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Spontaneous snapping of an Implanon® in two halves in situ

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Abstract

A 30-year-old woman presented at our family planning clinic for Implanon® removal and reinsertion. At the time of presentation the patient's weight was 148 kg. The Implanon was fitted in July 2000 (i.e. 35 months previously) when her weight was 138.5 kg. The patient was very happy with the contraceptive method. She was aware that her Implanon had snapped in half about 2 months ago. There was no aggravating factor such as weightlifting associated with this incidence.

Case report

A 30-year-old woman presented at our family planning clinic (FPC) on 28 May 2003. She attended for Implanon® removal and reinsertion. At the time of presentation the patient's weight was 148 kg.

She had noticed that her Implanon had snapped in half approximately 2 months ago. There had been no associated trauma to her arm or aggravating factor such as weightlifting. There was no change in the patient's symptomatology except that her bleeding was heavier than before the Implanon broke.

The Implanon was fitted in July 2000 (i.e. 35 months previously) in the non-dominant arm. At that time the patient's weight was 138.5 kg. She did not attend for follow-up, despite the fact that she had been requested to, because she did not have any problems. She was very happy with the contraceptive method.

Her obstetric history revealed she was para 2+0; the first child was born in 1996 by spontaneous vaginal delivery at term and second was born in 1998 by emergency Caesarean section for breech presentation.

Her menarche was at age 15 years. Prior to Implanon insertion her menstrual cycles were 5–6 days/3–8 weeks. After the insertion her periods became very light. She had used combined pills and minipills in the past. She had no medical problems except that she was overweight. She was a non-smoker.

The Implanon was removed under 2% lidocaine infiltration with two separate incisions since there was a gap between the two halves. A new Implanon was inserted at the same time, and the patient was advised to return in 6 weeks' time for follow-up. She was also advised to have the replacement Implanon removed in 2.5 years' time since she was overweight.

Discussion

To the best of our knowledge this is the first case of an Implanon snapping in two halves spontaneously in situ. The only previous case reported in the literature is one in which an Implanon had fractured halfway across its width.¹ In that particular case the Implanon was broken during a game of 'rough and tumble' and since that time the patient had began bleeding heavily for 3 weeks every month. After the removal of the broken Implanon and reinsertion of a new one the bleeding settled.

In contrast to this reported case, in the present case the Implanon snapped spontaneously in two halves without the presence of any aggravating factor. The breakage of the Implanon did not unduly concern the patient, and she attended the FPC 2 months later because her Implanon was due to be changed. It is difficult to say whether the change in bleeding pattern was due to the breakage of the Implanon or because the Implanon was due to be changed. An earlier review of clinical studies² reported three broken implants in 1716 insertions. However, these authors did not mention whether the Implanon devices were broken prior to, or during, the removal process. Finally, we confirmed with the manufacturer's medical information department that there have been no other reported cases of a broken Implanon.

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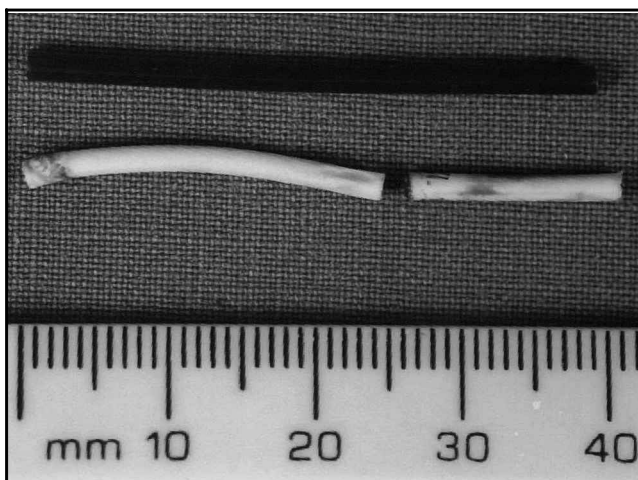


Figure 1 The broken Implanon as compared with a model Implanon