

## Fact Sheet

# Long Acting Contraceptives [LARC]

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The word LARC means Long Acting Reversible Contraceptive, these are types of contraception which work for years, but are not permanent, so that you can still have a baby when the contraceptive is removed.

LARCs can be used by women who have never been pregnant, those who want to space their children, and women who have completed their family.

Long acting contraceptive options are particularly useful if you have difficulty remembering to take a pill every day or cannot take the pill for medical reasons.

LARCs are helpful for managing heavy and painful periods and conditions like endometriosis. LARCs are the most effective contraception available (as good as, or better than sterilisation).

### What is LARC?

LARCs are contraceptive methods which work for several years so you do not have to worry about remembering to take a pill every day. They are very safe and effective contraceptive methods, but they do not protect you against STIs (sexually transmitted infections) so, if you think you are at risk of STIs you should also use condoms. LARCs can be used by women who have just had a baby, whether or not you are still breastfeeding.

### What types of LARC are available?

- **Implants:** a small rod which is placed under the skin of your arm and slowly releases low doses of hormone (progesterone) eg. ImplanonNXT®. This hormone prevents pregnancy by stopping ovulation (release of an egg by the ovary).
- **Intrauterine devices (IUCDs):** a small plastic device placed into the uterus (womb) which prevents pregnancy either by
  - Releasing very low doses of hormone (progesterone) - Mirena®
  - Releasing tiny amounts of copper - Multiload Copper IUCD®

The hormone/copper changes the lining of the uterus so that implantation does not happen. IUCDs often also prevent the sperm from reaching the egg so fertilisation does not occur.

- **Injectable contraceptives:** Depot Provera® - this injection of progesterone needs to be given every 3 months. The hormone prevents ovulation (the release of an egg by the ovary).

### Progesterone Implants (Implanon NXT®)

- Work for 3 years
- Are 99.9% effective – remember that no contraception is 100% effective

### What will happen to my periods while I have the implant?

Your periods may stay the same (20%) with the implant but they may change:

- 22% of women - have no periods at all
- 34% - have irregular spotting (this is lighter than your normal period but happens at random times of the cycle)
- 7% - have periods more often
- 18%- have continuous bleeding (which may be heavy)
- 75% of women with painful periods find the pain is much less with Implanon NXT®

For women who experience irregular or heavy bleeding with the implant, about half will find their bleeding settles by 3 months after the implant is put in.

If it does not improve after this time you may wish to consider a different type of contraception.

### Who cannot use the contraceptive implant?

- If you have active liver disease
- If you have, or have had, breast cancer
- If you have irregular vaginal bleeding for which no cause has yet been found
- Previous problems or allergic reactions with a progesterone implant

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Please discuss any other medications or herbal preparations with your doctor before the implant is put in as some may affect, or be affected by, the implant.

If you have had a deep vein thrombosis (DVT) in the past you may use this contraception but discuss it with your doctor first.

### How is the implant put in?

The plastic rod is inserted by placing it under the skin of your upper arm using local anaesthetic. The procedure should be done by a doctor or nurse who has been trained to place the rod correctly. It is not painful to have Implanon® inserted, although the local anaesthetic may cause mild discomfort when it is injected. A bandage will be placed over the insertion site after the procedure. It is best to leave this bandage on for about 24 hours as it decreases pain and bruising.

The rod should be put in within 5 days of the start of your period, if not, it will take a week to work.

You should be able to feel the implant under your skin, if you cannot feel it check with your doctor to make sure it is still there.

### How is the implant removed?

The implant should be removed and replaced with a new one every three years to make sure you have continuous contraception. The implant is usually removed easily with local anaesthetic. Rarely, it can be difficult to feel and remove, if this is the case you should be referred to have it removed under ultrasound guidance – this means ultrasound will be used to help find the rod, making it easier to remove.

Once Implanon® is removed your fertility returns straight away.

