

Nexplanon[®] fracture with unusual causation

I report a case of Nexplanon[®] fracture with unusual causation.

A 19-year-old woman who was in good physical health had used an etonogestrel implant (Nexplanon) for contraception for 2 years; she also found it helpful for dysmenorrhoea. She was admitted to an inpatient psychiatry unit with a psychotic illness.

She had a Nexplanon implant *in situ* (left arm) and reported that she believed she had broken the device, having tried to remove it with a sharp blade during the weeks prior to psychiatric admission.

On examination, two healing linear latitudinal lacerations, 2 cm apart and each 2.5 cm in length, were visible over the site of the implant. At device removal (uneventful), two fractures of the device were clearly visible and these corresponded to the positions of the self-inflicted lacerations.

The woman reported that when psychotic, she had believed the device was 'moving', but since recovering from her psychotic illness she recognised that this was not the case.

At her request, a replacement Nexplanon implant was inserted and its use has been uneventful. The patient has been discharged and currently cohabits with her boyfriend. Her successful use of a long-acting reversible contraceptive method, in spite of this episode, contributed to her willingness to try a depot long-acting injectable antipsychotic. She is well on intramuscular paliperidone, administered monthly.

Clinicians should be alert to the possibility of foreign bodies being incorporated into patients' altered perceptions and their delusional systems. Self-inflicted device trauma is not a contraindication to future successful use of the method.

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