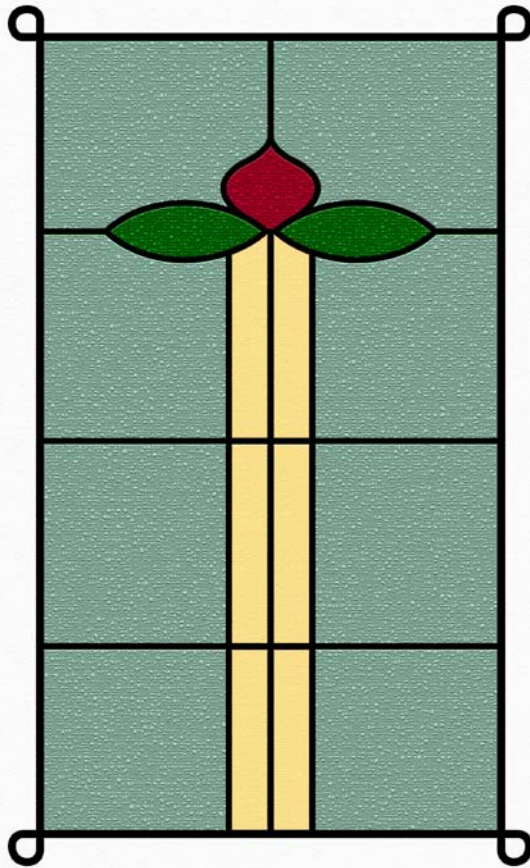


CRANLEIGH GARDENS

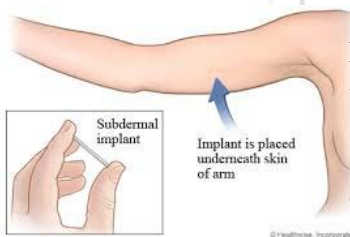


MEDICAL CENTRE

THE CONTRACEPTIVE
IMPLANT
NEXPLANON

THE CONTRACEPTIVE IMPLANT

An implant is a small flexible rod that is placed just under the skin in your upper arm. It releases a progesterone hormone similar to the natural progesterone that women produce in their ovaries and works for up to three years.



How effective any contraception is depends on how old you are, how often you have sex and whether you follow the instructions. If 100 sexually active women don't use any contraception, 80 to 90 will become pregnant in a year.

The implant is over 99 per cent effective. Fewer than one woman in every 1,000 will get pregnant over three years. The implant is a method of long-acting reversible contraception (LARC). All LARC is very effective because while it is being used it you do not have to remember to take or use contraception.

The main way it works is to stop the ovaries releasing an egg each month (ovulation).

It also:

- Thickens the mucus from your cervix. This makes it difficult for sperm to move through your cervix and reach an egg.
- Makes the lining of your uterus (womb) thinner so it is less likely to accept a fertilised egg.

Only a doctor or nurse who has been trained to fit implants can insert the implant. You can go to a contraception or sexual health clinic or to the doctor or nurse at a general practice. All treatment is free and confidential.

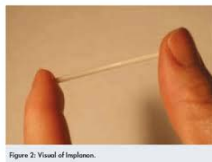


Figure 2: Visual of Implanon.





CAN ANYONE HAVE AN IMPLANT?

Most women can have an implant fitted. The doctor or nurse will need to ask you about your own and your family's medical history to make sure that the implant is suitable. You should tell them about any illnesses or operations you have. An implant may not be suitable for you if:

- You think you might already be pregnant. (You should either be on reliable contraception, be on your period without any missed periods, or be sure you have not had recent unprotected sexual intercourse prior to having the implant)
- You do not want your periods to change
- You take certain medicines.

You have now, or had in the past:

- Arterial disease or history of serious heart disease or stroke
- Disease of the liver
- Breast cancer or breast cancer within the last five years
- Unexplained vaginal bleeding (for example, bleeding between periods or after sex)
- Systemic lupus erythematosus

Please see the patient declaration on the back page.

WHAT ARE THE ADVANTAGES OF AN IMPLANT?

- It works for three years.
- You can use it if you are breast-feeding.
- Your fertility will return to normal as soon as the implant is taken out.
- It may reduce heavy, painful periods.



WHAT ARE THE DISADVANTAGES OF AN IMPLANT?

- Your periods may change in a way that is not acceptable to you.
- You may get temporary side effects when you first start the implant. They include headaches, breast tenderness and mood changes.
- Some women may get acne or their acne may worsen.
- It is not suitable for women using enzyme inducing drugs (see later section)
- It requires a small procedure to fit and remove it.
- An implant does not protect you against sexually transmitted infections, so you may need to use condoms as well.

