

Where can you get implants?

Insertion is done by a qualified health care provider.
Call your local family planning clinic for information.
Ask your provider about the availability of Implanon®.

Center for Health Training
1809 Seventh Avenue, Suite 400
Seattle, WA 98101-1341

206.447.9538 - p
206.447.9539 - f

seattle@jba-cht.com
www.centerforhealthtraining.org

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Implants

How implants work:

Implants are small, flexible capsules or rods that are inserted, or implanted, under the skin of the upper, inner arm. Implants are filled with a low-dose progestin that is continually released into your body. Implanon® is a single rod implant that is available in the U.S.

Because of the constant presence of the progestin hormone, implants work by stopping your body from releasing an egg so that no egg is present to be fertilized, by causing the cervical mucus (liquid at the opening of the uterus) to thicken, which may stop sperm from getting into the uterus, and by changing the lining of the uterus. Norplant® inserts (effective for seven years) are no longer available in the



United States. If you still have a Norplant® in place you should contact your health care provider to ask about its effectiveness and possible removal. Implanon® is now available in the United States. It is a single rod implant (about the size of a matchstick) and is effective for three years.

How to use implants:

After giving you a local anesthetic (similar to what dentists use) your doctor or health care provider inserts the implant into your

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upper arm through a special needle. You may have some discomfort and bruising at the place of insertion for a short time. Be sure you have the check ups that your health provider recommends.

Effectiveness:

The implant is a highly effective, long-acting, reversible contraceptive method with almost no difference between perfect-use and typical-use. Less than 1 woman in 1,000 will have an unintended pregnancy in one year using an implant (99.9% effective). Implanon® is effective for up to three years. Certain medicines and supplements may reduce the effectiveness of the implant. Once you get your implant removed, you could get pregnant immediately.

Benefits of implants:

Implants are continuous and easy protection from pregnancy; you don't have to remember to take a pill every day. You and your partner do not have to interrupt your sexual activity to use this method. You will have very light bleeding or no periods, especially after the first year. Women who cannot take estrogen because of certain health problems may wish to try implants. As with other progestin-only methods of contraception, implants lower your risk of endometrial and cervical cancer, anemia, ectopic pregnancy, and pelvic infection.

If you want to use an implant while breastfeeding, talk with your doctor or healthcare provider.

Potential side effects and disadvantages:

During the first year, many women report irregular bleeding, spotting or longer, heavier periods. The longer a woman uses the implant, the more likely her periods will stop. If a woman is not comfortable with irregular bleeding or not having a period, the implant may not be a good choice of birth control.

Some women report headaches, mood changes, minor weight gain, or depression.

Implants may be difficult to remove. Removal requires a minor surgical procedure. With only one rod, Implanon® will be easier to remove than Norplant®.

Using implants for birth control will not give you protection against HIV (AIDS) or sexually transmitted infections (STIs) such as chlamydia, gonorrhea, herpes, genital warts (HPV), hepatitis B and syphilis.

Tell your doctor or health care provider about any medications you are taking, including prescriptions, over-the-counter, herbal remedies and vitamins.

Potential risks:

Some women should not use implants because of certain health conditions. Ask your doctor or health care provider about potential health risks.