

Nexplanon (etonogestrel)

Information Leaflet and Diary Card



To be given to patients who have been prescribed Nexplanon

Index

Choosing the contraceptive that's right for you is a very important decision. You need to be confident that it will protect you from becoming pregnant; but you also need to be happy with the way it works within your body. This booklet has been designed to help you understand your prescription for Nexplanon, and answer some of the questions you may wish to ask.

It should also be used in conjunction with the Patient Information Leaflet (PIL) which can be found in the Nexplanon packaging or visit www.medicines.org.uk/emc/medicine/23817

Page 4 What is Nexplanon?

How reliable is Nexplanon?

Page 5 Will Nexplanon suit my needs?

Page 6 What happens when Nexplanon is inserted?
Will it hurt?

Page 7 When should Nexplanon be inserted?
How quickly does Nexplanon start to work?

Page 8 Will anyone be able to see Nexplanon in my arm?
What happens with Nexplanon after insertion?
Will I need regular check ups?
Do other medicines affect the reliability of Nexplanon?
Will Nexplanon still work if I have a stomach upset?

Page 9 What about sexually transmitted infections?

Page 10 Will I have side effects from using Nexplanon?

Reporting of side effects

Will Nexplanon affect my weight?

Will Nexplanon affect my moods?

Page 11 Will Nexplanon affect my periods?

Will Nexplanon leave a scar when it is removed?

Page 12 How do I know when Nexplanon needs to
be removed?

What about removal?

What if I change doctors - can any doctor
remove Nexplanon?

Page 13 Is Nexplanon suitable for me?

Do not use Nexplanon if:-

Page 14 Warnings and precautions

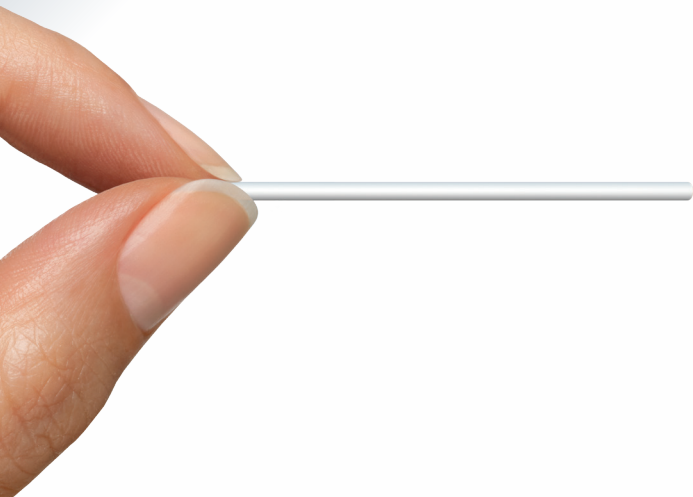
Page 16 Diary to help you record your bleeding pattern

What is Nexplanon?

Nexplanon is a long-acting, reversible contraceptive in the form of a small, flexible rod, which is inserted just under the skin on the inside of your upper arm. It contains the hormone progestogen, a small amount of which is released into your body each day. This prevents the monthly release of eggs from your ovaries. As a result, Nexplanon protects you against pregnancy for a period of three years, but if you are overweight the doctor may advise you to replace the implant earlier.

How reliable is Nexplanon?

No method of contraception is 100% effective.
However, your implant is more than 99% effective.



Will Nexplanon suit my needs?

Your implant is a reliable method of preventing pregnancy for up to three years, but if you are overweight the doctor may advise you to replace the implant earlier.

In contrast to combined pills, implants can be used by women who may not, or do not want to use oestrogen. When you use an implant you do not have to remember to take a pill every day.



What happens when Nexplanon is inserted?

Contraceptive implants can only be inserted by a healthcare professional specially trained in the procedure. They will ask you about your medical history and will check your weight and blood pressure. They may also give you a physical examination, and will check to make sure you aren't pregnant. Insertion is a relatively simple and quick procedure.

When it has been inserted you will be requested to feel the implant before you leave the clinic. Afterwards, a pressure bandage may be applied to your arm to minimise bruising. You will need to keep this in place for 24 hours, during which you must make sure it stays clean and dry. The bandage can then be removed and you can use your arm in the usual way.

Will it hurt?

You will probably be given a local anaesthetic to numb the area while the procedure takes place. However, the area may be a little painful and bruised when the anaesthetic has worn off. This should ease relatively quickly.

When should Nexplanon be inserted?

