaginal bleeding
- Severe depression

Stopping Implanon

Implanon will slowly release progesterone over a period of three years. Implanon should be removed no later than three years from insertion date. It is removed in the office using anesthetic and making a small incision. Some minor bruising, redness, or swelling may occur. After removal another birth control method or another Implanon should be started immediately to avoid an unintended pregnancy. If pregnancy is desired, a return to fertility occurs quickly.