WHEN CAN I START USING AN IMPLANT?

You can have an implant fitted at any time in your menstrual cycle if it is certain that you are not pregnant. If the implant is put in during the first five days of your period you will be protected against pregnancy immediately.

If the implant is put in on any other day you will not be protected against pregnancy for the first seven days after it has been fitted. So you will need to use an additional method of contraception, such as condoms, during this time.

I'VE JUST HAD A BABY. CAN I USE AN IMPLANT?

You can have an implant put in three weeks (21 days) after you have given birth. If the implant is put in on or before day 21 you will be protected against pregnancy immediately. If the implant is put in later than day 21 you will need to use an addition method of contraception for seven days.

An implant can be used safely while you are breast feeding and will not affect your milk.



CAN I USE AN IMPLANT AFTER A MISCARRIAGE OR ABORTION?

The implant can be put in immediately after a miscarriage or abortion. You will be protected against pregnancy immediately.

HOW IS AN IMPLANT PUT IN ?

The implant, which is the size of a match stick is placed just under your skin in the inner area of your upper arm. A trained doctor or nurse will give you a local anaesthetic to numb the part of your arm where the implant will go, so it won't hurt. It only takes a few minutes to put in and feels similar to having an injection. You won't need any stitches. After it has been fitted the doctor or nurse will check your arm to make sure the implant is in position. You will also be shown how to feel the implant with your fingers, so you can check it is in place. The area may be tender for a day or two and may be bruised and slightly swollen. The doctor or nurse will put a dressing on it to keep it clean and dry and to help reduce the bruising. Keep this dressing on for a few days and try not to knock the area.

Don't worry about knocking the implant once the area has healed. It should not break or move around your arm. You will be able to do normal activities and won't be able to see it.

You do not need to have a vaginal examination or cervical screening test to have an implant inserted.

HOW IS AN IMPLANT TAKEN OUT?

An implant can be left in place for three years or it can be taken out sooner if you decide you want to stop using it. A specially trained doctor or nurse must take it out. The doctor or nurse will feel your arm to locate the implant in the area where the implant is. They will then make a tiny cut in your skin and gently pull the implant out. They will put a dressing on the arm to keep it clean and dry and to help reduce the bruising. Keep this dressing on for a few days.

It usually only takes a few minutes to remove an implant. If the implant has been put in correctly it should not be difficult to remove. Occasionally an implant is difficult to feel under the skin and it may not be so easy to remove. If this happens, you may be referred to a specialist centre to have it removed with the help of an ultrasound scan.

If you want to carry on using the implant, a doctor or nurse can put in a new one at the same time. You will continue to be protected against pregnancy.

CAN ANYTHING MAKE AN IMPLANT LESS EFFECTIVE?

Some medicines may make an implant less effective. These include some of the medicines to treat HIV, epilepsy and tuberculosis, and the complementary medicine St John's Wort. These are called enzyme-inducing drugs. If you are using these medications it will be recommended that you use additional contraception, such as condoms, or that you change your method of contraception. Always tell your doctor or nurse that you are using an implant if you are prescribed any medicines. The implant is NOT affected by common antibiotics, diarrhoea or vomiting. It is important to have your implant changed at the right time. If it is not you will not be protected against pregnancy. If you have sex without using another method of contraception and don't wish to become pregnant you may want to consider using emergency contraception.



HOW WILL AN IMPLANT AFFECT MY PERIODS?

Your periods will probably change.

- Most women will have irregular periods
- In some women periods will stop completely
- Some women will have periods that last longer

These changes may be a nuisance but they are not harmful. If you do have prolonged bleeding the doctor or nurse may be able to give you some additional hormone or medicine that can help control the bleeding. They may also check that the bleeding is not due to other causes, such as infection.

WHAT SHOULD I DO IF I WANT TO STOP USING THE IMPLANT OR TRY TO GET PREGNANT?

If you want to stop using the implant you need to go back to the doctor or nurse and ask them to take it out. Your periods and fertility will return to normal and it is possible to get pregnant before you have your first period. If you don't wish to become pregnant then you should use another method of contraception from the day that your implant is removed.

If you want to try for a baby start pre-pregnancy care such as taking folic acid and stopping smoking. You can ask your doctor or nurse for further advice.

IF I HAVE TO GO INTO HOSPITAL FOR AN OPERATION SHOULD I STOP USING THE IMPLANT?

No. It is not necessary to stop using the implant if you are having an operation. However, it is always recommended that you tell the doctor that you are using the implant.



