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2. Nexplanon

Nexplanon

Generic name: [etonogestrel](#) (implant) [e-toe-noe-JES-trel]

Drug classes: [Contraceptives](#), [Progestins](#)

Medically reviewed by [Melisa Puckey, BPharm](#). Last updated on Mar 26, 2024.

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What is Nexplanon?

Nexplanon (etonogestrel implant) is a long-term, reversible [birth control](#) for women. It is a contraceptive implant that is a flexible, thin plastic rod that is about the length of a matchstick (4cm by 2mm), which is placed under the skin on the inner side of the upper arm by your doctor or other healthcare provider.

Once you have it placed in your arm you don't need to think about contraception for the next three years, you don't need to worry about forgetting to take it, whether you have used it correctly and there is no need to interrupt sex to organise contraception.

Nexplanon can be removed at any time and your fertility will return to normal.

How does Nexplanon work?

The rod contains a hormone called etonogestrel that slowly and steadily releases to prevent pregnancy. It does this by stopping the release of an egg from your ovary, thinning the lining of your uterus and thickening mucus in your cervix.

The implant is made of a material that can be seen on X-rays and sometimes your health provider may use an X-ray to help locate it for removal.

How is the Nexplanon implant used?

Nexplanon is inserted through a needle (under local anesthesia) into the skin of your upper arm, just inside and above the elbow. After the implant is inserted, your arm will be covered with 2 bandages. Remove the top bandage after 24 hours, but leave the smaller bandage on for 3 to 5 days. Keep the area clean and dry.

The timing of when you receive the Nexplanon implant depends on whether you were using birth control before, and what type it was. For more information about how quickly it works as a contraceptive see dosing information below.

You should be able to feel the implant under your skin. Tell your doctor if you cannot feel the implant at any time while it is in place.

The Nexplanon implant can remain in place for up to 3 years. If the implant is placed correctly, you will not need to use back-up birth control. Follow your doctor's instructions.

You may have irregular and unpredictable periods while using Nexplanon. Tell your doctor if your periods are very heavy or long-lasting, or if you miss a period (you may be pregnant).

If you need major surgery or will be on long-term bed rest, or if you need medical tests, may need to have your Nexplanon implant removed for a short time. Any doctor or surgeon who treats you should know that you have a Nexplanon implant.

Have regular physical exams and mammograms, and self-examine your breasts for lumps on a monthly basis while using this medicine.

Call your doctor at once if it feels like the Nexplanon implant may be bent or broken while it is in your arm.

How do they remove Nexplanon?

To remove the device, your health care provider will inject a local anesthetic in your arm beneath the implant. They will make a small incision in your skin and will push the implant toward the incision until the tip is visible and can be grasped with forceps.

Your health care provider will then pull out the implant, close the incision and apply a pressure bandage. Contraceptive implant removal typically takes less than five minutes.

If you choose, a new device can be implanted as soon as the original device is removed. Be prepared to use another type of contraception right away if you don't have a new device inserted.

For information on 'Problems with Insertion and Removal' see the section below called 'What are the possible risks of using Nexplanon?'

How well does Nexplanon work?

If your Nexplanon implant is inserted correctly, it is one of the most effective types of birth control. Your chance of getting pregnant is very low, less than 1 pregnancy per 100 women.

This medicine may be less effective in overweight women.

Can you get pregnant using Nexplanon?

Yes, you can become pregnant using Nexplanon, but it is very rare. If you do become pregnant it is important to see your healthcare provider to make sure it is not an ectopic pregnancy, which is when the pregnancy is outside of the womb. Women on Nexplanon have a slightly higher risk of ectopic pregnancy compared to women not using birth control.

It is important to have the implant removed if you become pregnant and plan on maintaining the pregnancy. This medicine is not likely to cause birth defects if you become pregnant while using it.

Dosing information

How long does Nexplanon last?

Nexplanon lasts for 3 years and at the end of the 3 years your implant must be removed. If you still require contraception

a new implant may be inserted at the time of removal. You can have Nexplanon removed at any time and you will return to your normal fertility.

 [Detailed Nexplanon dosage information](#)

How long does it take for Nexplanon to work?

How long before Nexplanon starts to working as a contraceptive depends on if you have previously been using no contraception, or another form of contraception or whether you have recently had a baby, miscarriage or abortion.

No previous contraception

- If you get Nexplanon inserted in the first 5 days of your period then you are protected from pregnancy right away and back-up contraception is not needed.
- If you get Nexplanon inserted at any other time of your period you will need to use a barrier form contraception for the first week of using Nexplanon.

