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CASE REPORT ON THE EFFECTIVENESS OF COMBINATION PILLS IN OVERCOMING SPOTTING IN NEW ACCEPTORS OF DMPA CONTRACEPTION IN PMB "S" KLAMPIS

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ABSTRACT

Spotting is a common bleeding disorder among new users of Depot Medroxyprogesterone Acetate (DMPA) contraceptives and can cause discomfort, anxiety, and disruption to daily activities and religious activities. This study aims to describe the effectiveness of combination pills in managing spotting in new users of DMPA contraceptives at PMB Sayang Ibu Klampis. The study used a descriptive method with a case report approach. The study population was DMPA acceptors experiencing spotting, while the sample consisted of one DMPA acceptor who received obstetric assessment and management. The research instrument was a midwifery care assessment format through anamnesis, observation, general and physical examinations. Data analysis was conducted descriptively by integrating subjective and objective data. The results of the initial assessment showed spotting for three days accompanied by anxiety and discomfort. Acceptors were provided with education, counseling, personal hygiene, balanced nutrition recommendations, and seven days of combination pills. Results showed that spotting stopped after seven days of therapy, anxiety decreased, and no other complaints were found at subsequent monitoring. Acceptors then chose to continue DMPA contraception. In conclusion, the administration of combination pills accompanied by education and monitoring provided good results in managing spotting in this case and supported the comfort and sustainability of contraceptive use.

Keywords: *Case Report, Combined Oral Contraceptives, DMPA, Injectable Contraception, Spotting*

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INTRODUCTION

Contraception is a method used to prevent pregnancy and regulate the number and spacing of pregnancies. One widely used method in Indonesia is injectable contraception, specifically Depo Medroxyprogesterone Acetate (DMPA), due to its effectiveness, safety, and practicality, administered every 12 weeks (Khasanah, 2023; Fitria et al., 2022). The 3-monthly injectable contraceptive contains the hormone progesterone, or DMPA, at a dose of 150 mg and is widely used to prevent pregnancy (Perdana & Sulistiyaningsih, 2022).

DMPA use can cause side effects due to hormonal influences, particularly changes in menstrual patterns such as spotting and amenorrhea (Amana et al., 2024; Nurhijraheni et al., 2025). The longer a 3-month injectable is used, the shorter the duration and amount of menstruation, and it can even cause amenorrhea. These changes occur because the gestagen hormone in DMPA affects the menstrual cycle and endometrium (Khasanah, 2023).

Spotting is a light spotting bleeding outside the normal menstrual cycle that can occur due to hormonal imbalance and changes in the structure of the endometrium in DMPA users (Ana Riandari et al., 2024). This condition generally occurs at the beginning of use as the body adapts to hormonal

changes and can cause discomfort and disrupt daily activities (Alsamsiah et al., 2024; BKKBN, 2021). The 2023 Indonesian Health Survey showed that 698 of 3,883 users of the 3-monthly injectable contraceptive experienced spotting. In Bangkalan Regency in 2021, 4,893 users experienced spotting, while a preliminary study at the PMB Sayang Ibu Klampis in 2025–2026 found that 20 of 113 users experienced spotting.

Spotting not only causes discomfort but can also disrupt activities and religious practices, thus affecting public acceptance of hormonal contraception. In Madurese, this condition can create fear of using hormonal contraception and encourage users to discontinue contraception if spotting persists (Adethia et al., 2024). In addition to spotting, DMPA use can also cause various other side effects and, if left untreated, can lead to dropout, impacting family planning programs (Amana et al., 2024; Nurhijraheni et al., 2025; BKKBN, 2021).

Spotting in DMPA users can be managed through counseling regarding the advantages, disadvantages, and side effects of contraception using ABPK (PR Sari & Nuzuliana, 2023). Spotting management can include administering combination pills and ibuprofen to help reduce spotting (Maufiroh, 2021). Counseling also includes education about spotting as a side effect of DMPA, non-hormonal contraceptive counseling, and personal hygiene education to maintain genital hygiene (BKKBN, 2021; Montessori et al., 2024; Khasanah, 2023).

