

your guide to contraceptive injections

Helping you choose the method
of contraception that's best for you



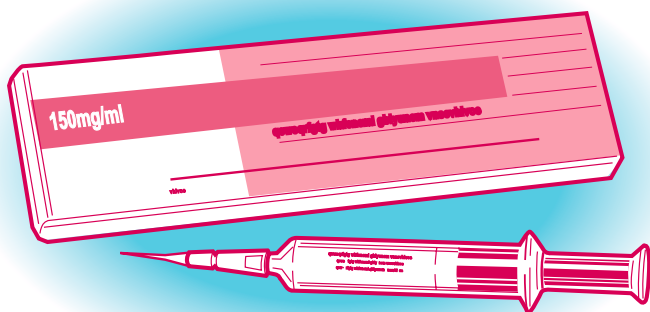
Contraceptive injections

Contraceptive injections contain a progestogen hormone which is similar to the natural progesterone produced by the ovaries.

There are three types of injection. Depo-Provera and Sayana Press protect you from pregnancy for 13 weeks. Noristerat protects you for eight weeks; it's not commonly used in the UK.

Contents

How effective is a contraceptive injection?.....	4
How do contraceptive injections work?	4
Where can I get a contraceptive injection?.....	4
Will I be able to choose which contraceptive injection I use?	5
How is a contraceptive injection given?.....	5
Can anyone use a contraceptive injection?.....	5
What are the advantages?	6
What are the disadvantages?	6
Are there any risks?	7
How does a contraceptive injection affect my bones?	8
Can I use a contraceptive injection if I'm at risk of osteoporosis?	8
Should I have my bones scanned before I start a contraceptive injection?.....	9
Will a contraceptive injection affect my periods?	9
Will my weight be affected by a contraceptive injection?	10



When can I start using a contraceptive injection?.....	10
I've just had a baby. Can I use a contraceptive injection?.....	10
Can I use a contraceptive injection after a miscarriage or abortion?.....	11
Can anything make a contraceptive injection less effective?.....	11
What should I do if I think that I'm pregnant?	11
How long can I use a contraceptive injection for?	12
What should I do if I want to stop using a contraceptive injection or try to get pregnant?	12
If I have to go into hospital for an operation should I stop using a contraceptive injection?	13
How often do I need to see a doctor or nurse?.....	13
Where can I get more information and advice?	13
Clinics	14
Emergency contraception.....	14
Sexually transmitted infections.....	15
A final word.....	16

How effective is a contraceptive injection?

How effective any contraceptive 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 get pregnant in a year.

If the injection is always used perfectly, according to instructions, it's over 99% effective. This means that fewer than one injection-user in 100 will get pregnant in one year.

If the injection is not always used according to instructions, about six in 100 injection-users will get pregnant in one year.

It's important to have your next injection at the right time. If you miss, or are late, having the next injection you may no longer be protected against pregnancy.

The injection is a method of long-acting reversible contraception (LARC). LARC is very effective because while it's being used you don't have to remember to take or use contraception.

How do contraceptive injections work?

The main way they work is to stop your ovaries releasing an egg each month (ovulation). They also:

- thicken the mucus from your cervix (entrance to the womb), making it difficult for sperm to move through it and reach an egg
- make the lining of your uterus (womb) thinner so it's less likely to accept a fertilised egg.

Where can I get a contraceptive injection?

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 (see Where can I get more information and advice? on page 13).

Will I be able to choose which contraceptive injection I use?

It's most likely that you'll be offered Depo-Provera or Sayana Press. Your doctor or nurse can discuss with you which contraceptive injection is the most suitable for you.

How is a contraceptive injection given?

You'll need to have an injection once every 13 weeks if you have Depo-Provera or Sayana Press or once every eight weeks for Noristerat.

Depo-Provera and Noristerat are injected into a muscle, usually in your buttocks. Depo-Provera can also sometimes be given in the arm. Noristerat is a thicker solution so you may find the injection is slightly more painful when it's given.

Sayana Press is injected beneath the skin at the front of the thigh or abdomen. It's possible for you to be taught how to inject Sayana Press yourself at home but not all clinics and general practices currently offer this option.

You don't need to have a vaginal examination or a cervical screening test to have a contraceptive injection.

Can anyone use a contraceptive injection?

Most women can have a contraceptive injection. Your doctor or nurse will need to ask you about your own and your family's medical history to make sure a contraceptive injection is suitable. Do mention any illness or operations you've had.

Some of the conditions which **may** mean you shouldn't use the injection are:

- you think you might already be pregnant
- you don't want your periods to change
- you want a baby within the next year.

