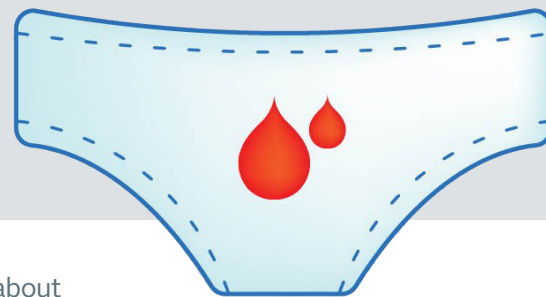


MESSAGES TO CLIENTS USING CONTRACEPTION

Changes to menses are **NORMAL**



Many women have misconceptions about changes to menses (periods) that occur with use of hormonal contraception or the copper IUD. Use this simple tool to help your clients understand that changes to their menses when they use a hormonal contraceptive method or the copper IUD are **NORMAL**. Provide your clients with evidence-based

information about method-specific changes that may occur. In addition, in each counseling session, reassure your clients about these changes and discuss the potential benefits of reduced bleeding and amenorrhea. Use the **NORMAL** acronym to address these points with them.

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NORMAL — Changes to your menses are **NORMAL** when you use a contraceptive method. With hormonal methods, menses could become heavier or lighter, occur more frequently or when you don't expect it, or you could have no menses at all. Changes to your menses may also be different over time.¹ With the copper IUD, menses could become longer and heavier, but remain regular; spotting could also occur during the first few months after IUD insertion.

OPPORTUNITIES — Lighter or no menses can provide **OPPORTUNITIES** that may benefit your health and personal life.

RETURN — Once you stop using a method, your menses will **RETURN** to your usual pattern, and your chances of getting pregnant will **RETURN** to normal.²

METHODS — Different contraceptive **METHODS** can lead to different bleeding changes. Let your provider know what types of bleeding changes you would find acceptable.

ABSENCE OF MENSES — If you are using a hormonal method, absence of menses does not mean that you are pregnant. If you have another symptom of pregnancy or if you missed your menses while using the copper IUD, talk to your health care provider or use a pregnancy test.³

LIMIT — If changes to your menses **LIMIT** your daily activities, there are simple treatments available. Talk to your provider.⁴

¹In addition to these points, provide method-specific information about potential changes to menses both before and after a client selects a hormonal contraceptive method.

²If applicable, inform your client that when using injectable contraception (e.g., DMPA), return to fertility will likely be delayed after discontinuing the method. For other methods, return to fertility will be immediate.

³If applicable, inform your client that when using oral contraceptive pills, absence of menses can be a sign of pregnancy. Absence of menses during the first month after initiation of the implant or progestin-only injectables may also be a sign of pregnancy (e.g., when the method was initiated as part of the Quick Start, without pregnancy being ruled out with reasonable certainty). Tell your client to return to the clinic if she is unsure of her pregnancy status.

⁴Treatment for heavy/prolonged bleeding due to hormonal methods include a 5-day course of ibuprofen or another NSAID (except aspirin), or a 21-day course of COCs or ethynyl estradiol. Treatment for bleeding associated with the copper IUD includes a 5-day course of tranexamic acid or NSAIDs (except aspirin). In most cases, however, providing supportive counseling and/or reassurance to clients is sufficient.

Illustration credit: Period emoji, Plan International UK. <https://plan-uk.org/act-for-girls/break-the-taboo-vote-for-your-favourite-period-emoji>



Provide additional information to clients about the type of menstrual changes to expect when using contraception



Potential changes are **NORMAL** and may be: ▶ very common ● common ■ less common

Time since initiation ⁵		Months 0-12		
HORMONAL METHODS	Combined Oral Pills	▶ Shorter or lighter menses ▶ Spotting between menses, especially if you miss a pill even by a few hours	▶ Shorter or lighter menses ▶ Spotting between menses, especially if you miss a pill even by a few hours	▶ Shorter or lighter menses ▶ Spotting between menses, especially if you miss a pill ■ No menses at all ⁶
	Progesterone -Only Pills	▶ Spotting between menses, especially if you miss a pill, even by a few hours ▶ No menses at all (especially when breastfeeding) ● Bleeding that lasts longer than a menses and comes irregularly	▶ Shorter or lighter menses ▶ Spotting between menses, especially if you miss a pill ● No menses at all (especially when breastfeeding)	▶ Shorter or lighter menses ▶ Spotting between menses, especially if you miss a pill even by a few hours
	Progestin-Only Injectables	▶ Irregular bleeding or spotting ▶ Heavier bleeding	▶ Irregular and lighter bleeding or spotting ■ No bleeding at all	● Irregular and lighter bleeding or spotting ● No bleeding at all
	Implant	▶ Irregular bleeding or spotting ● Heavier bleeding	▶ Irregular and lighter bleeding or spotting ■ No bleeding at all	▶ Lighter bleeding or spotting ● No bleeding at all
	LNG-IUS	▶ Irregular bleeding or spotting ■ No bleeding at all	▶ Irregular bleeding or spotting ■ No bleeding at all	▶ Light, infrequent bleeding ● No bleeding at all
NON-HORMONAL METHODS	Copper IUD	▶ Periods may be heavier or last longer ■ Irregular spotting	▶ Periods may return to the way they were before the Copper IUD was placed ● Periods may remain heavier or last longer	▶ Menses may return to the way they were before the Copper IUD was placed ● Menses may remain heavier or last longer

Provide additional information to clients about amenorrhea



The absence of bleeding with some contraceptive methods is **NORMAL**:

- Some hormonal contraceptive methods such as the LNG-IUS (hormonal IUD), implants, and injectables contain a hormone called progesterone which makes the lining of your uterus (womb) very thin. Normally, this lining grows thicker every menstrual cycle and, in the absence of pregnancy, is shed in the form of menstrual bleeding. When the lining is made thin, shedding does not occur and menstrual bleeding may stop.
- The menstrual blood does not build up anywhere else in your body, so there are no health risks to amenorrhea. Once you stop using a hormonal method, your menses and your ability to get pregnant will return to what they were before you used the method.⁷ If you have questions or concerns at any time, talk to your healthcare provider.

Lighter or no bleeding may have benefits to your life and health:

- Not having menstrual bleeding or having reduced bleeding may help improve conditions such as heavy or painful menses. Reduced or no bleeding may also help with anemia.
- You may also enjoy potential lifestyle benefits of having no or reduced bleeding such as increased freedom to engage in work or school activities.
- Some contraceptives can give you options when it comes to your menses. Some result in skipped menses, lighter menses, or absence of your menses altogether. Discuss your preferences with your healthcare provider so that you may select a contraceptive method that's right for you.

⁵This chart describes typical bleeding changes while a woman adjusts to a contraceptive method, but your clients' experiences may be different. There are some situations where bleeding isn't the result of using contraception, and can be a warning sign of something more serious. Tell women to talk to their healthcare provider if they have concerns.

⁶If a client is using a hormonal method other than oral pills, the absence of bleeding does not mean that she is pregnant. Remind her that if she has another symptom of pregnancy or if she misses her menses while using the oral pills or copper IUD, she should talk to her healthcare provider or use a pregnancy test.

⁷If applicable, inform your client that when using injectable contraception, return to fertility will likely be delayed after discontinuing the method. For other methods, return to fertility will be immediate.

Illustration credits: Based on drawings by Plan International UK; below, based on a drawing by Ashley Fiveash of the Noun Project.