



Clinical Champion Update

Date: 2/29/24

Subject: Contraception “Pearls” and Resources

I wanted to share a few great resources that help address some common clinical scenarios pertaining to contraception. I have found these to be life-savers in my practice so far!

Patient Scenario 1:

Q: “I am ready to start my new birth control method but I had unprotected intercourse last week. What do I do?”

A: Reproductive Health Access Project (RHAP) has a very helpful Quick Start Algorithm broken down by method [here](#).

The quick answer is that for the pill, patch, ring, injection, and implant, the amount of hormones is so small that it would likely not cause harm for a potential pregnancy. So if the pregnancy test that day is negative but patient is outside the time frame for emergency contraception, she/they could still choose to start the method, and repeat the pregnancy test in 2 weeks. For IUDs, it is a bit more complicated- refer to the algorithm above. But in most cases, **the benefits of starting a contraceptive likely exceed risk of early pregnancy**, and it is best practice to start contraception ASAP to prevent future unplanned pregnancies.

Patient Scenario 2:

Q: “I love my Nexplanon but the spotting is driving me crazy. What can I do?”

A: Ideally set expectations before placing the implant- tell patients it is **very** common to get breakthrough bleeding, but often this is the worst when it is first inserted, and tends to get better within the first few months. Sometimes people have spotting until the implant is removed, and this is normal, too. The good news is there are ways to manage the bleeding: a course of high-dose NSAIDS (ex: ibuprofen 600 TID x 5 days) or a monophasic cOCP x 3 months. **The Nexplanon is >99% effective in preventing pregnancy** and is a great method for many patients; please continue to encourage it as part of your contraception counseling, and try management options for breakthrough bleeding before removal.

Patient Scenario 3:

Q: “I feel overwhelmed by the amount of options for birth control. Which one is the best?”

RHAP has a really nice [chart](#)! Start by reviewing this with patients. It even comes in multiple languages. RHAP also make user [guides](#) for each method. Yes, the LARCs (IUDs & Implant) are the most effective in preventing pregnancy. But **the best birth control is the one that the patient is going to be most comfortable using**. This is a high individual choice.

Contraception doesn't have to be complicated. Let's make it fun and easy for our patients too! Feel free to send questions my way.

-Rachel Wasserman, FNP, Sexual & Reproductive Health Clinical Champion