You have now or had in the past:

- breast cancer
- unexplained vaginal bleeding (for example, bleeding between periods or after sex)
- arterial disease or history of serious heart disease or stroke
- severe disease of the liver
- risk factors for osteoporosis (thinning of the bones) (see Can I use the injection if I'm at risk of osteoporosis? on page 8).

What are the advantages of a contraceptive injection?

- You don't have to think about contraception for as long as the injection lasts.
- It's not affected by other medicines.
- It may reduce heavy painful periods and help with premenstrual symptoms for some people.
- You can use it if you're breastfeeding.
- It's a good method if you can't use estrogens, like those in the combined pill, contraceptive patch and contraceptive vaginal ring.

What are the disadvantages of a contraceptive injection?

- Your periods may change in a way that's not acceptable to you (see Will a contraceptive injection affect my periods? on page 9).
- Irregular bleeding may continue for some months after you stop the injections.

- Some people may put on weight when they use Depo-Provera or Sayana Press (see Will my weight be affected by a contraceptive injection? on page 10).
- The injection works for 13 or eight weeks, depending on which type you have. It can't be removed from your body, so if you have any side effects, you have to be prepared for them to continue during this time and for some time afterwards.
- There can be a delay of up to one year before the return of your periods and fertility after stopping the injection.
- Contraceptive injections don't protect you against sexually transmitted infections, so you may have to use condoms as well.
- Some people experience side effects such as spotty skin, hair loss, decreased libido, mood swings and headaches.

Are there any risks?

- Using Depo-Provera or Sayana Press may affect your bones (see How does the contraceptive injection affect my bones? on page 8).
- Research about the risk of breast cancer and hormonal contraception is complex and contradictory. Research suggests that people who use hormonal contraception, such as the injection, may have a small increase in the risk of being diagnosed with breast cancer compared to those who don't use hormonal contraception.
- You can have an allergic reaction to the injection, but this is rare.
- As with any injection, there's a small risk of a reaction at the spot the injection is given, which may cause irritation, swelling or a scar.

Your doctor or nurse should discuss all risks and benefits with you.

How does a contraceptive injection affect my bones?

- Using Depo-Provera or Sayana Press affects your natural estrogen levels, and may cause thinning of the bones. This isn't normally a problem for most injection-users as the bone replaces itself when you stop the injection and it doesn't appear to cause any long-term problems.
- Thinning of the bones may be more of a problem if you already have risk factors for osteoporosis (see Can I use a contraceptive injection if I'm at risk of osteoporosis? below).
- If you're under 18 years old you may use Depo-Provera or Sayana Press, but only after careful evaluation by a doctor or nurse. This is because young people under 18 are still making bone.

Can I use a contraceptive injection if I'm at risk of osteoporosis?

If you have risk factors for osteoporosis (thinning of the bones) it's normally advisable to use another method of contraception. Your doctor or nurse will talk to you about this. These factors include:

- a lack of estrogen due to menopause or early menopause (before 45 years)
- a lack of estrogen due to missing periods for six months or more, as a result of over-exercising, extreme dieting or eating disorders
- smoking
- heavy drinking

- long-term use of steroids
- a close family history of osteoporosis
- certain medical conditions affecting the liver, thyroid and digestive system
- being underweight.

You can help to make your bones healthier by doing regular weight-bearing exercise such as running and walking, eating a healthy diet with enough calcium and vitamin D, and cutting down on drinking alcohol and smoking.

The National Osteoporosis Society's website www.nos.org.uk can give you more information.

Should I have my bones scanned before I start a contraceptive injection?

A bone scan before starting a contraceptive injection isn't usually recommended. It may be useful for some people – usually those who've been identified as having risk factors for osteoporosis.

Will a contraceptive injection affect my periods?

Your periods will probably change.

- Most often, periods will stop completely.
- Some injection-users will have irregular periods or spotting (bleeding between periods).
- Some injection-users will have periods that last longer and are heavier.

These changes may be a nuisance but they're not harmful.

If you do have prolonged bleeding it may be possible for the doctor or nurse 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 an infection.

Will my weight be affected by a contraceptive injection?

Depo-Provera and Sayana Press are associated with an increase in weight in some people. If you're under 18 years old and overweight before starting Depo-Provera or Sayana Press you may be more likely to gain weight with use.

When can I start using a contraceptive injection?

You can start a contraceptive injection any time in your menstrual cycle if it's certain that you're not pregnant. If you start the injection during the first five days of your period you'll be protected against pregnancy immediately.

If you start it on any other day you won't be protected for the first seven days, so you'll need to use additional contraception, such as condoms, or avoid sex, during this time.

I've just had a baby. Can I use a contraceptive injection?

The injection can be started any time after giving birth. If you start the injection before three weeks (21 days) you'll be protected against pregnancy immediately. If it's started later than day 21 you'll need to use an additional method of contraception, such as condoms, or avoid sex, for seven days. When using the injection within six weeks of giving birth you may be more likely to have heavy and irregular bleeding.