Based on these conditions, this study aims to describe a case report on the effectiveness of combination pills in treating spotting in DMPA contraceptive users at PMB Sayang Ibu Klampis, including subjective and objective assessments, analysis, and case management. This research is important to support the improvement of acceptor knowledge and comfort in dealing with DMPA side effects. The novelty of this study lies in reporting a case report on the effectiveness of combination pills in treating spotting in DMPA users at PMB Sayang Ibu Klampis.

METHOD

This study used a descriptive method with a case report approach to factually and systematically describe the effectiveness of combination pills in treating spotting in DMPA contraceptive users at PMB Sayang Ibu Klampis. The case report approach was conducted based on the results of the assessment, examination, analysis, and management of the research subjects (Nadia Adiningrat & Meyniar Albina, 2025).

The study population was DMPA contraceptive users who experienced side effects such as spotting or spotting outside the normal menstrual cycle. The sample or case report subjects were DMPA users who experienced spotting and received assessment and management according to their condition. The assessment was conducted to obtain subjective and objective data as a basis for providing midwifery care (Sudarti & Afroh Fauziah, 2022).

The research instrument used a midwifery care assessment format that included subjective data through anamnesis and objective data through observation and general and physical examinations. Data collected included biographical data, reason for visit, medical history, menstrual history, contraception, psychological condition, daily habits, and physical examination results. Data analysis was conducted descriptively by linking subjective and objective data to determine the problems, needs, and management of the acceptors (Sudarti & Afroh Fauziah, 2022).

The research procedure included a preliminary study, permitting, data collection, analysis, and report preparation, conducted from April to June 2026 at the Sayang Ibu PMB, Klampis District, Bangkalan Regency. Data collection was conducted through subjective and objective assessments, followed by case analysis and management in the form of education regarding spotting, personal hygiene, nutritious food consumption, adequate rest, administration of combination pills twice, one tablet for 7 days, collaboration with a doctor if necessary, and consideration of changing contraceptive methods if spotting persists. Case collection also took into account the principles of informed consent, anonymity, beneficence, and justice (JM Sari et al., 2025; Rifka Alkhilyatul Ma'rifat & I Made Suraharta, 2024; Hafiza Sibarani & Albina, 2025; Saragih et al., 2021).

RESULT AND DISCUSSION

Timeline of obstetric intervention results

1. Second visit

Date: July 1, 2026
Time: 16:00 WIB
Place: Patient's home

K2 **SUBJECTIVE DATA**	1. Mother said she no longer had spotting after taking the combination pill for 7 days.
	2. Daily habit patterns a. Nutrition: Mothers eat three meals a day—morning, noon, and night—consisting of rice, vegetables, and side dishes. The portion size of rice consumed is between one and two ladles per meal. Furthermore, mothers maintain adequate fluid intake by drinking around seven to eight glasses per day. b. Activities: Mother works as a BBKBN employee and Doing household chores. c. Break: Afternoon: 1-2 hours Night: 7-8 hours d. Personal hygiene: Shower twice a day. Change your clothes after each shower. Change your underwear after showering or when you feel wet or uncomfortable. e. Sexuality: No disturbances during intercourse
	3. Psychological, social, spiritual, and cultural history a. Psychology: Mother said that the anxiety she previously experienced had decreased because she was no longer experiencing spotting. b. Social: Family and husband are aware of spotting, which is a side effect of using DMPA injectable contraception.. c. Cultural: There are no local cultural taboos regarding the use of this contraceptive.However,During the postpartum period, mothers are prohibited from consuming mackerel. d. Spiritual: When praying, mother no longer feels disturbed.
OBJECTIVE DATA	1. General examination Mum's condition: Good Consciousness: Composmentis
	2. Vital signs Blood pressure: 125/82 mmHg Pulse: 80x/min
	3. Anthropometry Weight: 76 kg Height: 157 cm BMI: 30 kg/m2
ANALYSIS	**Diagnosis:** New acceptors of DMPA injectable contraception **Problem**: 1. Spotting has been resolved because the mother took the combination pill 1x1 for 7 days. 2. Anxiety has been resolved because the mother already knows that spotting is a side effect of the DMPA injection.
IMPLEMENTATION	1. Tell the mother that the results of the examination show that the mother is in good condition. 2. Encourage mothers to maintain good personal hygiene by changing their underwear at least 2-3 times a day to prevent infection and washing from front to back with water without soap. 3. Encourage mothers to maintain nutritional patterns by consuming balanced nutritious foods. 4. Tell the mother to stop taking the combination pill because she is no longer experiencing spotting. 5. Plan a return visit in 7 days to see if the spotting has stopped and there are no other complaints. 6. Doing documentation.

