

Live Well to
Learn Well

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health.cornell.edu

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Appointments:
Monday–Saturday

Check web for hours,
services, providers,
and appointment
information

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What is it?

Depo-Provera (medroxyprogesterone acetate) is a birth control injection or “shot” given every 3 months (injection window: 10-14 weeks). It is made of synthetic progesterone and works by inhibiting monthly ovulation. Depo-Provera also causes the cervical mucous to thicken, making sperm less able to enter the uterus.

Depo-Provera is an extremely effective contraceptive option – more effective than birth control pills, largely due to the smaller risk of forgetting this method. When used perfectly and all shots are received on time, it is more than 99% effective; however in more typical use it is about 96% effective.

Is Depo-Provera right for you?

Advantages

Many people choose Depo-Provera because it:

- doesn't require you to remember a pill every day
- decreases and in some cases eliminates menstrual bleeding
- can treat symptoms of painful periods and endometriosis
- does not contain estrogen and is therefore safe for women with medical contraindications to using estrogen
- is reversible

Disadvantages

Some individuals who use Depo-Provera have been concerned that it:

- requires a medical visit every 3 months to receive an injection
- does not offer any protection against sexually transmitted infections (STI) such as HPV, chlamydia, or HIV
- can cause irregular or unpredictable bleeding or “spotting” in the first 3-6 months of use
- can cause weight gain
- is known to cause a reversible decrease in bone density over time
- is not rapidly reversible
- can sometimes cause an increase in depressed mood

Side effects

Any medication can have side effects. Depo-Provera often causes irregular menstrual bleeding. Most users will experience a change in their menstrual cycles that is either irregular and unpredictable bleeding, or lack of bleeding entirely. During the first year, about 50% of users stop having periods. The menstrual effects



Depo-Provera shots are taken every 3 months, which can be easier to remember than a daily birth control pill.

of Depo may linger for up to 18 months after stopping use.

Depo-Provera has been shown to decrease bone mineral density (BMD) during use. It appears BMD loss is reversible after stopping Depo. It is not clear if there is a risk for an increase in bone fractures after menopause among those who used Depo. For this reason, Depo is not recommended for use longer than 2 years unless no other contraceptive method is acceptable. Individuals who use Depo should make an effort to decrease their risk factors for osteoporosis by not smoking, limiting alcohol use, getting at least 1,200 mg of calcium in their diet every day (3-4 servings of a calcium containing food or drink), and having regular weight bearing exercise.

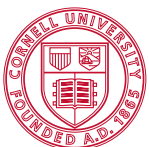
Other less common side effects of Depo are weight gain (about 5 pounds in one year), acne, breast tenderness, headaches, and mood changes.

Contraindications

Individuals with the following conditions should not use Depo:

- active hepatitis or liver disease
- history of heart attack or stroke
- unexplained vaginal bleeding
- breast cancer
- those desiring pregnancy within the next 18 months

Please note: The Depo package insert lists other conditions, such as blood clots, as contraindications to its use, because those are contraindications to most hormonal contraceptives (due to estrogen content).



However the World Health Organization reports that progesterone-only methods are safe for individuals with such conditions to use, and therefore we do not list them as contraindications.

Drug interactions

Cytadren (a medication used for Cushings syndrome), Fosamprenavir (for HIV treatment), and Efavirenz and Rifampicin therapy (used to treat HIV and tuberculosis) interact with Depo. Antibiotics and other medicines have shown no interaction.

How to get a prescription for Depo

Schedule a contraception appointment at Cornell Health by calling 607-255-5155 or logging in to myCornellHealth. During your appointment, a sexual health nurse or clinician will talk with you more about Depo and other contraceptive options.

How to use Depo

It is best to get your first Depo shot within 7 days of the start of your period. If you are currently using another hormonal method, get your first shot during the placebo or ring/patch/pill free week. Return every 12 weeks for another shot. You can receive shots at Cornell Health or make arrangements with another medical provider if you will not be near campus when a shot is due.

If it has been more than 14 weeks since your last injection you are at risk for getting pregnant and should use another method of birth control until you receive another shot. You may want to consider emergency contraception (EC) for unprotected sexual activity if you are late getting your shot.

Additional considerations

No hormonal method of birth control protects against sexually transmitted infections (STIs), including HIV. Barrier methods – external or internal condoms, or latex squares – are the best way to protect against STIs. Always use a barrier in addition to Depo if you and/or your partner have had other sex partners. Condoms, lubricants, and other sexual health products can be purchased at the Cornell Health pharmacy.

For more information

The clinicians and sexual health nurses at Cornell Health can talk with you about any concerns you may have about Depo-Provera, other birth control methods, and/or reducing risks of STIs and/or testing. Request an appointment via phone (607-255-5155) or online via myCornellHealth.

Online, visit: depoprovera.com

Note: This fact sheet is not intended to replace the package insert. Please refer to the package insert for more comprehensive information.