

Self-removal of a contraceptive implant

A patient recently described to me her experience of self-removal of her contraceptive implant when registered elsewhere in the country.

The implant had been in place for 4 months with unacceptable heavy bleeding. She was unable to find a local service that would remove the implant and public transport was poor to the nearest clinic and she had no babysitter. The patient is right handed and the implant was in her right arm.

She obtained the following equipment from her local chemist and supermarket: nail scissors, tweezers, Steri-Strips™, alcohol swabs, bandage, a bottle of vodka and a can of baked beans. She cleaned the equipment and skin with alcohol wipes and vodka and rested her arm on a table. She nicked the skin with the scissors transversely, making a wound about 1 cm long at the insertion scar. Being unable to reach the implant with tweezers she placed the can of beans on her arm above the top of the implant and pushing with her chin, forced the implant into the wound and managed to extract it with the tweezers. She closed the wound with Steri-Strips™ and suffered no adverse effects with good wound healing.

This case illustrates the importance of good local implant removal services, that self-removal is a realistic explanation for 'missing' implants and emphasises the importance of checking for correct placement by palpation after insertion.

David J Shepherd, MRCP, DFSRH

General Practitioner, Saffron Group Practice,
Leicester, UK; daveshep@nhs.net

Competing interests None.

J Fam Plann Reprod Health Care 2012;**38**:208.
doi:10.1136/fprhc-2012-100350