Unless you are switching from another hormonal contraceptive method, the insertion should be performed on day 1-5 of your menstrual cycle to rule out pregnancy.

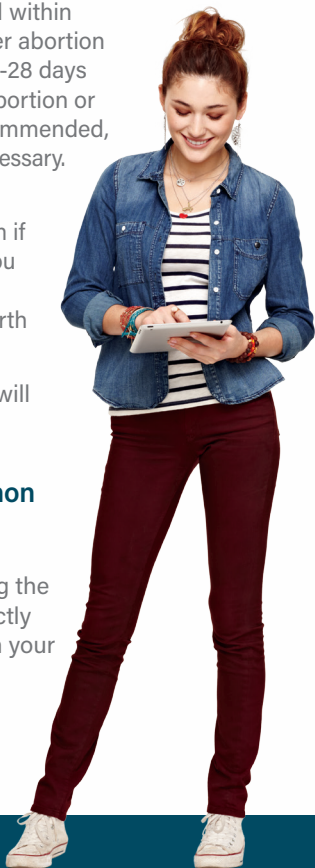
The implant should be inserted within 5 days following a first trimester abortion or miscarriage and between 21-28 days following a second trimester abortion or miscarriage. If inserted as recommended, back up contraception is not necessary.

The implant should be inserted between 21-28 days postpartum if you are not breast-feeding. If you are breast feeding the implant should be inserted after the fourth postpartum week.

Your health care professional will be able to advise you.

How quickly does Nexplanon start to work?

Your implant starts to work as soon as it is inserted, providing the procedure is conducted correctly and at the appropriate point in your menstrual cycle.



Will anyone be able to see Nexplanon in my arm?

The implant is unlikely to be visible. However, you should be able to feel it with your fingertips.

What happens with Nexplanon after insertion?

When correctly inserted, the implant lies in the tissue just below the surface of your skin. This holds it in position and you can feel it. If the implant breaks or bends while in your arm, how the implant works should not be affected. If you cannot feel it or if you have questions please contact your healthcare provider.

Will I need regular check ups?

Your trained healthcare professional will advise when you need to attend the clinic for routine check ups.

Do other medicines affect the reliability of Nexplanon?

Some medicines may stop Nexplanon from working properly, for example anti-epileptics, treatments for tuberculosis and the herbal remedy, St. John's Wort. So it's important that you remember to tell your healthcare provider that you are using Nexplanon when other medicines are being prescribed for you, or when you buy over-the-counter medicines – also tell the doctor or nurse who attends to you if you have treatment in hospital.

Will Nexplanon still work if I have a stomach upset?

Because it is not taken by mouth, it will continue to work even if you are sick or have diarrhoea.

What about sexually transmitted infections?

Because the implant doesn't work as a barrier, it can't protect you from sexually transmitted infections. You should use condoms if you are concerned that you may be at risk.



Will I have side effects from using Nexplanon?

As with most medicines, there is a possibility of some side effects with Nexplanon. Those most commonly reported include irregular bleeding, acne, headaches, breast tenderness and pain, weight increase and vaginal infection. However, these don't affect everyone.

The patient information leaflet you are given will give more information about side effects and you can discuss your concerns with your doctor or family planning nurse at any time.

Reporting of side effects

If you get any side effects, talk to your doctor, pharmacist or nurse. This includes any possible side effects not listed in the package leaflet. You can also report side effects directly via the Yellow Card Scheme at www.mhra.gov.uk/yellowcard. By reporting side effects you can help provide more information on the safety of this medicine.

Will Nexplanon affect my weight?

As with all hormonal contraceptives, some women notice changes in their weight while using Nexplanon.

Will Nexplanon affect my mood?

Instances of mood change have been reported with all forms of hormonal contraception. Consult your doctor or family planning nurse if you are concerned.

Will Nexplanon affect my periods?

Every woman is different where periods are concerned. However, it is likely that Nexplanon will affect your bleeding pattern, and your periods may become irregular – as with other progestogen-only methods of contraception.

Some women find their periods happen only occasionally, or may stop completely. This is quite normal, and it doesn't mean that the blood is going elsewhere within the body. Others find that their periods become heavier or last longer. It's also possible that your bleeding pattern may change the longer you use the implant.

It is impossible to predict these changes and, although they may be inconvenient, they are not harmful and do not mean that your implant isn't working.

The bleeding pattern that you experience during the first three months generally indicates your future bleeding pattern. Painful, frequent or long periods may improve. If you have any concerns talk to your healthcare professional who can offer support and advice.

