

they would soon be unavailable. These implants were replaced by Implanon in November 2004. She then had further implant exchanges every 3 years, her last renewal having been in December 2016, and she states that she intends to continue using this method until she no longer needs contraception. The daughters of this long-term user have also had contraceptive implants. Both women have given their consent to my submitting this letter to the journal.

The second woman told me that she did not remember an interruption in her use of subdermal implants. Aged 24 years, gravida 2 para 2, she was one of the two women who came for my live patient Norplant training on 21 December 1993. She also had two sets of Norplant, followed by three Implanon and two Nexplanon implants. Her use has been broken only once, having had her first set of Norplant rods removed in July 1996 with an interval before her second set of Norplant was inserted in February 1999.

Neither of these women has had any difficulty resulting from repeated use of their non-dominant arms for their implants. They each report erratic menstruation, which is acceptable to them considering the reliability of the method. Our contented users encourage others to request implants.

I wonder if other providers have comparable cases? I expect availability at their own practice has made this choice easier for my patients, and continuity of care has helped me be aware of them. Only 36 sets of Norplant were inserted at our surgery from 1993 to 1999. Since 2000, the number of implant insertions at our surgery has increased from about 10 per year to our current number of around 100 per year. There is likely to be a corresponding increase in numbers of future long-term continuous subdermal contraceptive users among current women using Nexplanon.

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Two women with extended use of contraceptive implants

I presume that I am in an unusual position to have been providing contraceptive implants continually since 1993 from one site. I have not found reports of long-term use of implants and I think that the following reports may be of interest to journal readers.

One of my patients has had 23 years' continuous use of subdermal contraceptive implants and the other's usage totals over 21 years, with one interruption of less than 3 years. Our longest continuous implant user has relied on subcutaneous contraception since December 1994 when she had her first Norplant inserted at the age of 22 years. Gravida 4 para 3, she had decided that her family was complete. She had already tried oral contraceptives and an intrauterine device. In October 1999 she had to change to her second set of Norplant implants slightly early, as she was aware that