Previous combination hormonal contraception (eg combined hormonal pills, vaginal ring or transdermal patch)

- If you have Nexplanon inserted on the day after the last active pill, or on the day of removal of the vaginal ring or transdermal patch, then you are protected from pregnancy right away and you won't need a back-up contraception.
- If you have Nexplanon inserted after the above time you will need to use a barrier method until 7 days after insertion, and if unprotected intercourse has already occurred, pregnancy should be excluded.

Previous progestin-only contraceptives

- Injectable progestin contraceptives. The Nexplanon should be inserted on the day that the next injection is due, then you are protected from pregnancy right away and you don't need to use any extra contraception.
- Progestin mini pill. Nexplanon should be inserted within 24 hours after taking the last tablet, so you are protected from pregnancy right away and you don't need to use any extra contraception.
- Progestin contraceptive implant or intrauterine device (IUD). If Nexplanon is inserted on the same day the previous contraceptive implant or IUD is removed you will be protected from pregnancy right away and you don't need to use any extra contraception.
- If you have Nexplanon insert after the above times you will need to use a barrier method of contraception until 7 days after insertion, and if unprotected intercourse has already occurred, pregnancy should be excluded.

Previous miscarriage or abortion

- First Trimester: Nexplanon should be inserted within 5 days following a first trimester abortion or miscarriage, to be protected from pregnancy right away and for back-up contraception not to be needed.
- Second Trimester: If Nexplanon is inserted between 21 to 28 days following second trimester abortion or miscarriage, you will be protected from pregnancy right away and back-up contraception will not be needed.
- If Nexplanon is inserted after the above times you will need to use a barrier method of contraception until 7 days after insertion, and if unprotected intercourse has already occurred, pregnancy should be excluded.

After giving birth

- Not Breastfeeding: When Nexplanon is inserted between 21 to 28 days postpartum then back-up contraception is not

necessary. If inserted after this time then you should use a barrier method of contraception until 7 days after insertion. If intercourse has already occurred, pregnancy should be excluded.

- **Breastfeeding:** If you are breastfeeding you should not have Nexplanon inserted until 4 weeks after you have given birth. You should use a barrier method until 7 days after insertion. If unprotected intercourse has already occurred, pregnancy should be excluded.

How soon can you get pregnant after Nexplanon removal?

Your fertility will return to normal after removal of Nexplanon, with women in studies becoming pregnant 7 to 14 days after removal. If you do not want to become pregnant then it is important to consider having another Nexplanon inserted at the same time as removal or starting another form of birth control.

What happens if I miss a dose?

Nexplanon is an implant that lasts for 3 years. It is not intended for contraceptive use after 3 years and should be replaced with a new one if you want to continue having contraceptive cover.

You should keep a record of when you had Nexplanon inserted and just before the end of the third year make an appointment for removal of the implant. You may have your Nexplanon replaced with a new one at the same appointment if you want to continue with contraception.

Warnings

Do not use Nexplanon if you are:

- pregnant or
- if you have had a baby less than 4 weeks ago and you are breastfeeding or
- if you have had a baby less than 3 weeks ago and you are not breastfeeding

You should not use a Nexplanon implant if you have: undiagnosed vaginal bleeding, liver disease or liver cancer, if you will be having major surgery, or if you have ever had a heart attack, a stroke, a blood clot, or cancer of the breast, uterus/cervix, or vagina.

Using a Nexplanon implant can increase your risk of blood clots, stroke, or heart attack.

Smoking can greatly increase your risk of blood clots, stroke, or heart attack. You should not smoke while using a Nexplanon implant.

Important information

Nexplanon will not protect you from sexually transmitted diseases--including HIV and AIDS. Using a condom is the only way to protect yourself from these diseases.

Using a Nexplanon implant can increase your risk of blood clots, stroke, or heart attack. You are even more at risk if you have high blood pressure, diabetes, high cholesterol, or if you are overweight. Your risk of stroke or blood clot is highest during your first year of using this medicine.

Smoking can greatly increase your risk of blood clots, stroke, or heart attack. Your risk increases the older you are and the more you smoke.

Do not use it if you are pregnant. If you become pregnant, the Nexplanon implant should be removed if you plan to continue the pregnancy.

You may need to have a negative pregnancy test before receiving the implant.

You should not use hormonal birth control if you have:

- a history of heart attack, stroke, or blood clot
- a history of hormone-related cancer, or cancer of the breast, uterus/cervix, or vagina
- unusual vaginal bleeding that has not been checked by a doctor or
- liver disease or liver cancer.