HOW LONG CAN I USE THE IMPLANT FOR?

If you have no medical problems you can continue to use the implant until you reach the menopause. Each implant will last for three years and will then need to be replaced.

WHAT SHOULD I DO IF I THINK I AM PREGNANT?

The implant is a highly effective method of contraception. If you have not taken any medicine that might make the implant less effective and have had the implant changed on time it is very unlikely that you will become pregnant. If you think that you might be pregnant then do a pregnancy test or speak to your doctor or nurse as soon as possible. Using the implant will not affect a pregnancy test. If you do get pregnant while you are using the implant there is no evidence that it will harm the baby. The implant should be removed if you want to continue with the pregnancy.

HOW OFTEN DO I NEED TO SEE A DOCTOR OR NURSE?

You only need to go to the clinic or your general practice if you have any problems with your implant or when it needs to be replaced. If you have any problems, questions or want the implant removed you should contact the surgery.

WHERE CAN I GET MORE INFORMATION AND ADVICE?

The sexual health information line provides confidential advice and information on all aspects of sexual health. The number is 0300 123 7123 and the service is available from Monday to Friday from 9am - 8pm and at weekends from 11am - 4pm. For additional information on sexual health visit www.fpa.org.uk
Information for young people can be found at www.brook.org.uk



EMERGENCY CONTRACEPTION

If you have had sex without contraception, or think your method might have failed there are different types of emergency contraception you can use.

- The emergency contraceptive pill, Levonelle - can be taken up to three days (72 hours) after sex. It is more effective the earlier it is taken after sex. It is available with a prescription or to buy from a pharmacy.
- The emergency contraceptive pill ellaOne - can be taken up to five days (120 hours) after sex. It is only available with a prescription.
- An IUD (Interuterine Device)- can be fitted up to five days after sex, or up to five days after the earliest time you could have released an egg (ovulation)

Ask your doctor, nurse or pharmacist about getting emergency pills in advance, just in case you need them.

SEXUALLY TRANSMITTED INFECTIONS

Most methods of contraception do not protect you from sexually transmitted infections. Male and female condoms, when used correctly and consistently, can help protect against sexually transmitted infections. If you can, avoid using spermicidally lubricated condoms. The spermicide commonly contains a chemical called Nonoxinol 9, which does not protect against HIV and may increase risk.



NEXT STEPS.

If you wish to proceed and have the contraceptive implant please do the follow.

1. Complete the patient declaration overleaf signing and dating the form.
2. Detach this page and give it to a receptionist at Cranleigh Gardens medical centre.
3. Book an appointment for the implant to be inserted. A prescription will be generated for the device. This will be sent to the Cranleigh Gardens Pharmacy.
4. On the day of your appointment, please attend early in order to go to the pharmacy to collect the device and take it to your appointment. This applies for both first time placement and for replacements of devices.

PATIENT DECLARATION
FOR FIRST TIME INSERTION OF A DEVICE

(Please tick the relevant boxes)

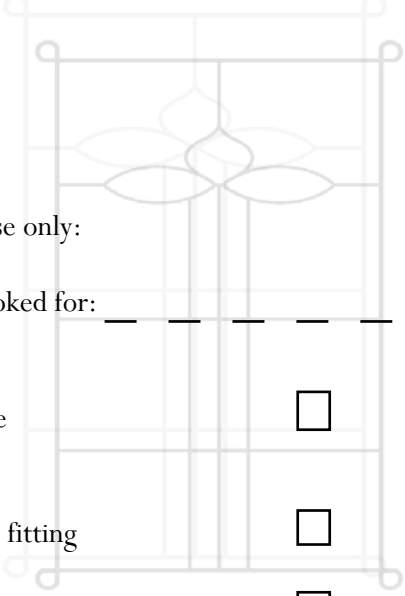
1. I am confident I am not currently pregnant;
(I am using reliable contraception, I am currently on a period without having missed any periods or I have not recently had unprotected sexual intercourse)
2. I do not have a history of arterial disease, heart disease or stroke
3. I do not have a history of liver disease
4. I have not had breast cancer (now or within the last 5 years)
5. I do not suffer from unexplained vaginal bleeding (between periods or after sex)
6. I do not have lupus erythematosus
7. I understand that my periods may change as a result of the implant (they may stop completely or become very irregular and prolonged)

PATIENT NAME:

DATE OF BIRTH:

SIGNATURE:

DATE:



For Administration use only:

- Appointment booked for: _____
- Prescription done
- Booked for: New fitting
- Replacement