

# INJECTABLE CONTRACEPTIVE



The injectable contraceptive is a progestin-only dose of depot medroxyprogesterone acetate (DMPA), a progestin that mimics the natural progesterone hormone. Two DMPA formulas exist: One is administered into the muscle and one is administered into the tissue layer under the skin. The short-term reversible contraceptive method is effective for about three months. The injectable should be administered by a trained provider every three months to maintain protection from unintended pregnancies. The progestin-only injectable does not contain estrogen.

## MECHANISM OF ACTION

Injectable contraceptives work by inhibiting ovulation. Progestin is slowly released into the blood which prevents the ovaries from releasing an egg and thickens the cervical mucus, inhibiting sperm from entering the uterus. Injectable contraceptives also thin the endometrium lining shortly after the first injection, however, likelihood of fertilization is extremely low due to the main mechanism of action. Injectables do not disrupt an existing pregnancy.

## METHOD EFFECTIVENESS

99.95	IMPLANT
99.85	MALE STERILIZATION
99.8	HORMONAL IUD
99.5	FEMALE STERILIZATION
99.2	COPPER IUD
91	PILL
82	MALE CONDOM
78	WITHDRAWAL
5	NO METHOD

**94%**  
INJECTABLE

**Note:** Method effectiveness is the percent of women NOT experiencing pregnancy within the first year of use of each method.

## It's a common misconception that injectables:

### ...AFFECT BONE HEALTH



**RESEARCH SHOWS** use is associated with decreased bone mass density with loss slowing after the first two years of use. Bone mass density returns after discontinuation.

### ...ARE NOT SAFE FOR YOUTH

**THE WORLD HEALTH ORGANIZATION** deems contraception appropriate for youth and states no medical reason to deny contraception based solely on age.



### ...CAUSE INFERTILITY



**RESEARCH SHOWS** it takes longer to conceive after discontinuation of injectables than other methods. After 18 months post-removal, 90% of users return to fertility.

### ...ARE NOT SAFE FOR BREASTFEEDING

**RESEARCH SHOWS** injectables do not affect milk production and are safe for use six weeks after childbirth.

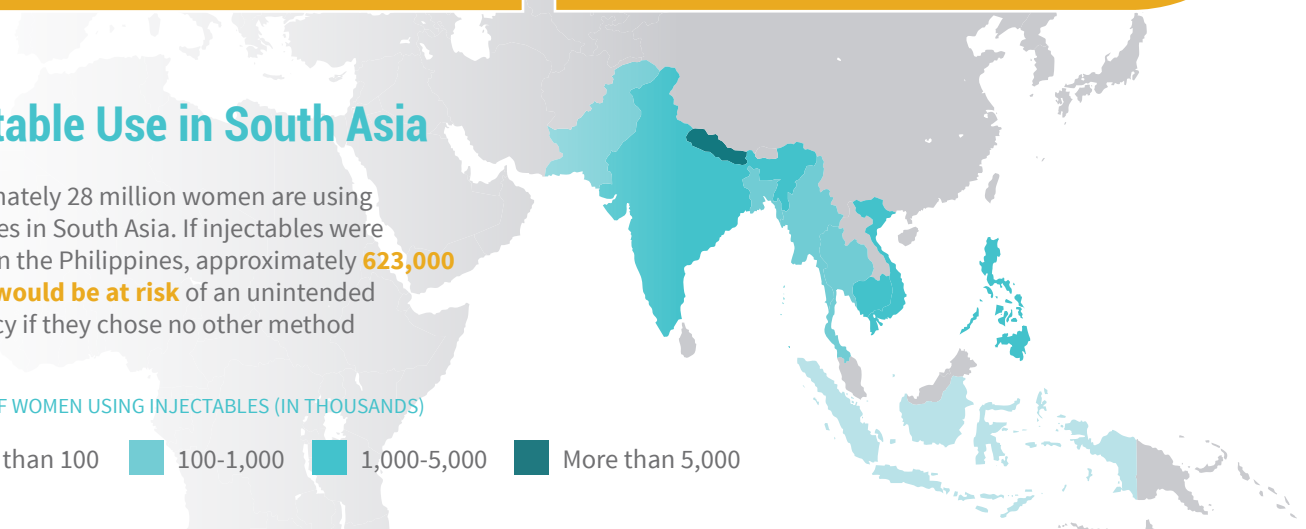


## Injectable Use in South Asia

Approximately 28 million women are using injectables in South Asia. If injectables were banned in the Philippines, approximately **623,000 women would be at risk** of an unintended pregnancy if they chose no other method

NUMBER OF WOMEN USING INJECTABLES (IN THOUSANDS)

Less than 100
  100-1,000
  1,000-5,000
  More than 5,000



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## SOURCES

Daniel R. Mishell Jr., “Pharmacokinetics of Depot Medroxyprogesterone Acetate Contraception,” *Journal of Reproductive Medicine* 41, no. 5 (1996): 381-90.

Roberto Rivera, Irene Jacobson, and David Grimes, “The Mechanism of Action of Hormonal Contraceptives and Intrauterine Contraceptive Devices,” *American Journal of Obstetrics and Gynecology* 181, no. 5 (1999): 1263-69.

World Health Organization (WHO) Department of Reproductive Health and Research (WHO/RHR) and Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs (CCP), Knowledge for Health Project, “Family Planning: A Global Handbook for Providers (2011 update),” (Baltimore and Geneva: USAID, 2011).

Emily Banks, Amy Berrington, and Delphine Casabonne, “Overview of the Relationship Between Use of Progestogen Only Contraceptives and Bone Mineral Density,” *BJOG: An International Journal of Obstetrics & Gynaecology* 108, no. 12 (2001): 1214-21; and Abbey B. Berenson et al., “Effects of Hormonal Contraception on Bone Mineral Density After 24 Months of Use,” *Obstetrics & Gynecology* 103, no. 5 (2004): 899-906.

M. Kathleen Clark et al., “Bone Mineral Density Loss and Recovery During 48 Months in First-time Users of Depot Medroxyprogesterone Acetate,” *Fertility and Sterility* 86, no. 5 (2006): 1466-74.

Mishell, “Pharmacokinetics of Depot Medroxyprogesterone Acetate Contraception.”

Amy Stoddard, Colleen McNicholas, and Jeffrey Peipert, “Efficacy and Safety of Long-Acting Reversible Contraception,” *Drugs* 71, no. 8 (2011): 969-80.

WHO, *Medical Eligibility for Contraception Use, 5th Edition* (Geneva: WHO, 2015).

### Method Effectiveness

**Note:** Estimates are based on a typical couple’s use of the method. Estimates for perfect use of the method are higher.

**Source:** Robert Hatcher et al., ed. *Contraceptive Technology*, 20th edition (New York: Ardent Media, 2011).

### Number of Women Using Injectables

**Sources:** Cambodia Demographic and Health Survey (DHS) 2014, Indonesia DHS 2012, Myanmar DHS 2015-16, Philippines DHS 2013, Thailand DHS 1987, Timor-Leste DHS 2009-10, Vietnam DHS 2002, Bangladesh DHS 2011, India DHS 2005-06, Maldives DHS 2009, Nepal DHS 2011, and Pakistan DHS 2012-13.