

NEXPLANON®



NEXPLANON® is used in adult women for the prevention of pregnancy for period of up to 5 years ¹.

How does NEXPLANON® works?

NEXPLANON® is a contraceptive implant that contains a hormone called etonogestrel (68 mg per implant); it does not contain estrogen. It is a small, soft, flexible plastic stick, about the size of a matchstick, that comes in an applicator, which allows the healthcare professional to place the implant just under the skin, on the inner side of your upper arm.

It will continually release a small amount of etonogestrel into your blood (maximum 70 mcg /day).

Etonogestrel works in two ways to prevent pregnancy:

- It prevents the release of an oocyte from the ovaries.
- It changes the cervical mucus, making it difficult for sperm to enter the uterus.

NEXPLANON® is a long-acting reversible contraceptive (LARC). This means that it can provide contraception for a long period of time. In fact, NEXPLANON® can be kept in place for a period of up to 5 years ¹. Its effect is also reversible.

This means that if you wish to stop using NEXPLANON® before 5 years ¹, the implant can be removed at any time. Then, you could become pregnant within the first week after the implant is removed. If you want to continue to prevent pregnancy, you must start using another contraceptive method before or as soon as the implant is removed.

How to use the NEXPLANON® implant?

NEXPLANON® will be inserted and removed by your healthcare professional, who is familiar with these procedures. The insertion of the NEXPLANON® implant must be done as part of a minor surgical procedure carried out in your office. The implant should be inserted under the skin of the inner side of the non-dominant upper arm. This is the arm you don't write with. Before insertion, tell your healthcare professional if you are pregnant or think you may be pregnant (for example, if you have had unprotected sex during the current menstrual cycle).

¹ - Quebec Contraception Protocol – 2024 update – INSPQ - <https://www.inspq.qc.ca/sites/default/files/2024-05/3466-protocole-contraception-quebec-2024.pdf> (consulted on May 31, 2024)

The NEXPLANON® implant will be inserted according to the following steps :

- Lying on your back, with your arm bent at the elbow, place your hand under your head (or as close to your head as possible). This position will facilitate insertion of the implant. Your healthcare professional will find the right place on your arm for insertion.
- Using a marker, she or he will indicate two points on your arm. These points will ensure that the implant is placed in the correct place.
- She or he will clean this area and apply a medicated product to numb your arm. This is called an anesthetic.
- She or he will stretch the skin on your upper arm and use the applicator to insert the implant. The applicator has a small needle that will puncture your skin. This allows the implant to be inserted under the skin.
- She or he will remove the applicator and then check for the presence of the implant. She or he will ask you to touch it too. You should be able to feel both ends between your thumb and another finger.
- The insertion site will then be covered with an adhesive dressing, then with a second dressing, called a pressure bandage. The latter aims to reduce the risk of bruising.
- You can remove the pressure bandage after 24 hours and the dressing placed on the insertion site after 3 to 5 days.

You will be given a Patient Alert Card on which the insertion site, the date of insertion and the deadline by which the implant must be removed will be noted.

You must continue another method of contraception for the first 7 days following insertion because it is not effective immediately.

You should occasionally check for the presence of the implant. If you cannot feel it, contact your healthcare professional as soon as possible.

The implant can be removed at your request or, at the latest, 5 years ²after its insertion. A new implant can be inserted immediately after removing the old one. In some cases, the same incision can be reused. However, it is possible to do so if the insertion site was adequate.

You could become pregnant within the first week after removing your implant. If you do not want to become pregnant after removing NEXPLANON®, ask your healthcare professional about other birth control methods available. It is also suggested not to have unprotected sex in the 5 days preceding withdrawal.

The NEXPLANON® implant will be removed according to the following steps :

- Lying on your back, with your arm bent at the elbow, place your hand under your head (or as close to your head as possible). Your healthcare professional will attempt to locate your implant. She or he will mark the end of your implant in your arm with a marker. This point will allow her or him to ensure that the implant is removed correctly.
- She or he will start by cleaning your arm, then use an anesthetic to numb it.

²- Quebec Contraception Protocol – 2024 update – INSPQ - <https://www.inspq.qc.ca/sites/default/files/2024-05/3466-protocole-contraception-quebec-2024.pdf> (consulted on May 31, 2024)

- She or he will make a small incision on your arm, just under the end of the implant.
- She or he will then gently push the implant toward this incision and remove it with forceps.
- The incision will be closed with sterile adhesive skin suture strips.
- An adhesive bandage will be applied to the removal site and a pressure bandage will be placed over the adhesive strips to reduce the risk of bruising.
- You can remove it after 24 hours. The sterile adhesive strips should remain in place for 3 to 5 days.

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
- Decreased number or duration of menstruation
- Vaginal infection

Following the NEXPLANON® insertion or removal procedure, 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.