### Are there any side effects?

For most women Implanon® causes very few side effects. In general, any side effects are no longer experienced 3 months after insertion. Possible side effects may include:

- Feeling bloated
- Headaches
- Sore breasts
- Moodiness
- Acne
- Weight gain
- Nausea

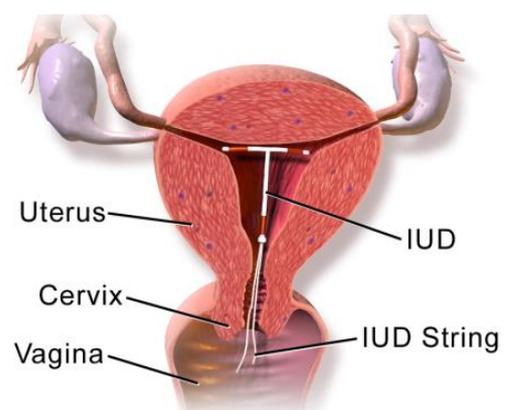
### IUCD (Intra Uterine Contraceptive Devices)

There are two IUCDs available:

- Mirena®
- Multiload®

IUCDs are a safe and effective contraception which is placed inside the uterus.

- Work for 5 years
- Are 99.8% effective
- Can be inserted 6 weeks after the birth of a baby and 12 weeks after a c/section. You will need to use contraception until the IUCD is in place for 7 days after placement for the Mirena® IUCD. The Copper IUCD works straight away.
- Can be used while breastfeeding



### Intrauterine Device (IUD)

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### What will my periods be like with an IUCD?

- With Copper IUCDs your periods are often heavier and more painful than they were without the IUCD.
- With the Hormone IUCD your periods are usually much lighter and less painful than they were without the IUCD. About 65% of women have no bleeding at all by 6 months after the IUCD is put in. Some women have irregular vaginal spotting for the first 3-6 months when Mirena® is inserted. Rarely the irregular bleeding does not settle, in which case you may wish to consider an alternative contraception.

### Who cannot use the IUCD?

- Very few women cannot use an IUCD for medical reasons. The hormone dose released by the IUCD is very low, so it is okay for women who smoke and who are on epilepsy medication.
- Women with some forms of heart valve disease, or congenital heart problems.
- You should not have an STI (Sexually transmitted infection) or other infection of the womb at the time the IUCD is put in. If you think you are at risk of an STI then you should always use condoms while having sex.
- Sometimes the cavity of the uterus is an unusual shape due to fibroids (benign tumours of the muscle of the uterus) or because the woman has been born with a differently shaped uterus. This may make putting the IUCD in more difficult or not possible.

### How is the IUCD put in?

The IUCD should be placed in the uterus by a doctor, or nurse, who has been trained to put them in correctly. It is usually not painful to have an IUCD inserted but you may experience mild crampy pain for the first 24 hours after it is put in. For this reason we advise you to take Nurofen™ or a similar anti-inflammatory pain killer every 6 hours if needed for the 24 hours after insertion.

Women who have not had children, or who have had a c/section, may find it painful to have the IUCD put in and we may advise that you have IV sedation or an anaesthetic for the insertion to make it more comfortable.

Occasionally women feel faint after insertion of an IUCD. If this happens we will ask you to wait in the clinic for 30 – 60 minutes before leaving.

You should not swim, have a bath or have sex for two days after the IUCD is put in. Showering is fine.

Very rarely an infection of the uterus happens within 3 weeks of the IUCD being put in. If you get pain or vaginal discharge see your doctor straight away to remove the IUCD. Untreated infections may reduce your fertility.

The IUCD has fine strings which come out through the cervix and can be felt if you place your fingers high up in your vagina. These strings do not cause discomfort and should not be felt by your partner during sex. You should check that you can feel the strings after each period. If you cannot feel them, see your doctor to make sure the IUCD has not fallen out.

