

NEXPLANON®

(Information taken from the product monograph of Merck Canada Inc.)

NEXPLANON® is used to prevent pregnancy in adult women for up to 3 years.

How does NEXPLANON® work?

NEXPLANON® is a birth control implant that contains a hormone called etonogestrel (68 mg per implant). It does not contain estrogen. This implant is a small, soft, flexible plastic rod that is about the size of a matchstick. It is contained in an applicator. This applicator allows the healthcare professional to insert (place) the implant just below the skin on the inside of your upper arm.



NEXPLANON® will continuously release a small amount of etonogestrel (maximum 70 mcg per day) into your blood. The etonogestrel works in two ways to prevent pregnancy:

- It stops the release of egg cells from your ovaries.
- It causes changes in your cervical mucus to make it hard for sperm to enter your uterus.

NEXPLANON® is a long-acting reversible contraceptive (LARC). This means that it can provide birth control over a long period of time. In fact, NEXPLANON® can be left in place for up to 3 years. It is also reversible. This means that, if you want to stop using NEXPLANON® before 3 years, the implant can be removed at any time. You may be able to get pregnant as early as 1 week after the implant is removed. If you wish to continue to prevent pregnancy, start a different type of birth control right away.

How to use NEXPLANON®:

NEXPLANON® will be placed and removed by your healthcare professional, who will be familiar with how to do this. The insertion of NEXPLANON® will require a small surgical procedure in their office. The implant is inserted under the skin on the inside of your non-dominant upper arm. This is the arm that you do not write with. Before insertion, tell your healthcare professional if you are pregnant or think you might be pregnant (e.g., if you had unprotected sex during the current menstrual cycle).

NEXPLANON® will be inserted according to the following steps:

Lie on your back, with your arm bent at the elbow. Put your hand underneath your head, or as close as possible. This position will help with the insertion of the implant. Your healthcare professional will find the correct spot on your arm for the insertion. They will mark your arm in two spots using a marker. These spots will help to make sure the implant is placed in the correct spot. Your healthcare professional will clean the area and give you a medication to numb your arm. This is called an anesthetic. Your healthcare professional will stretch the skin of your upper arm and use the applicator to place the implant. The applicator has a small needle, which will puncture your skin. This allows the implant to be inserted under the skin. Your healthcare professional will remove the applicator and apply a small bandage over the insertion site. Your healthcare professional will feel for the implant. They will also ask you to feel it. You should be able to feel both ends between your thumb and finger. The insertion site will then be covered with some gauze. A second bandage, called a pressure bandage, will also be applied. This will help to reduce bruising. You may remove the pressure bandage after 24 hours. The other bandage should stay in place for 3 to 5 days.

Your healthcare professional will give you a Patient Alert Card. This card shows when and where NEXPLANON® was inserted, and when it must be removed. Your healthcare professional will also show you how to feel for the implant. Occasionally feel for the implant. If, at any time, you cannot feel it, contact your healthcare professional as soon as possible. The Patient Alert card will also remind you about this. Store the card in a safe place.

Removing NEXPLANON®:

The implant can be removed at your request or, at the latest, 3 years after it was inserted. A new implant may be inserted immediately after the old implant is removed. In some cases, the same incision can be used. However, this will only be possible if the insertion site was correct. You may be able to get pregnant as early as 1 week after your implant is removed. If you do not want to become pregnant after NEXPLANON® is removed, ask your healthcare professional about other ways to prevent pregnancy. If you wish to stop using NEXPLANON® because you want to get pregnant, wait until you have had a period before trying to conceive. This will help you to determine when the baby will be due.

NEXPLANON® will be removed according to the following steps:

Lie on your back, with your arm bent at the elbow. Put your hand underneath your head, or as close as possible. Your healthcare professional will mark a spot on your arm at the end of the implant. This mark will help to ensure the implant is removed correctly. Your healthcare professional will clean your arm and then give you an anesthetic to numb your arm. Your healthcare professional will make a small incision in your arm, just below the tip of the implant. They will gently push the implant towards this incision and pull the implant out using forceps. Sometimes, the implant is surrounded by hard tissue. This will make it more difficult to remove. If this is the case, your healthcare professional will make a small incision into this tissue. The

incision site will be closed using a sterile adhesive wound closure. A pressure bandage will be placed on top to minimize bruising. You may remove the pressure bandage in 24 hours. The sterile adhesive wound closure should remain in place for 3 to 5 days.

One implant is inserted at a time. The implant can stay in place for up to three years. However, you can ask your healthcare professional to remove it at any time. If you are overweight, your healthcare professional may suggest replacing your implant earlier.

What are the most common (more than 1 in 10 women) possible side effects of NEXPLANON®?

- Acne
- Headache
- Weight gain
- Breast pain or tenderness
- Irregular periods
- Decrease in the amount or duration of menstruation
- Vaginal infection

During the insertion or removal of NEXPLANON®, you may experience bruising, pain, swelling or itching and, in rare cases, infection. A scar may form or an abscess (blister) may appear at the insertion site. You may also feel numbness at the insertion site.