

Depo Provera

What is Depo Provera?

Depo-Provera (DMPA) is a long-acting form of birth control. It is an injection (a shot) given every 11 - 13 weeks.

How does DMPA work?

Each of your ovaries contains thousands of unripe eggs. Each month, an egg ripens and is released into the tube to the uterus. This is called ovulation. DMPA stops this from happening. DMPA also causes changes in your cervical mucous which prevent sperm from entering the uterus.

How effective is DMPA?

Of 100 women who use DMPA perfectly for a year, less than one will become pregnant (actual effectiveness is 99.7%).

How is DMPA used?

DMPA is given as a shot once every 11-13 weeks. The first shot can be given once your clinician is certain you are not pregnant or if you presently are using the Pill, an IUD, or Nexplanon. **Use a back-up method of birth control such as condoms for the first week after the first injection.** The medicine slowly wears off over time and you cannot count on being protected from pregnancy after 13 weeks (91 days) from the last shot unless you return for another shot.

Who may take DMPA?

DMPA is best for women who want a long-acting method of birth control without the need to take a pill every day and /or do not want to use a method right before sex. DMPA may be a very good contraceptive choice for women who have completed childbearing, but who do not want to have a sterilization procedure. DMPA may be a good choice for women who cannot use other methods of birth control because of medical reasons, side effects with other methods, or because other methods didn't work.

Who should not take DMPA?

You should not take DMPA if you are or suspect that you may be pregnant; you have abnormal vaginal bleeding that has not been evaluated; you presently have serious liver disease or growths of any kind in the liver; you are being treated for or have a history of cancer of the breast; you recently have had blood clots; or you are allergic to DMPA.

If you now have or have had a problem such as migraine headaches, depression, heart disease, stroke, high blood pressure, diabetes (sugar in the blood), or liver disease (such

as hepatitis), tell your clinician so that she may decide if it is safe for you to take DMPA. These problems may be increased with the usage of DMPA.

It is well known that if a woman who uses birth control pills also smokes cigarettes and is over 35 years old; she has a higher risk of medical complications such as heart attack and stroke. Although DMPA is different from the pill (since it doesn't contain estrogen), it is not known whether DMPA causes the same medical complications as the pill. Therefore, women who use DMPA are advised not to smoke.

Those who wish to become pregnant should stop DMPA one year prior to attempting to conceive.

What are common problems with DMPA?

DMPA, like all other hormonal methods of birth control, can have side effects in some women. Fortunately, the side effects usually are not serious. However, it is important to realize that once DMPA is injected, it cannot be neutralized or reversed should you experience side effects. Therefore, you may have to live with the side effects until the DMPA wears off.

Menstrual changes: All women who use DMPA notice changes in their menstrual periods. During the first year, menstrual periods usually are irregular and spotty bleeding may occur between periods. This should be expected and not a concern. If it is bothersome, let your clinician know. Some women also notice heavier or longer bleeding during their periods, but this rarely causes serious medical problems. After 6-12 months of using DMPA, most women have periods less often or not at all. This change is not permanent. The periods will return after the DMPA is stopped.

Pregnancy symptoms: Side effects similar to the symptoms of early pregnancy occur in many women after the first few injections, but usually will go away. Some women notice sore breasts, nausea, vomiting, frequent urination, feeling tired and abdominal discomfort.

Weight changes: One of the effects of the hormone in DMPA is to increase appetite. Some women gain weight, some lose weight, some have no change. The average weight gain is only 5 pounds by the end of the first year and 5-7 pounds by the end of the second year. Some women find that they are hungrier with DMPA. A diet high in protein, low sugar and regular exercise and healthy snacks will prevent this.

Mental depression: This side effect may be worse in women who have had depression before. The cause is not clear. If related to DMPA, it goes away after the medication wears off.

Other possible reactions that may or may not be caused by DMPA are sometimes reported: headache, dizziness, nervousness, some loss of scalp hair, some increase in body hair and either an increase or decrease in sex drive and vaginal dryness.

Are there any other drawbacks?

- After DMPA is stopped a woman may become pregnant in 3-4 months. The average is 9-10 months. By 2 years, pregnancy rates are equal to women who used the pill or other method. Although DMPA has no permanent effects on fertility, it may take over one year for fertility to resume. Long-term planning of pregnancies is necessary. It is suggested that you switch to another method of birth control one year prior to desiring pregnancy.
- DMPA is found in breast milk. DMPA can be used by nursing mothers soon after delivery, since it does not affect the amount or quality of milk. However, the drug can show up in tiny amounts in the milk of nursing mothers, and thus it will be swallowed by the baby. Although no bad effects are known to happen, the long term effect of the drug on the baby is not known at this time.
- Lack of protection against STDs. While DMPA is a highly effective convenient method of birth control, it does not provide protection against sexually transmitted infections such as gonorrhea, chlamydia, or HIV (the virus that causes AIDS). If you or any of your sexual partners have other sex partners, it is very important to use a latex condom every time you have sex in order to protect yourself against these infections.
- Use of DMPA may cause you to lose calcium stored in your bones. The maximum amount of bone loss takes place during the first two years of using DMPA. The calcium usually returns completely once you stop using DMPA. Loss of calcium may cause weaker bones (osteoporosis) that could break more easily than usual. It is not known whether your risk of developing osteoporosis may be greater if you are a teenager when you start to use DMPA. You may be advised to have a bone density test after using DMPA for two years.

PRECAUTIONS YOU SHOULD TAKE:

Tell any health care provider that you see that you are taking Depo-Provera.

When taking DMPA, you should call the clinic right away if you have any of the following:

- Prolonged, very heavy vaginal bleeding (soaking more than four pads per day for two weeks).
- Unusual swelling or pain in the leg.
- Severe chest pain, sudden shortness of breath, or coughing up blood.
- Bad headache, blurred vision, or loss of vision.
- A lump in your breast.

If you want to continue to use DMPA, you must return to the office every 11 to 13 weeks for another shot.