Depo-Provera Contraceptive Injection

Brown Health Services Patient Education Series

What is it?
Depo-Provera (depot medroxyprogesterone acetate or DMPA) is a long-acting progestin (hormone) form of birth control. It is injected into the muscle or under the skin every three months. It is effective 24 hours after your first injection if given in the first 5 days of a normal menstrual period. You must abstain or use a backup method for 7 days if stated any other time in your cycle. You will need to receive your injection promptly every 11 - 13 weeks in order to continue your contraceptive protection.

How does it work?
It inhibits the secretion of hormones that stimulate the ovaries. This prevents ovulation. It also thickens your cervical mucus to prevent the entrance of sperm into the uterus.

How effective is it?
With continuous use, there is less than a 1% chance of experiencing an accidental pregnancy. This rate assumes that no shots are missed. This rate is also comparable to tubal ligation.

What are some reasons to use Depo-Provera?
- You find it difficult to remember to take medicine everyday.
- You need a highly reliable method.
- You would be comfortable with having your menstrual periods stop (also known as amenorrhea).

What are some reasons NOT to use it?
- You are pregnant or suspect you might be pregnant.
- You have abnormal vaginal bleeding that has not been evaluated.
- You have had a stroke or cardiovascular disease.
- You have serious liver disease.
- You are being treated for or have a history of breast cancer.
- You are allergic to Depo-Provera.
- You have a history of stress fractures, amenorrhea, anorexia nervosa, rheumatoid arthritis or chronic glucocorticoid therapy because of the effect on bone mineral density.
- You plan to become pregnant in the next year as there may be a period of 10 - 12 months to return to menstruation.

What are the side effects?
The side effects are usually not serious, but it is important to realize that once Depo-Provera is injected it cannot be reversed or neutralized. You will have to live with the side effects until the medicine wear off over several months.
Menstrual irregularities
Many people will have irregular bleeding or spotting in the first 3 - 6 months of Depo-Provera use. This is the most common reason women decide to discontinue Depo. Eventually, the majority of users will stop menstruating and after 5 years, 80% no longer menstruate. This is not harmful, but some people are uncomfortable with the lack of periods. Others appreciate the decrease in menstrual cramps or heavy bleeding.

Weight gain
Weight gain can occur in users of Depo-Provera, but the amount gained is variable, usually less than 5 pounds. Most users will not gain weight.

Depression
Individual people using Depo-Provera may experience an increase in depression. Studies evaluating its effect upon mood have reported conflicting results with some showing a slight increase in depression and others showing no effect. A history of depression is not a contradiction of Depo use.

Other symptoms
Other symptoms can include headache, dizziness, fatigue, nervousness, a decrease in sex drive, and breast tenderness. They may or may not be caused by Depo-Provera. You can discuss any of these side effects with your provider.

What are other medical considerations?

Delay in ability to become pregnant.
After discontinuing Depo-Provera, you may have a 10 - 12 month delay in return to fertility.

Cancer
Most studies have found no increased risk of breast cancer in Depo-Provera users. One study found a small increase in risk in people who had used Depo within the last five years but no increase with longer use. This could reflect better detection or acceleration in the growth of existing tumors. There is no increased risk of ovarian or cervical cancer. There is a significant reduction in the risk of endometrial cancer.

Decrease bone mineral density (BMD)
The food and Drug Administration (FDA) issued a warning that Depo-Provera (DMPA) should not be used for more than 2 consecutive years because prolonged use may result in significant bone mineral density (BMD) loss. However in September 2008, the American College of Obstetrics and Gynecology (ACOG) issued an opinion stating that while bone loss does occur, recent studies indicate that most users’ BMD will return to normal within 1 - 2 years after discontinuing DMPA. Talk with your health care provider about your individual risk for bone mineral density loss.

Sexually transmitted infections
Depo-Provera does not protect you from sexually transmitted infections (STIs). It is important to discuss STI protection with your partner and to use a condom every time you have sex.

Serious problems are rare with Depo-Provera use. Call your medical provider immediately if you experience any of the following:

- prolonged, very heavy vaginal bleeding
- repeated, very painful headaches
- persistent pain, redness or bleeding at the injection site
- depression
- severe lower abdominal pain