Should you experience heavy or prolonged bleeding, please see your healthcare professional.

Use the diary card on the back of this booklet to make a note of the days when you have bleeding. This will be useful to show the person who fitted your implant. It will help to identify patterns and help manage the bleeding.

Will Nexplanon leave a scar when it is removed?

There is a possibility that a small scar may be left by the incision that is made when your implant is removed.

How do I know when Nexplanon needs to be removed?

Your implant must be removed after three years, (it may be replaced sooner if you are above average weight) so when it is inserted, you will be given a card that states the date by which it should be removed. Please keep the card somewhere safe, and make an appointment with your doctor before this date.

What about removal?

Removing Nexplanon takes only a few minutes. Your trained healthcare professional will first feel the position of the implant with their fingertips. They may also use x-ray, ultrasound or in rare circumstances, a CT or MRI scan if they are unable to locate the implant by touch.

A local anaesthetic is used to numb the area and a incision will be made in the skin at one end of the rod, through which it will be removed. After removal, a pressure bandage may be applied to minimise bruising.

A new Nexplanon may be inserted. If not, you will need to start using another form of contraception immediately if you do not wish to get pregnant.

What if I change doctors – can anyone remove Nexplanon?

It should only be fitted and removed by healthcare professionals who are specially trained in this procedure. Ask whether your new doctor or nurse is trained to remove Nexplanon. If they are not, they will refer you to another clinic that is able to remove it.

Is Nexplanon suitable for me?

Prior to the initiation or replacement of Nexplanon a complete medical history (including family medical history) should be taken and your healthcare professional should ensure you are not pregnant.

Do not use Nexplanon...

If you have any of the conditions listed below. If any of these conditions apply to you, tell your doctor before Nexplanon is inserted. Your doctor may advise you to use a non-hormonal method of birth control.

- If you are allergic to etonogestrel or any of the other ingredients of this medicine (listed in section 6).
- If you have a thrombosis. Thrombosis is the formation of a blood clot in a blood vessel [for example in the legs (deep venous thrombosis) or the lungs (pulmonary embolism)].
- If you have or have had jaundice (yellowing of the skin), severe liver disease (when the liver is not functioning properly), or a liver tumour.
- If you have (had) or if you may have cancer of the breast or of the genital organs.
- If you have any unexplained vaginal bleeding.

If any of these conditions appear for the first time while using Nexplanon, consult your doctor immediately.

Warnings and precautions

Talk to your doctor, pharmacist or nurse before using Nexplanon.

If Nexplanon is used in the presence of any of the conditions listed below, you may need to be kept under close observation. Your doctor can explain to you what to do. If any of these apply to you, tell your doctor before Nexplanon is inserted. Also if the condition develops or gets worse while you are using Nexplanon you must tell your doctor.

- You have had cancer of the breast.
- You have or have had a liver disease.
- You have ever had a thrombosis.
- You have diabetes.
- You are overweight.
- You suffer from epilepsy.
- You suffer from tuberculosis.
- You have high blood pressure.
- You have or have had chloasma (yellowish-brown pigmentation patches on the skin, particularly of the face); if so avoid too much exposure to the sun or ultraviolet radiation.

Please also refer to the Patient Information Leaflet (PIL) which can be found in the Nexplanon packaging or visit www.medicines.org.uk/emc/medicine/23817

You can keep a record of your bleeding pattern by using the chart below. Remember, if you have any concerns, talk to the healthcare professional who fitted the implant. They will be able to give advice and put your mind at rest.

- **Bleeding** means that you need to use two or more pads or tampons per day.
- ✕ **Spotting** means that you use only one pad or tampon per day.

Example:

1	2	✕	✕	✕	●	7
---	---	---	---	---	---	---

Month 1

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

Month 2

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

Month 3

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

Month 4

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

Month 5

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

Month 6

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	

Your Nexplanon-trained healthcare professional is:

Name:

Phone number:

For more information visit

www.talkchoice.co.uk

www.nexplanon.co.uk

The information provided in this booklet is general educational information and does not take the place of professional medical advice. Always follow your doctor/nurse's instructions and talk with him/her about any questions or problems you have regarding your health and treatment.



Merck Sharp & Dohme Limited
Registered Office: Hertford Road, Hoddesdon, Hertfordshire EN11 9BU
Registered in England No. 820771

Medical information: +44 (0)1992 467272

Diary Card