

Depo-Provera for Contraception

Depo Provera (Depo medroxyprogesterone Acetate or DMPA) is a long acting progestin given by intramuscular injection every 12 weeks. It has been approved for contraception in the USA since 1992, but has been available in some countries since the 1960s. It is important to understand the benefits, risks and side effects, and to consider other birth control methods to determine if this is the best option for you. A clinician visit to review and sign a consent for use is required prior to your first injection.

Method of Action

Depo-Provera is a synthetic form of progesterone (a hormone normally made by a woman's body), one of the three main types of female hormones. When administered by intra-muscular injection, small amounts of the medication enter the circulation for approximately three months. This medication is thought to prevent pregnancy in three ways: 1) It prevents ovulation (the release of an egg from the ovary); 2) It inhibits the entry of sperm through the cervix by thickening and decreasing the cervical mucus; 3) It thins the lining of the uterus such that, should a fertilized egg reach the uterus, theoretically, it would have difficulty implanting.

Effectiveness

No method of contraception can guarantee that you will not conceive. The failure rate of Depo-Provera with perfect use is less than 1 pregnancy per 100 women per year. This is similar to oral contraceptive effectiveness with perfect use. If you don't use Depo perfectly, 3 in 100 women may become pregnant in each year of use. It is no longer effective at the end of 12 weeks. A repeat injection is needed every 12 weeks to prevent pregnancy. Depo starts preventing pregnancy within 24 hours if injected in the first seven days of your cycle. If your injection is not in the first 7 days of your cycle, you must use a back up method for 7 days after the injection.

Use in women who cannot take oral contraceptives

Because Depo Provera contains no estrogen, it may be used by women with migraine headaches, history of Deep Vein Thrombosis (DVT or clotting disorder), and breastfeeding women. Depo does not increase the risk of ectopic (tubal) pregnancy.

Duration of Action

It is important to understand that once given, Depo Provera will be in your body for approximately 12 weeks and there is no way to reverse its effects sooner. At the end of 12 weeks there is no longer any protection from pregnancy. If you decide you want to become pregnant after using Depo Provera, it may take more than three months after the last injection to return to fertility. The average interval from the last Depo Provera injection to pregnancy is 9-10 months, but occasionally may be as long as 18 months. Other methods of contraception are more quickly reversed. Women who wish to become pregnant in 1-2 years should consider a different reversible method.

Warnings and Precautions

In 2004, the U.S. Food and Drug Administration issued a "Black Box Warning" that "women who use Depo-Provera may lose significant bone mineral density (BMD) which is greater with increasing duration of use and may not be reversible". The concern was that young women may not reach their peak bone mass, and then may be at increased risk of osteoporosis and bone fractures at a later age. The clinical significance of decreased bone mineral density is unknown but subsequent studies have shown that the decline in BMD was substantially reversed after discontinuation of Depo Provera. Fracture rates were low and similar for Depo Provera users and non-users. We advise adequate intake of calcium (1000-1500 mg daily) plus Vitamin D (600-1500 mg daily) along with regular exercise to promote bone health.

Women who have had breast cancer should not use hormonal contraception, including DMPA. While there is no

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evidence of increased risk of breast cancer caused by DMPA, it may hasten the growth of a preexistent breast cancer. Depo Provera has not been associated with birth defects. There may be a tendency to low birth weight with associated complications if unintentionally exposed to DMPA in early pregnancy. DMPA does not appear to be associated with invasive cervical cancer or ovarian cancer, and appears to significantly decrease the risk of uterine cancer.

While Depo Provera rarely has interactions with any other medications, it is important to always notify a health care provider at each medical visit that you get Depo Provera injections.

Common Side-Effects

- Side effects on Depo Provera usually decrease or stop within the first few months after starting injections. A change in bleeding patterns is the most common side effect. This may include unscheduled bleeding or spotting, or no menstruation. The frequency and duration of bleeding decreases with increasing duration of use. With prolonged use, up to 75% of women may have no bleeding. This is an expected and reversible phenomenon.
- Weight gain is common in many women using Depo Provera, but it is not consistent for all women. Weight gain has been reported as 3.5 lbs to 13 lbs after three years of use. The median weight gain over 1 year of use has been reported as 3.5 lbs. It has been found to be higher in obese adolescent women.
- Headaches may increase in certain women, but progestins have been reported to reduce the frequency of migraines. History of migraine headache is not a contraindication to Depo-Provera use.
- Mood changes have not been consistent in observational studies although in some women, Depo Provera may cause or worsen depression.
- Dizziness, bloating and decreased libido are other possible side effects.

Depo-Provera Danger Signs

- If you feel pregnant, or think you might be pregnant, take a pregnancy test and schedule an appointment with a clinician.
- Severe headaches
- Heavy bleeding
- Depression worsening or mood changes
- Severe lower abdominal pain
- Prolonged pain, pus, redness, itching, bleeding at the injection site
- Chest pain/shortness of breath
- Vision or speech problems
- Pain in calf or thigh

*****If you experience any of the above danger signs, make a same day appointment with your clinician, go to URGENT CARE at UHS, or a local Emergency Room for evaluation.**

Depo-Provera doesn't protect against sexually transmitted diseases

Use condoms to protect against sexually transmitted infections (HIV, HPV, Chlamydia, gonorrhea, syphilis, and herpes simplex). For more information about safer sex guidelines go to uhs.berkeley.edu, call the clinic nurse at 510-643-7197, or make an appointment with a clinician.

Check our **Website:** uhs.berkeley.edu to learn more about this and other medical concerns.
For **Appointments:** etang.berkeley.edu or call 510-642-2000 For **Advice:** call 510-643-7197