The injection can be used safely if you're breastfeeding.

Can I use a contraceptive injection after a miscarriage or abortion?

The injection can be started immediately after an abortion or miscarriage and you'll be protected against pregnancy straight away. If you start the injection more than five days after a miscarriage or abortion then follow the advice in [When can I start using a contraceptive injection?](#) on page 10.

Can anything make a contraceptive injection less effective?

While the injection is working nothing will make it less effective. The contraceptive injection **isn't** affected by:

- prescribed medicines, including antibiotics
- any medicines which you buy over the counter at a pharmacy
- diarrhoea
- vomiting.

It's important to have your next injection at the right time – every 13 weeks for Depo-Provera and Sayana Press or every eight weeks for Noristerat. If you miss or are late having your next injection it may mean that you're no longer protected against pregnancy.

What should I do if I think that I'm pregnant?

Contraceptive injections are highly effective. If you've had your injection on time, it's very unlikely that you'll 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 contraceptive injection doesn't affect a pregnancy test. If you do get pregnant while you're using the injection, there's no evidence that it'll harm the baby.

How long can I use a contraceptive injection for?

You can continue to use the injection until you're 50 years old, as long as there are no medical reasons not to and you're not at risk of osteoporosis (see How does a contraceptive injection affect my bones? on page 8). If you use the injection for a long time you should expect to have your risk factors for osteoporosis re-assessed every two years. The doctor or nurse may ask you about your lifestyle and discuss whether it'd be more suitable for you to use a different method of contraception.

What should I do if I want to stop using a contraceptive injection or try to get pregnant?

If you want to stop a contraceptive injection, all you need to do is not have your next injection. Your periods and fertility may take a while to return to normal after you stop using the injection. However, it's possible to get pregnant before your first period after stopping the injection. If you don't wish to get pregnant then you should use another method of contraception from the day that your injection would've been due. If you have sex without using another method of contraception you may want to consider using emergency contraception (see Emergency contraception on page 14).

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 a contraceptive injection?

No. It's not necessary to stop a contraceptive injection if you're having an operation. However, it's always recommended that you tell the doctor that you're using a contraceptive injection.

How often do I need to see a doctor or nurse?

You only need to go to the clinic or your general practice when your injection is due. If you have any problems or want to ask any questions between injections, you should contact your doctor or nurse.

If you've been given a supply of Sayana Press to inject at home you'll need to see a doctor or nurse at least once a year.

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 open Monday to Friday from 9am-8pm and at weekends from 11am-4pm.

For more information on sexual health visit www.fpa.org.uk

Information for young people can be found at www.brook.org.uk

Clinics

To find your closest clinic you can:

- use Find a Clinic at www.fpa.org.uk/clinics
- download FPA's Find a Clinic app for iPhone or Android.

You can find details of general practices and pharmacies in England at www.nhs.uk and in Wales at www.nhsdirect.wales.nhs.uk. In Scotland you can find details of general practices at www.nhsinform.scot and in Northern Ireland at www.hscni.net

Emergency contraception

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

- An IUD is the most effective option. It 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).
- An emergency contraceptive pill with the active ingredient ulipristal acetate can be taken up to five days (120 hours) after sex. Available with a prescription or to buy from a pharmacy. ellaOne is the only brand in the UK.
- An emergency contraceptive pill with the hormone levonorgestrel can be taken up to three days (72 hours) after sex. More effective the earlier it is taken after sex. Available with a prescription or to buy from a pharmacy. There are different brands.

Emergency pills are available for free from some pharmacies. Age restrictions may apply.

Sexually transmitted infections

Most methods of contraception don't protect you from sexually transmitted infections.

Condoms (male/external and female/internal), 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 may increase the risk of HIV infection.

A final word

This booklet can only give you general information. The information is based on evidence-based research and guidelines from The Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists and the World Health Organization.

All methods of contraception come with a Patient Information Leaflet which provides detailed information about the method. Remember - contact your doctor, practice nurse or a sexual health clinic if you're worried or unsure about anything.

MI_8601914_12.07.21_V_1 Review Date 08/07/2024



the sexual health charity



www.fpa.org.uk

This booklet is produced by the sexual health charity FPA, registered charity number 250187. Limited liability company registered in England, number 887632. FPA does not run the Sexual Health Line.

© FPA printed May 2017

© Crown Copyright Public Health England.

ISBN 978-1-912202-00-3

The information in this booklet was accurate at the time of going to print. Booklets are reviewed regularly. Next planned review by May 2020.

If you'd like information on the evidence used to produce this booklet or would like to give feedback email feedback@fpa.org.uk

