A suggestion for removing and reinserting Implanon®/Nexplanon®

As more and more patients return for repeat fittings of Implanon®/Nexplanon®, there is this worry that we are inserting the implants further and further up towards the patients’ axillae if we cut down on the distal end of the implants without adjusting their position first.

Of course we can give local anaesthetic twice: one for removal of the old implant and a second one further down the arm for insertion of the new one. I often wonder whether it is necessary to give local anaesthetic twice for renewing implants.

There is a better, commonsense approach for taking out and renewing implants using local anaesthetic just once, and at the same time reducing the chance of the implants creeping up the patient’s arm.

Here is what I do. First I put pressure at the proximal end of the implant and push it gently down towards the elbow under the skin. Then I mark with a pen where the distal end of the implant is showing through the skin. I release the pressure on the implant and raise a blip with local anaesthetic at the mark. I then cut down at the mark and press on the proximal end of the implant again to manipulate it through the incision, and finally I insert the new implant through the same incision.

Following this procedure will reduce the chance of the new implant creeping up the arm by giving just one local anaesthetic injection.

Joseph Chan, MRCGP FRCSE
GP Partner, Leicester, UK; joechan59@gmail.com

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Joseph Chan

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