REASONS FOR EARLY DISCONTINUATION OF THE CONTRACEPTIVE IMPLANT IN ADOLESCENTS

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The contraceptive implant is a hormonal implant that prevents pregnancy, and is inserted underneath the skin of the upper arm. It can last for up to three years. Teenagers and young women are at especially high risk of unplanned pregnancy, and the implant can be a good contraceptive method for women in this age group. However, in some studies we have found that young women are more likely to stop using this method before completing three years compared to older women. In this qualitative study, we interviewed young women between the ages of 13 and 24, who had chosen to have the implant removed within the first six months after it was placed. The interview guide focused on questions about what the young women understood from counseling, what they expected it to be like, what it was really like to have the implant, and how they decided to have it removed.

We learned that most of the participants had their implants removed after experiencing significant side effects that interfered with their daily lives and their relationships with others. Many of the participants were aware of the possibility of the side effects they experienced, but were hopeful that those effects would not happen to her or would be mild. Many participants described attempts to cope with or manage side effects, and were frustrated and disappointed that this method did not work for them. Despite their negative experiences, the participants were able to recognize that the method may work for others, with many reporting enthusiastically recommending the method to friends and family. All but two participants reported a continued need for contraception after removal, but only half started a new contraceptive method on the day of their implant removal. Those who did not start a new method despite need for contraception reported wanting to give their bodies a break, to recover from the hormonal effects experienced.

These themes suggest areas of improvement in ongoing support for dealing with side effects, decision making for removal, and choice of new contraception. The negative experiences with the implant led to many participants declining to start a new method, and being at risk of unintended pregnancy. Improved support throughout the process may help to decrease overall negative perceptions of the experience, which could lead to higher likelihood of starting a new contraceptive method. This is important in this group of young healthy women who have many years of need for contraception ahead of them.