Very rarely IUCDs fall out, even more rarely, they move through the wall of the uterus into the abdomen. This happens about 1 in every 1000 times an IUCD is put in. If this happens the IUCD will need to be removed by laparoscopy. [please see our fact sheet on laparoscopy]

We will arrange a follow up appointment for you 6 weeks after the IUCD is put in either at the clinic or with your GP.

### How is the IUCD taken out?

IUCDs are usually removed very easily by your doctor in the consulting rooms. Occasionally the strings fold back into the uterus and the IUCD needs to be taken out under ultrasound guidance or in the operating theatre while you have a very brief anaesthetic.

Once the IUCD is removed your fertility should return immediately.

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### Are there any side effects?

- Because the hormone dose in the Mirena™ is low, the side effects described above with the hormone implant, Implanon™, are very uncommon.
- Changes that can happen with your periods have been noted above.
- IUCDs do not protect against STIs and can make STIs, like Chlamydia, more severe. If you notice back or lower tummy pain, or increased vaginal discharge, contact your GP.
- Very rarely, IUCDs slip out of the uterus and even more rarely, they move through the wall of the uterus into the abdomen.

NOTE: No form of contraception is 100% effective. If you do fall pregnant with **any LARC** it is important to consult a doctor to make sure the pregnancy is not ectopic – this means a pregnancy outside the womb (usually in the tube). Ectopic pregnancies can be very serious if not treated early.

### Injectable contraception (Depot Provera™)

Injectable contraception is a hormone called Depot medroxyprogesterone acetate (DMPA), a progesterone hormone slightly different to that found in the implant or mini-pill. It is given as an injection every three months.

Depot Provera™ is a safe and effective form of contraception which:

- Works for 3 months
- Is 99% effective **if** you remember to have the injection every three months\*
- Can be given straight after the birth of a baby
- Can be used if you are breastfeeding
- Does not affect other medications you may be taking.

**\*Note:** Depot is not as effective a method of contraception as implants and IUCDs because you need to remember to have the injection every three months.

### What will happen to my periods while I am on Depot Provera™?

Most (47%) women who use DMPA will have light or no periods. Like Implanon NXT® this type of contraception may cause irregular spotting or heavy continuous bleeding. In this case you may wish to consider a different contraceptive option.

### Who cannot use Depot Provera™?

- If you have active liver disease
- If you have, or have had, breast cancer
- If you have irregular vaginal bleeding for which no cause has yet been found
- Previous problems or allergic reactions with DMPA

If you have a history of deep vein thrombosis (DVT) you may be able to use this contraception but discuss it with your doctor first.

### What side effects might I have with DMPA?

Side effects are rare with the injectable contraceptive but the following have been described.

- Feeling bloated
- Headaches
- Sore breasts
- Moodiness
- Acne
- Weight gain
- Nausea
- Less sex drive
- Reduction in bone strength if used for many years. The bone strength that has been lost may not be completely reversible even after stopping Depot™

Remember that once the injection has been given it cannot be removed, like an implant or IUCD, so any side effect which you experience will continue until the injection wears off in 3-4 months. With DMPA it can take up to 9 months for you to become fertile again after the last injection.

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**LARCs provide effective contraceptive with most women experiencing no, or temporary, side effects. LARCs are cheaper than the pill and you are in control of the contraception as do not need to rely on your partner. LARCs are also easy to use as you don't need to remember to take a pill every day!**

Westmead hospital has a contraception clinic and appointments can be made by phoning 88906508.

You will need a referral from your GP

Please be aware that:

- While you are waiting to attend the contraception clinic you must use some form of contraception as you must not be pregnant when you attend the clinic.
- Westmead hospital pharmacy does not stock IUCDs. If you have decided on this form of contraception please bring it with to your appointment. Your GP will be able to give you a prescription.
- There is a waiting list for surgery if you are considering permanent contraception, such as having your tubes tied.

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