

Contraception Counseling

Deborah Me

	Implant	Intrauterine Device		
	Nexplanon (3 years)	Skyla (3 years)	Mirena (5 years)	ParaGard (10 years)
Patient FAQ	<ul style="list-style-type: none"> - Will it hurt when you put it in? <ul style="list-style-type: none"> • The area on your arm will be numbed first (which will burn), and then the rod is inserted. - What if it gets stuck in my arm? <ul style="list-style-type: none"> • That is very rare, but we can take an xray if we have to see exactly where it is. - What if I decide I do want to have a baby in the future? <ul style="list-style-type: none"> • It can be taken out! And the time it takes to return to fertility is generally very short. 	<ul style="list-style-type: none"> - Will this hurt when you put it in? <ul style="list-style-type: none"> • Many women report some cramping and bleeding with the procedure, which is done in the office. It might help if you take some Motrin beforehand. - What if I decide I want to have a baby in the future? <ul style="list-style-type: none"> • IUDs can be removed with rapid return to fertility (i.e. it's reversible, you can have kids almost immediately after it's removed). - Are teenagers who've never had kids allowed to get this? <ul style="list-style-type: none"> • Yes! (supported by ACOG, AAP) Adolescents can use any of the IUDs, but the skyla is geared specifically towards teens. - I heard IUDs increase your risk of pelvic infections? <ul style="list-style-type: none"> • There is a risk of infection with placing the IUD, but this risk is only slightly higher in the first few weeks. IUDs should not be placed if there is an active pelvic or cervical infection. - Can I get this right after I give birth? <ul style="list-style-type: none"> • Yes (supported by ACOG, AAP, CDC) - Will this come out during sex/Will my partner feel it? <ul style="list-style-type: none"> • Probably not, and probably not. If it does come out, contact the clinic and use backup in the meantime. 		
Counseling/ Adverse fx	<ul style="list-style-type: none"> - may have very irregular bleeding for the first 6 mos; recommend wearing pad or pantiliner most days <ul style="list-style-type: none"> - AHC requires >6 months with nexplanon before removal - Sig: Use nonhormonal backup for a week, and condoms to prevent STIs 	<ul style="list-style-type: none"> - risk of infection with placement (first 21 days) - can have lighter bleeding or irregular spotting especially in the first 6 mos, and your periods may stop completely - hormonal side effects – hirsutism, acne, nausea, mood changes - Sig: Check strings regularly to ensure IUD is in place <ul style="list-style-type: none"> - Use nonhormonal backup for a week, and condoms to prevent STIs 		<ul style="list-style-type: none"> - risk of infection with placement (first 21 days) - can have increased bleeding/ cramping initially for the first months that improves with time - Sig: Check strings regularly to ensure IUD is in place <ul style="list-style-type: none"> - no backup needed; use condoms to prevent STIs
Screening	UPT if LMP >5d ago For IUDs: can screen for G/C and treat if needed without IUD removal			
Contra- indications	<ul style="list-style-type: none"> - current pregnancy - malignancy (breast) 	<ul style="list-style-type: none"> - severe anatomic abnormalities (ex. bicornuate uterus, adhesions, distorting fibroids) - active infection (PID, purulent cervicitis, G/C) - known pregnancy - unexplained AUB - known breast/cervical/endometrial cancer (Mirena/skyla); known cervical/endometrial cancer (Paragard) - copper allergy (for Paragard) 		

