FSRH CEU statement: Extended use of long acting reversible contraception (LARC)
11 November 2021

The Clinical Effectiveness Unit have had a number of recent queries around the extended use of LARC during COVID19. We would like to remind Members that extended use of LARC was recommended only when health risk associated with COVID19 transmission was at its highest.

In March 2020, FSRH CEU issued a statement supporting the extended use of Nexplanon®, Mirena®, Levosert® and 10-year copper IUDs during the COVID-19 pandemic. At this time, COVID-19 rates were high, vaccination was not available, and COVID-19 death rates were high. There was a significant risk of COVID transmission and serious health consequences if individuals attended for a long acting reversible contraception (LARC) procedure. We knew from previous studies that the risk of pregnancy was low during one additional year of use of Nexplanon, a 52mg LNG IUS or a 10-year copper IUD and therefore, at that time, the risk of COVID transmission outweighed the very small risk of pregnancy during extended use of these LARC methods. Individuals extending use of LARC were advised that contraceptive effectiveness during extended use could potentially be slightly lower than during licensed use, and could choose to use condoms or a progestogen-only pill in addition.

As a result of the COVID-19 vaccination programme, the risk/benefit balance for LARC procedures has now shifted and routine extended use of LARC is not recommended. Individuals should be advised to attend for LARC removal/replacement at 3 years (Nexplanon), 5 years (Mirena), 6 years (Levosert – note the licence for Levosert has been extended to 6 years), and 10 years (10-year copper IUDs).

Currently, the only time that we support extended use of LARC for contraception is in older individuals using intrauterine contraception - any copper IUD inserted from age 40 can be used for contraception until after menopause, and a Mirena or Levosert inserted from age 45 can be used for contraception until the age 55. See FSRH CEU Guideline Contraception for Women Aged Over 40 Years (August 2017, amended September 2019)

As it is no longer applicable, the March 2020 statement is no longer on the FSRH website. For further information as to why this was applicable during the early stages of the pandemic, but no longer is, please see the response to a related Member's Evidence Request (log in required).

The Clinical Effectiveness Unit (CEU) was formed to support the Clinical Effectiveness Committee of the Faculty of Sexual & Reproductive Healthcare (FSRH), the largest UK professional membership organisation working at the heart of sexual and reproductive healthcare. The FSRH CEU promotes evidence based clinical practice and it is fully funded by the FSRH through membership fees. It is based in Edinburgh and it provides a members’ enquiry service, evidence-based guidance, new SRH product reviews and clinical audit/research. Find out more here.