



# **Breakthrough Bleeding on the Etonogestrel Implant (Nexplanon)**

## **Management and Treatment Options**



### **FAST FACTS:**

- Changes in menstrual bleeding are expected with use of the etonogestrel (ENG) implant.
- Bleeding pattern experienced during the initial phase generally predicts future patterns of bleeding.
- Before prescribing – give anticipatory guidance regarding irregular bleeding.
- Remind users that changes in vaginal bleeding are not indicative of decreased effectiveness of their method and are not harmful to their health.
- **Please note, there are no comparisons of the effectiveness of the different treatment options for unscheduled bleeding, so the optimal treatment strategy is not known.**

## ASSESSMENT

# ELICIT DETAILED DESCRIPTION OF BLEEDING PATTERN

Bleeding pattern before and during ENG implant use, bleeding days/month, medication history, other associated symptoms

**BLEEDING IS BOTHERSOME**

**BLEEDING IS TOLERABLE  
OR INSIGNIFICANT**

## MANAGEMENT

**RULE OUT PREGNANCY AND INFECTION,  
CERVICITIS, PID, ETC. BASED  
ON SYMPTOMS**

**REASSURANCE AND GUIDANCE  
ON WHEN TO RETURN TO CLINIC**

Pelvic pain, soaking a pad/tampon every hour, abdominal pain, nausea, vomiting, vaginal discharge or other abnormal vaginal symptoms

**POSITIVE FOR INFECTION  
OR PREGNANCY?  
MANAGE APPROPRIATELY**

**NEGATIVE FOR PREGNANCY  
AND INFECTION?  
OFFER TREATMENT OPTIONS**

## TREATMENT OPTIONS

**NAPROXEN  
500 MG BID  
X 5 DAYS**

**COMBINED ORAL  
CONTRACEPTIVE PILLS\*\*  
ONE PILL PACK**

Ethinyl estradiol .03 mg  
Levonorgestrel .15 mg  
(ex. Levora or Nordette)  
OR  
Ethinyl estradiol .035 mg  
Norgestimate .25 mg  
(ex. Sprintec, Ortho-Cyclen)

**NORETHINDRONE  
ACETATE**

If contraindicated or  
patient prefers to  
avoid estrogen:  
5 mg once a day x 30 days

**ENG IMPLANT  
REMOVAL**

If patient does not wish  
to pursue treatment of  
bleeding OR if treatment  
of bleeding fails:  
Remove ENG implant and  
counsel on alternative  
methods of contraception

**IF SUCCESSFUL,  
REASSURANCE AND  
GUIDANCE AS ABOVE**

**IF UNSUCCESSFUL, OR IF  
BREAKTHROUGH BLEEDING  
RECURS, OFFER REMOVAL**

## PATIENT – CENTERED DECISION MAKING

Alternative methods of birth control can be discussed at any point in the algorithm based on the wishes of the patient.

**The implant should be removed at any time the user requests.**

\*\*If estrogen is contraindicated, do not start combined oral contraceptive pills.

For more provider resources, visit  
**[NationwideChildrens.org/BC4Teens](https://www.NationwideChildrens.org/BC4Teens)**



*When your child needs a hospital, everything matters.*