



LARC initiation

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case

- Nedrett is a 17 year old who comes after school for emergency contraception





Absolute contraindications

- hormonal
 - current breast cancer
- IUD
 - known current infection
 - gynae malignancies in some circumstances

Exception asymptomatic chlamydia, relatively strongly contraindicated

Medical eligibility criteria

MEC 1

no restriction on use

MEC 2

benefits generally > disadvantages

MEC 3

risks usually > advantages, may require specialist input

MEC 4

absolute contraindication

Excluding pregnancy

- no sex since menstruation
- reliable contraception
- day 1-5
- <3/52 post partum
- ≤ 5/7 post termination or miscarriage
- negative PT, 3/52 no sex or 100% condoms



Pregnancy not excluded

- IUD: no, unless emergency copper
 - interval contraception
- Quick Start; ideal characteristics
 - rapid onset
 - no teratogenesis
 - menstruation expected
 - reversible



Quick start

The contraceptive injection or DMPA injection can be started without excluding pregnancy

exception: 5/7 wait after ulipristal acetate



Quick start: advantages

- fewer unplanned pregnancies
- a higher chance the woman will initiate the method
- minimised chance of forgotten instructions eg. come back day 1-5



Quick start: disadvantages

- pregnancy cannot always be excluded
- the woman may not realise she's pregnant
- urban myth, bleeding=contraception and not pregnant



Quick start for implant and injection

- ?pregnancy test now
- known teratogenic effects
- condoms or abstain for 7 days
- pregnancy test 4/52 weeks
- FPV protocol and consent forms on our website



Post partum

- IUD
 - within 48 hours post partum or $\geq 4/52$
 - higher risk of perforation, particularly if breast feeding
- implant
 - no contraindication
- DMPA
 - generally safe



Tricky post partum

- Jane is breastfeeding her 3/12 month old baby around 80% of the time. She is amenorrhoeic and uses withdrawal for contraception,
- she'd like to have an IUD
- her partner won't use condoms



Post abortion

- surgical, first or second trimester
 - immediate use of any method
 - IUD, MEC 2 for second trimester
- medical
 - implant (DMPA also) initiated with mifepristone
 - IUD, when the abortion is complete
 - other methods, day after misoprostol



Conclusion

- very few contraindications to LARC initiation
- Quick start is preferred for the implant and injection
- sperm live a long time!
- must exclude pregnancy to insert an IUD unless using a copper IUD for emergency contraception