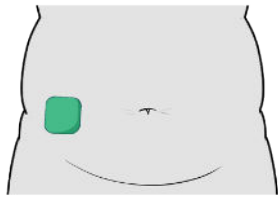


Patch

Contraceptive patch, *Xulane*, *Twirla*



How does the patch work?



- The patch uses the **hormones progestin and estrogen** to prevent ovulation (so no egg is released for sperm to fertilize) and to thicken cervical mucus (which prevents sperm from moving into the uterus).
- There are **two patches: *Xulane* and *Twirla***. The main differences between them are the type of progestin hormone used, the shape of the patch, and adhesive used.
- The patch works for people of **all ages and those using gender affirming hormone therapy**. *Twirla* is less effective for people with BMIs 25-30. Neither patch should be used by people with a BMI over 30.

How do you use the patch?

change
weekly

You need to **see a provider** (in-person or via telemedicine) to start using the patch.

You have to use the patch all month and change it on schedule to prevent pregnancy.

- Both patches can be worn on your back, belly, or buttocks, and *Xulane* can also be worn on your upper arm. The patch must lie flat and not rub against clothes, like a waistband.
- Get a prescription for the patch from your provider to fill at the pharmacy. Clean and dry your hands and skin (no lotion). Peel the backing off half way and place the exposed sticky part of the patch on your skin. Then peel the rest of the backing off to place the other half of the patch. Be sure it is firmly stuck.
- The day of the week you start your patch is your “patch change day.” Wear the patch for 7 days in a row. On your next patch change day, replace the 1st patch with a 2nd patch. On your next patch change day, replace the 2nd patch with a 3rd patch. On your next patch change day, remove the 3rd patch—don’t take it off early, even if you have started bleeding. Have one week with no patch. On your next patch change day, put on the 1st patch of a new box, even if you’re still bleeding.
- Do not put it in the exact same spot 2 weeks in a row so you don’t irritate your skin. Check your patch every day to make sure it has not fallen off and is fully on. Your patch can get wet.



Privacy and control

- A provider is needed to start and continue using the patch through ongoing prescriptions. There are apps where you can get a prescription. You can decide to stop using the patch on your own.
- Your partner will be able to see the patch on you.
- Someone you live with or who you share insurance with may see a bill from your insurance.
- Someone may be able to see the patch on you or find your box of patches or discarded patches.
- If anyone else is tracking your period, they may notice a change to your period.
- The patch only comes in a light beige color, making it more visible on darker skin tones.

When starting the patch, will it work immediately?



When starting within 5 days of the first day of your period, it will work immediately. If you are not sure bleeding is your period, you can use a backup method for 1 week.



When starting at any other time, the patch will take 1 week to work. Use an additional contraceptive during that week.



The patch may not be right for people who have or had

- Clotting disorders or risk factors for blood clots
- Smoker and age 35+
- Migraine with aura
- High blood pressure
- Lupus with positive or unknown antibodies
- BMI 30+

This is not a complete list, so talk to your provider about your medical history before starting this method.

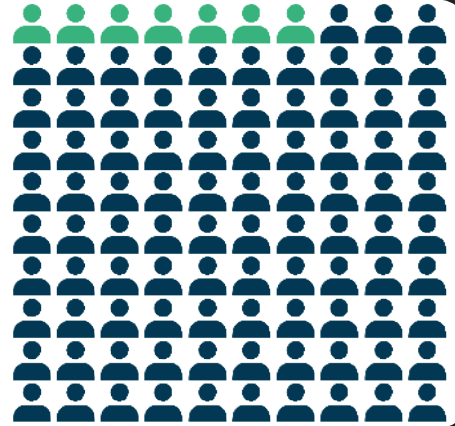


Use emergency contraception if

- **Your patch falls off or is partially peeled off for more than 24 hours.**
- **You are late starting the next patch according to directions** (*Xulane* and *Twirla* have different directions).

How well does the patch prevent pregnancy?

- On average, **7 out of 100 people using the patch will get pregnant each year.** This means it is **93% effective** with typical use. Typical use considers how easily a person can use the patch. Some people will have their patch fall off or forget to replace the patch on time.
- With perfect use, meaning the patch is used correctly, 1 out of 100 people using the patch will get pregnant each year. It is 99% effective.
- Some medications can make the patch not work as well.
- **You can use a non-hormonal method of contraception with the patch to provide more protection against pregnancy.**



Side effects

Sexually transmitted infections: Does not prevent.

- Use external or internal condoms to lower your risk of all sexually transmitted infections.

Period: Can affect.

- When starting the patch, you may temporarily have spotting between periods.
- The patch may make your periods lighter.
- The patch can make periods more predictable.

Period cramps: Can lessen.

Weight: No effect.

Acne: Can improve.

Fertility return: When you stop using the patch, you can get pregnant right away.

Other possible side effects:

- Headache
- Nausea
- Breast tenderness
- Stomach pain
- Adhesive residue on skin
- Skin irritation at the site where you put the patch
- Reduces symptoms of PCOS or endometriosis

The patch helps lower risk for: anemia; bone thinning; uterine, endometrial, and ovarian cancer; pelvic inflammatory disease; ovarian and breast cysts; ectopic pregnancy; uterine, ovarian, or fallopian tube infections; premenstrual syndrome



Postpartum use

The patch is **not safe to use right after giving birth.** Estrogen can increase the risk of blood clots right after delivery. At 6 weeks postpartum, the patch is safe to use and will not affect lactation, breastfeeding/chestfeeding, or infant development if initiation has been successful.



Contact your provider if you have

- Abdominal pain
- Yellowing of the eyes or skin (jaundice)
- Severe headache or aura
- Chest pain
- Blood clots
- Achy legs
- Leg pain/swelling
- Sudden back or jaw pain with nausea, sweating, or trouble breathing



Questions to ask your provider

- Will the patch fall off if I swim?
- How long of a prescription can you give me?
- Why can't I put it on the same spot each week?
- What should I do if my patch falls off?

Scan for a contraception guide and information sheets on each method.

