Takin' a shot at Depo-Provera [1]

Alice,

I was interested in using Depo-Provera as a birth control method, but I don't know that much about it. I was wondering if you could tell me about the risks and effectiveness of it. I am currently on the birth control pill, so would this cause any complications? Thank you for your help.

— Needles

Answer

Dear Needles,

Points to you for doing some research on a birth control method before trying it out! Depo-Provera (Depo) is the brand name for a prescription hormonal (progestin-only) method of birth control that many people choose because it's both highly effective and low-maintenance. The original version, Depo-Provera IM, is a deep-muscle injection (shot) administered every three months. There is also a version that's a lower-dose, subcutaneous (administered just under the skin) injection called Depo SubQ Provera 104. A health care provider will administer the shot for most folks, but it may be possible to receive a supply to take home and self-administer on the same three month schedule. Everyone's experience with a given method will be different, and side effects for hormonal methods may be more common for some users than for others. And, if after learning more about this method you decide to give Depo a shot, there are recommendations on making the switch from birth control pills, but there's no evidence to suggest that there would be complications (though speaking with a medical professional first can provide individualized guidance).

For those who don't like having to manage birth control on a daily basis (i.e., take a pill every day), wish to decrease or not experience their menstrual periods, or are sensitive to estrogen (since this method doesn't contain it), Depo can be an attractive way to avoid pregnancy. When all shots are given on time, Depo is more than 99 percent effective at preventing pregnancy. What's more, if the shot is started within the first week (seven days) after the start of your menstrual period, you'll be protected from pregnancy immediately. While it's known that Depo can increase menstrual bleeding and "spotting," (bleeding between regular periods) for some users, bleeding often becomes lighter, less frequent, or stops altogether after a few weeks. With
Depo, the bleeding-related side effects usually stop after three doses, or six to nine months. Relatedly, many side effects from hormonal methods of birth control tend to decrease or go away completely after the body becomes adjusted to the hormonal changes. The lower dose version of Depo may also reduce the likelihood of experiencing common side effects.

That being the case, there has been some concern over a particular side effect associated with this method. In 2004, the United States Food and Drug Administration (FDA) required the manufacturers to add a warning to the product label indicating that a loss in bone mineral density (BMD) may occur with use, may continue to decrease for the duration of use and may not be completely reversible after folks stop using Depo. This concern stems from the knowledge that low BMD may increase the risk of bone fractures and osteoporosis [2]. The risk to adolescent users was particularly worrisome, as it was unclear what impact using Depo would have during a time of significant BMD development that typically occurs in that stage of life. The most up-to-date research suggests, however, that while BMD has been found to decrease while using the method, recovery of lost BMD is common once use stops. In clinical trials, former Depo users were found to have either mostly or completely reversed BMD loss after a period of two to five years of non-use. It was noted though that not all the bones were as quick to recover from the loss — with the hip and the femur taking longer to recover than the spine. It seems that the length of time it takes to recover from the loss and how complete the recovery is for a given user also depends on a number of factors, including how long they used Depo and at what part of the body the bone density is measured. For example, a study of adolescent users ages 12 to 18 found that complete recovery of lost BMD occurred in those who used Depo for less than two years. However, for adolescents in that study who used the method for longer than two years, complete recovery couldn’t be confirmed. For a number of studies investigating BMD in former adult Depo users, it was found to be comparable to those who had never used the method. All this to say, if you’re concerned about your individual risk for bone density loss or osteoporosis, you may want to talk with your health care provider about it and about using this method.

Other side effects of Depo may include bloating, abdominal pain, dizziness, fatigue, weight gain, change in sex drive, headaches, and depression. If you have unexplained vaginal bleeding or are pregnant, use of this method isn’t recommended. It also may not be recommended for individuals who have liver disease, breast cancer, or those with a history of depression, heart attack, blood clots, or stroke. If you’re planning on becoming pregnant in the future, it’s been found to be the case that it can take the body anywhere from a few months to more than a year for you to return to fertility (i.e., have the ability to conceive) after you stop taking Depo. Beyond avoiding this method due to some pre-existing health concerns, it may interest you to know that for folks with endometriosis [3], Depo may be used as a treatment for pelvic pain associated with the condition. It may also reduce the risk of endometrial cancer and uterine fibroids [4].

With this knowledge, if you’re ready to make the switch from pills to the shot, starting Depo while you’re still taking the pill is advised. After the first shot, you’ll then be instructed to stop taking the pills about seven days later. Remember, if you and your health care provider decide that Depo is the right birth control method for you, you can still use an additional barrier method (such as a condom [5]) to reduce the risk of sexually transmitted infections (STIs). Further, if you stop taking the pills first before starting Depo, using a back-up method of birth control for the first full week after the first shot is recommended. For more information about Depo and other forms of birth control, check out the Contraception [6] category in the Go Ask Alice! archives and Planned Parenthood [7].
Hope you find the method that’s right for you!

Alice!

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