	Pill	Patch	Ring	Shot
Patient FAQ	<ul style="list-style-type: none"> - Do I really need to take it at the same time every day? <ul style="list-style-type: none"> • Yes – see below for tips on how to remember - What if I forget a pill? <ul style="list-style-type: none"> • See below - Can this affect my future fertility? <ul style="list-style-type: none"> • Lots of studies have shown that the pill does not affect future fertility, even with long-term use - Can I start these right away? <ul style="list-style-type: none"> • Yes – healthy, nonpregnant adolescents can start right away 	<ul style="list-style-type: none"> - Where do I wear it? <ul style="list-style-type: none"> • Abdomen, upper arm, upper torso, buttocks (changes each week) - Can I wear it when showering, swimming, etc. <ul style="list-style-type: none"> • yes - What if it falls off? <ul style="list-style-type: none"> • See below 	<ul style="list-style-type: none"> - Do I need to get “fitted” for this? <ul style="list-style-type: none"> • Nope! - Will it come out during sex? Will my partner be able to feel it? <ul style="list-style-type: none"> • Your partner will likely not be able to feel it. If it does come out during sex, you can reinsert it as long as it’s been out for <3hours - what if it comes out and I don’t realize it? <ul style="list-style-type: none"> • See below 	<ul style="list-style-type: none"> - Will this make me fat? <ul style="list-style-type: none"> • Weight gain is a potential side effect of depo. Average weight gain is ~5lbs - Will I still be able to get pregnant later on? <ul style="list-style-type: none"> • Return to fertility after using depo may take a couple months, but yes - What if I forget to come in for a shot? <ul style="list-style-type: none"> • See below
Counseling/ Adverse Fx	<ul style="list-style-type: none"> - SFx: nausea, headache, breast tenderness, libido change, breakthrough bleeding or spotting (usu resolve by 3 mos) - can improve cramps, PMS, acne - drug interactions (rifampin, AEDs, St. John’s wort) - promote daily adherence – phone alarms, put on nightstand or by toothbrush, family support - Sig: take one every day at the same time starting today <ul style="list-style-type: none"> - use nonhormonal backup x1 week + condoms to prevent STIs - If you miss 1 pill - take one as soon as you remember. If you miss >1 → only take the most recently missed pill, then take the rest as scheduled - If you miss 2 pills – double up for two days, then take the rest as scheduled - If >2 pills missed → use backup - if >2 pills missed in first week → consider EC - f/u in 1-3 mos to eval adherence, side effects - AAP recommends prescribing up to 12mos at a time 	<ul style="list-style-type: none"> - SFx: same as OCPs plus skin irritation, hyperpigmentation, etc. - Sig: For three weeks, change a new patch each week (abdomen, upper arm, upper torso, buttocks) <ul style="list-style-type: none"> - Leave it off for the 4th week, then start the cycle over after the 4th week ends - use nonhormonal backup x1 week + condoms to prevent STIs - If your patch falls off for <1 day → try to reapply - If your patch falls off for >1 day or for unknown time → apply new patch to start new cycle + use backup x1week 	<ul style="list-style-type: none"> - SFx: same as OCPs plus ring expulsion, vaginal discomfort, vaginal discharge - Sig: insert a ring for three weeks, then bleed → bleed for 7 days → insert new ring (even if period is still going) <ul style="list-style-type: none"> - use nonhormonal backup x1 week + condoms to prevent STIs - if NuvaRing is out for >3hrs → use backup x1week 	<ul style="list-style-type: none"> - SFx: irregular bleeding → amenorrhea eventually - headache, breast tenderness, depression, libido change - weight gain of ~5lbs - reversible bone loss – supplement with 1200mg Ca (two large tums/day) and 600 vit D - Sig: follow up every three months for each injection <ul style="list-style-type: none"> - use nonhormonal backup x1 week + condoms to prevent STIs - if you miss an injection → call clinic to schedule appointment as soon as possible and use backup in the meantime - Provide depo schedule cards to put in wallet
Screening	UPT if LMP >5d ago NO pelvic exam needed to determine eligibility			
Contra- indications	<ul style="list-style-type: none"> - Hx DVT or known thrombophilia - complex valvular heart disease or ischemic heart disease - severe uncontrolled HTN (sys >160, dia >100) - ongoing hepatic dysfunction - migraines + aura or focal neuro sx - smoking is NOT a CI in adolescents 	<ul style="list-style-type: none"> - Same contraindications as OCPs - can be less effective if >198 lbs - consider alternative if derm conditions 	<ul style="list-style-type: none"> - Same contraindications as OCPs 	<ul style="list-style-type: none"> - uncontrolled HTN, ischemic heart disease, liver disease, and SLE are <i>relative</i> contraindications

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