

Live Well to

Learn Well

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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 12 weeks. It is made of synthetic progesterone and works by inhibiting monthly ovulation. Depo-Provera also causes the cervical mucus to thicken, making sperm less able to enter the uterus.

Depo-Provera is an extremely effective contraceptive option. In the first year of use, the probability of pregnancy is only 0.3% when shots are given on time. The effectiveness of Depo-Provera is greater than that of birth control pills largely due to a smaller risk of forgetting to use the method.

## Is Depo-Provera right for you?

### Advantages

Many women choose Depo-Provera because it:

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

### Disadvantages

Some women who have used Depo-Provera have been concerned that it:

- requires them to go to a medical office every 12 weeks 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 months of use
- can cause weight gain
- is known to cause a reversible decrease in bone density over time
- is not rapidly reversible

## Side effects

Any medication can have side effects. Depo-Provera often causes irregular menstrual bleeding. Most women will experience a change in their menstrual cycles that is either irregular and unpredictable bleeding, or lack of bleeding entirely. During the first year of use 30 to 50% of women stop having periods. The menstrual effects of Depo may linger for as long as a year after stopping use.



*A shot every 12-weeks*

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

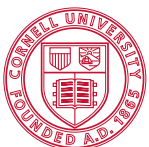
Other less common side effects of Depo are weight gain (about 5 pounds in one year), breast tenderness, headaches and mood changes.

## Contraindications

Women with the following conditions should not use Depo:

- active hepatitis or liver disease
- history of heart attack or stroke
- unexplained vaginal bleeding
- breast cancer
- women 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 to use in women with such conditions, and therefore we do not list them as contraindications here.



## Drug interactions

Only Cytadren (a medication used in Cushings syndrome) interacts with Depo. Antibiotics and other medicines have shown no interaction.

## How to get a prescription for Depo

Schedule an appointment at Cornell Health by calling or 607-255-5155 or logging on to myCornellHealth.

- Request a “Well Woman” visit if it is time for a pap smear and/or check-up.
- Request a contraception-only visit if you feel you don’t need a check-up, pap smear, or STI testing.

At your appointment the 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 5 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. Latex barriers (condoms, latex squares) are the best way to protect against STIs. Always use a latex 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), online via myCornellHealth or by visiting us during business hours.

Online, visit: [depoprovera.com](http://depoprovera.com)

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