To make sure Nexplanon is safe for you, tell your doctor if you have ever had:

- diabetes
- high cholesterol or triglycerides
- high blood pressure
- headaches
- gallbladder disease
- kidney disease
- depression or
- an allergy to numbing medicines.

Nexplanon may not be as effective in women who are overweight.

The Nexplanon implant should not be used in women younger than 18 years old.

Etonogestrel can pass into breast milk. Tell your doctor if you are breast-feeding. See breastfeeding information below for more information on Nexplanon and breastfeeding .

What are the side effects of Nexplanon?

What are the most common side effects I can expect while using Nexplanon?

Changes in Menstrual Bleeding Patterns (menstrual periods)

- The most common side effect of Nexplanon is a change in your normal menstrual bleeding pattern. In studies, one out of ten women stopped using the implant because of an unfavorable change in their bleeding pattern.
- You may experience longer or shorter bleeding during your periods or have no bleeding at all. The time between periods may vary, and in between periods you may also have spotting.

Tell your healthcare provider right away if:

- You think you may be pregnant
- Your menstrual bleeding is heavy and prolonged

Besides changes in menstrual bleeding patterns, other frequent side effects that caused women to stop using the implant include:

- Mood swings
- Weight gain
- Headache
- Acne
- Depressed mood

Other common side effects include:

- Headache
- Vaginitis (inflammation of the vagina)
- Weight gain
- Acne
- Breast pain
- Viral infections such as sore throats or flu-like symptoms
- Stomach pain
- Painful periods
- Mood swings, nervousness, or depressed mood
- Back pain
- Nausea
- Dizziness
- Pain
- Pain at the site of insertion

Implants have been reported to be found in a blood vessel, including a blood vessel in the lung which can be associated with shortness of breath, cough and/or the coughing up of blood or blood-stained mucus.

This is not a complete list of possible side effects. For more information, ask your healthcare provider for advice about any side effects that concern you. You may report side effects to the FDA at 1-800-FDA-1088.

 [Nexplanon side effects](#) (more detail)

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What are the possible risks of using Nexplanon?

Problems with Insertion and Removal

The implant may not be placed in your arm at all due to a failed insertion. If this happens, you may become pregnant. Immediately after insertion, and with help from your healthcare provider, you should be able to feel the implant under your skin. If you can't feel the implant, tell your healthcare provider.

Location and removal of the implant may be difficult or impossible because the implant is not where it should be. Special procedures, including surgery in the hospital, may be needed to remove the implant. If the implant is not removed, then the effects of Nexplanon will continue for a longer period of time.

Implants have been found in the pulmonary artery (a blood vessel in the lung). If the implant cannot be found in the arm, your healthcare provider may use x-rays or other imaging methods on the chest. If the implant is located in the chest, surgery may be needed.

Other problems related to insertion and removal are:

- Pain, irritation, swelling, or bruising at the insertion site
- Numbness and tingling at the insertion site
- Scarring, including a thick scar called a keloid around the insertion site
- Infection
- Scar tissue may form around the implant making it difficult to remove
- The implant may come out by itself. You may become pregnant if the implant comes out by itself. Use a back-up birth control method and call your healthcare provider right away if the implant comes out.
- The need for surgery in the hospital to remove the implant
- Injury to nerves or blood vessels in your arm

- The implant breaks making removal difficult

Ectopic Pregnancy

If you become pregnant while using Nexplanon, you have a slightly higher chance that the pregnancy will be ectopic (occurring outside the womb) than do women who do not use birth control. Unusual vaginal bleeding or lower stomach (abdominal) pain may be a sign of ectopic pregnancy. Ectopic pregnancy is a medical emergency that often requires surgery. Ectopic pregnancies can cause serious internal bleeding, infertility, and even death. Call your healthcare provider right away if you think you are pregnant or have unexplained lower stomach (abdominal) pain.

Ovarian Cysts

Cysts may develop on the ovaries and usually go away without treatment but sometimes surgery is needed to remove them.

Breast Cancer

It is not known whether Nexplanon use changes a woman's risk for breast cancer. If you have breast cancer now, or have had it in the past, do not use this medicine because some breast cancers are sensitive to hormones.

Serious Blood Clots

Nexplanon may increase your chance of serious blood clots, especially if you have other risk factors such as smoking. It is possible to die from a problem caused by a blood clot, such as a heart attack or a stroke.

Some examples of serious blood clots are blood clots in the:

- Legs (deep vein thrombosis)
- Lungs (pulmonary embolism)
- Brain (stroke)
- Heart (heart attack)
- Eyes (total or partial blindness)

The risk of serious blood clots is increased in women who smoke. If you smoke and want to use Nexplanon you should quit smoking. Talk to your healthcare provider as they may be able offer you solutions to help you quit.

