

## Viral TikTok raises concerns about a commonly prescribed contraceptive. What you need to know

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A <u>viral TikTok video</u> by online influencer Morgan Roos has panicked some users of a commonly prescribed injectable contraceptive called <u>Depo-Provera</u>. In the video, Roos said she was shocked to learn the contraceptive she had been using for 10 years was only recommended for a maximum of two years.

Roos said she was only told this when she switched to a female doctor. Many viewers commented that they too had been using Depo-Provera for years—some for as long as 17 years without any guidance from health care professionals, male or female, that they should have stopped after just two. But is there really cause for panic?

Depo-Provera is a progestogen-only injectable contraceptive and is administered every 13 weeks, meaning users don't need to remember to take a pill every day. When used as directed, it is <u>99.8% effective</u> at preventing pregnancy.

It acts by preventing ovulation, the release of an egg from an ovary, and also makes the environment where the sperm reaches the egg less hospitable. However, it is not just used for contraception. Some women use it to reduce heavy periods or to reduce the pain of <u>endometriosis</u>.

While Roos did not explain why her new doctor had advised that she should have stopped Depo-Provera after two years, there are a few potential reasons why.

## **Potential harms**

Depo-Provera has been associated with a reduction in bone mineral density, meaning that users may develop weak and brittle bones. This risk is deemed to mostly be reversed once Depo-Provera is stopped. However, some loss may not be replaced.



Factors such as the age of the person using the medication may affect their risk levels. Adolescents under 18 are advised to try other contraceptive methods first as they are particularly vulnerable given that their bones are still developing and growing. Also, users over 50 are encouraged to use another form of contraception.

Other potential risks associated with using Depo-Provera include a delayed return to fertility, by up to one year, meaning it can be hard to get pregnant straight after stopping the contraceptive. Depo-Provera has also been <u>associated</u> with <u>weight gain</u>, acne, mood changes and decreased sex drive.

In the US, the Food and Drug Administration and the drug's maker, Pfizer, suggest Depo-Provera "should not be used as a long-term birth control method (that is, longer than two years) unless other birth control methods are considered inadequate."

In the UK, the Faculty of Sexual and Reproductive Health, the body that sets standards and offers guidance on prescribing contraceptives, issues slightly different advice. Its guidance for progestogen-only injectables recommends users be reviewed every two years to discuss the benefits and risks of continuing to use the medication.

So, regardless of which country you are in, it is always wise to ask your doctor to review your Depo-Provera—at least every two years—to determine if it is still appropriate for you.

For those who would still like to use Depo-Provera, strategies to reduce the risks of lessened bone <u>mineral density</u> include taking a calcium and vitamin D supplement, as well as doing weight-bearing exercises regularly.

And for those for whom Depo-Provera is not suitable, other



<u>contraceptive methods</u> are available and include oral birth control pills, vaginal rings, barrier methods (such as condoms) and intrauterine devices. Bear in mind that barrier methods are the only contraceptive method that also protects against sexually transmitted diseases.

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