6. When can a woman have repeat progestogen-only injectables (POIs) – depot medroxyprogesterone acetate (DMPA) or norethisterone enantate (NET-EN)?

Reinjection interval
♦ Provide repeat DMPA injections every 3 months.
♦ Provide repeat NET-EN injections every 2 months.

Early for an injection
♦ The repeat injection for DMPA and NET-EN can be given up to 2 weeks early.

Late for an injection
♦ The repeat injection for DMPA and NET-EN can be given up to 2 weeks late without requiring additional contraceptive protection.
♦ If she is more than 2 weeks late for a DMPA or NET-EN repeat injection, she can have the injection, if it is reasonably certain that she is not pregnant. She will need to abstain from sex or use additional contraceptive protection for the next 7 days. She may wish to consider the use of emergency contraception if appropriate.

Switching between DMPA and NET-EN
♦ Using DMPA and NET-EN injections interchangeably is not recommended.
♦ If it becomes necessary to switch from one to the other, the switch should be made at the time the repeat injection would have been given.

For a repeat POI when the previous injectable type and/or timing of injection is unknown
♦ She can have the injection if it is reasonably certain that she is not pregnant. She will need to abstain from sex or use additional contraceptive protection for the next 7 days.
♦ She may wish to consider the use of emergency contraception if appropriate.

Comments

The expert Working Group considered the risk of ovulation to be minimal within 2 weeks following the time for a repeat injection (3 months for DMPA and 2 months for NET-EN).

The mechanisms of action, the medical eligibility criteria, and the side-effects of DMPA and NET-EN are similar. Therefore it is safe to stop using one and start using the other.

Whereas an estimated 48 hours of POP use was deemed necessary to achieve contraceptive effect on cervical mucus, the time required for POIs to exert such an effect was uncertain.
**Systematic review question**

How soon after the last progestogen-only injection do ovulation and fertility return?  
**Level of evidence:** II-3, fair, indirect.

**References from systematic review**


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**Key unresolved issues**

How common is switching between DMPA and NET-EN and why does switching occur?

How accurately do ultrasound findings, hormonal measurements and evaluation of cervical mucus predict the risk of pregnancy during use of POIs?

What is the maximum time between injections that maintains effectiveness of POIs?

What are the most effective counselling and other communication strategies for increasing adherence to reinjection intervals for POIs?