Tell your healthcare provider at least 4 weeks before if you are going to have surgery or will need to be on bed rest. You have an increased chance of getting blood clots during surgery or bed rest.

Other Risks

A few women who use birth control that contains hormones may get:

- High blood pressure
- Gallbladder problems
- Rare cancerous or noncancerous liver tumors

Broken or Bent Implant

Can Nexplanon break in my arm? Yes, the implant can break or bend due to external forces (e.g., manipulation of the

implant or contact sports). A broken implant may move from the insertion site. If you feel that the implant may have broken or bent while in your arm, contact your healthcare provider.

When should I call my healthcare provider?

Call your healthcare provider right away if you have:

- Pain in your lower leg that does not go away
- Severe chest pain or heaviness in the chest
- Sudden shortness of breath, sharp chest pain, or coughing blood
- Symptoms of a severe allergic reaction, such as swollen face, tongue or throat; trouble breathing or swallowing
- Sudden severe headache unlike your usual headaches
- Weakness or numbness in your arm, leg, or trouble speaking
- Sudden partial or complete blindness
- Yellowing of your skin or whites of your eyes, especially with fever, tiredness, loss of appetite, dark colored urine, or light-colored bowel movements
- Severe pain, swelling, or tenderness in the lower stomach (abdomen)
- Lump in your breast
- Problems sleeping, lack of energy, tiredness, or you feel very sad
- Heavy menstrual bleeding

Interactions

Tell your healthcare provider about all the medicines you take, including prescription and non-prescription medicines, vitamins and herbal supplements. Certain medicines may make Nexplanon less effective, including:

- aprepitant
- barbiturates
- bosentan
- carbamazepine
- felbamate
- griseofulvin
- oxcarbazepine
- phenytoin
- rifampin
- St. John's wort
- topiramate
- HIV medicines
- Hepatitis C Virus medicines

Ask your healthcare provider if you are not sure if your medicine is one listed above.

If you are taking medicines or herbal products that might make Nexplanon less effective, you and your healthcare provider may decide to leave Nexplanon in place; in that case, an additional non-hormonal contraceptive should be used. Because the effect of another medicine on Nexplanon may last up to 28 days after stopping the medicine, it is necessary to use the additional non-hormonal contraceptive for that long.

When you are using Nexplanon, tell all of your healthcare providers that you have this medicine in place in your arm.

 [Nexplanon drug interactions](#) (more detail)

Does Nexplanon interact with my other drugs?

Enter medications to view a detailed interaction report using our [Drug Interaction Checker](#).

Nexplanon

+

Enter a drug name

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Pregnancy and breastfeeding

Pregnancy: You should not use Nexplanon if you are pregnant. You may need to have a negative pregnancy test before Nexplanon is inserted. If you become pregnant while using Nexplanon you should have it removed if you plan to continue with the pregnancy.

Breastfeeding: If you are breastfeeding your child, you may use Nexplanon if 4 weeks have passed since you had your baby. A small amount of the hormone contained in Nexplanon passes into your breast milk. The health of breast-fed children whose mothers were using the implant has been studied up to 3 years of age in a small number of children. No effects on the growth and development of the children were seen.

Hormonal contraceptives, including etonogestrel, can sometimes reduce milk production in breastfeeding mothers. This is less likely to occur once breastfeeding is well-established; however, it can occur at any time in some women.

If you are breastfeeding and want to use Nexplanon, you should talk with your healthcare provider who can provide more information on hormonal or non-hormonal contraceptives.

Ingredients

Active ingredient : Etonogestrel

Inactive ingredients: Barium sulfate, magnesium stearate, ethylene-vinyl acetate copolymer (28% vinyl acetate)

Manufactured by: N.V. Organon, Oss, The Netherlands, a subsidiary of Organon & Co., Jersey City, NJ 07302, USA

Popular FAQ

What are my birth control options and how effective are they?



More FAQ

- [What is the difference between Nexplanon and Implanon?](#)

References

1. Food and Drug Administration (FDA) Nexplanon Product Label
2. Graesslin O, Korver T. The contraceptive efficacy of Implanon: a review of clinical trials and marketing experience. Eur J Contracept Reprod Health Care. 2008 Jun;13 Suppl 1:4-12. doi: 10.1080/13625180801942754. PMID: 18330813.

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 Risk data available

CSA Schedule*

N/A Not a controlled drug



Approval History

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