

GUIDELINE FOR DEPO-SUBQ PROVERA 104 SELF-INJECTION

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OVERVIEW

Depot medroxyprogesterone (Depo-Provera) comes in both intramuscular and subcutaneous forms. To help you reduce the number of non-essential, in-person patient visits, PICCK and Upstream have partnered to create guidelines for patient self-administration of **DEPO-subQ PROVERA 104** (DEPO-subQ). Though DEPO-subQ self-injection is currently an off-label usage in the US, it is widely practiced in other parts of the world, and evidence shows it increases access and can increase continuation rates. Patients can be taught to self-administer DEPO-subQ in much the same way that patients are taught to self-administer insulin and enoxaparin sodium (Lovenox). DEPO-subQ can be prescribed so that patients inject themselves at home every 3 months without needing to come into the office for their contraception method.

DEPO-subQ is as effective as Depo-Provera and has the same medical eligibility criteria. DEPO-subQ uses a smaller needle and should be injected into the fat underlying skin, instead of into the muscle. DEPO-subQ is injected into the thigh or abdomen, unlike intramuscular injections in the buttocks or deltoid. A dose of DEPO-subQ contains 30% less progestin than Depo-Provera (104mg compared to 150mg).

PRESCRIPTIONS AND EDUCATION

- Send prescriptions to the patient's pharmacy for: DEPO-subQ prefilled syringe, sharps container for disposal of used needles, and alcohol pads.
- For patients who need more support after reviewing the instructions and videos, offer a telehealth visit where the patient can be observed and instructed by a member of the clinical team.
- For patients injecting at home who need information on how and where to dispose of used needles safely, see SafeNeedleDisposal.org What to Do with Used Sharps in Massachusetts.
- For insurance coverage information, see the Upstream/PICCK resource <u>Coverage of DEPO-subQ</u>
 <u>PROVERA 104 in Massachusetts</u>.

HOW TO START

- Patients may administer their first injection of DEPO-subQ within 7 days of the start of their period (conventional start), with no back-up method of contraception needed.
- Patients may also choose to administer the medication the day they receive it, apart from their menses (Quick Start). In this case, counsel them to use a back-up method of birth control for the next 7 days.
- Ideally, patients who Quick Start DEPO-subQ will first take a urine pregnancy test at home. If this is not possible, they may still go ahead and inject the medication. DEPO-subQ does not cause any harm to an early pregnancy if the patient were to be unknowingly pregnant when they self-administers.
- Patients can administer their first injection within 5 days of giving birth, even if they are breastfeeding.
- For more information on Quick Start, see the resource from RHAP on <u>Patient Requests a New Birth</u> <u>Control Method</u>.

STUDY REFERENCES

- Brady M, Drake JK, Namagembe A, Cover J. <u>Self-care provision of contraception: Evidence and insights from</u> <u>contraceptive injectable self-administration</u>. Best Pract Res Clin Obstet Gynaecol. 2020 Jan 23. pii: S1521-6934(20)30010-9. doi: 10.1016/j.bpobgyn.2020.01.003. [Epub ahead of print] Review. PMID: 32199705
- Kennedy CE, Yeh PT, Gaffield ML, Brady M, Narasimhan M. <u>Self-administration of injectable</u> <u>contraception: a systematic review and meta-analysis</u>. BMJ Glob Health. 2019 Apr 2;4(2):e001350. doi: 10.1136/bmjgh-2018-001350. eCollection 2019. PMID: 31179026



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STEP-BY-STEP INSTRUCTIONS FOR PATIENTS

See <u>DEPO-subQ PROVERA 104 Packaging Insert from Pfizer</u> for more information.

- Wash your hands before gathering materials: alcohol pad, syringe with medication, cotton ball or gauze pad, an adhesive bandage (like a Band-Aid), and a disposal container. If your clinician hasn't prescribed you a sharps container, you can find out about other safe containers at SafeNeedleDisposal.org – <u>What to Do with Used Sharps in Massachusetts</u>.
- 2. Remove the syringe from the package and **shake it for one minute** to ensure the medication is well-mixed. Hold the needle pointing up and tap the syringe to shake any air bubbles to the top. Push the syringe in until all the air bubbles are out.
- 3. Pick your injection site: upper thigh or stomach.



- 4. Wipe the skin with an alcohol pad and wait for the area to dry.
- 5. **Remove the cap** from the needle and hold the syringe in your dominant hand (the one you write with).
- 6. With your other hand, **grab the skin** around the injection site.
- 7. **Insert the needle** all the way into the skin at a 45-degree angle. The needle should almost completely disappear below your skin.
- 8. **Inject the medication** by slowly pressing the syringe all the way in, keeping the needle in place for 5-7 seconds.
- 9. **Remove the needle** and dispose of it in the sharps container. Do **not** place the safety guard around the needle with your fingers–use a firm surface to place the safety guard around the needle.
- 10. **Apply pressure** with the cotton ball or gauze pad to the spot you injected-but do **not** rub the area! Apply a bandage if you see a drop of blood.
- 11. **At the injection site,** if you experience swelling, redness, pain, or drainage of fluid, call your clinician's office.

VIDEOS

- Harbor-UCLA Medical Center <u>Subcutaneous Depo Provera Instructions in English and Spanish</u>.
- Innovating Education in Reproductive Health <u>This is How I Teach: Self-Injection DMPA-DC</u>.