2. Third visit

Review date: June 7, 2026 Assessment time: 16:00 WIB Place of assessment: Patient's home	
K3 SUBJECTIVE DATA	7. Mom said she didn't experience spotting.
OBJECTIVE DATA	1. General examination General condition: Good Consciousness: Composmentis 8. Vital signs Blood pressure: 117/72 mmHg Pulse: 77xx/min 9. Anthropometry Weight: 75 kg BMI: 30.4 kg/m2
ANALYSIS	1. Diagnosis DMPA injectable contraceptive acceptor 2. Problem Spotting has stopped
IMPLEMENTATION	1. Tell the mother that the results of the examination show that the mother is in good condition, the mother knows the results of the examination. 2. Provide education to mothers that they are no longer experiencing spotting, and that they are no longer experiencing anxiety due to unclear causes. 2. Encourage mothers to maintain personal hygiene by changing their underwear at least 2-3 times a day to prevent infection and washing from front to back with water without soap. 3. Encourage mothers to maintain nutritional patterns by consuming balanced nutritious foods. 4. The mother was provided with information and education (IEC) regarding contraceptive method options to inform her decision-making. After receiving this information, she decided to continue using the DMPA injectable contraceptive because her spotting had resolved. 5. Doing documentation

Discussion

First visit

1. Subjective data

Based on the results of the assessment on the first visit conducted on Tuesday, June 23, 2026 at 16.00 WIB at the patient's home, data was obtained that Mrs. T, 28 years old, complained of spotting outside the menstrual cycle which began to be experienced since June 20, 2026 and lasted for 3 days with a small amount of bleeding in the form of spotting. The spotting complaint experienced caused anxiety and discomfort to the mother because it interfered with the implementation of worship and caused the mother to limit sexual relations with her husband. Spotting that occurs outside the menstrual cycle is caused by the influence of the hormone progesterone on the endometrium lining, causing light bleeding.

In those taking the DMPA injectable contraceptive, this condition often occurs early in use and is a common side effect. While not harmful, spotting can cause discomfort and anxiety.

The cause of spotting in DMPA injectable contraceptive users aligns with the findings of a study (Winarti & Azizah, 2024), which explained that spotting is caused by the influence of the hormone progesterone. This hormone causes changes in the endometrium, making it thinner and less stable. This condition makes the endometrial blood vessels more susceptible to bleeding (spotting), which is characterized by the appearance of blood spots outside the menstrual cycle. Spotting is a common side effect, especially during the initial period of DMPA injectable contraceptive use.

Although spotting is a generally harmless side effect, it can cause discomfort and impact the recipient's psychological well-being. In this case, the mother's spotting caused anxiety because it interfered with religious observances and affected her sexual relationship with her husband. Consequently, she limited sexual activity while the symptoms persisted.

The anxiety experienced by injectable contraceptive users due to spotting is related to a lack of understanding of the side effects of hormonal contraception. Therefore, education, along with therapeutic communication and psychological support, is provided to reduce anxiety and increase acceptor confidence in continuing contraceptive use.

The impact of anxiety experienced by these mothers aligns with research findings (Amalia et al., 2023), which explain that stress can trigger an increase in the hormone cortisol, an internal factor. This increased cortisol level then disrupts reproductive hormone regulation, potentially altering menstrual patterns in those receiving DMPA injectable contraception.

2. Objective data

Based on the examination results at the first visit, Mrs. T's general condition was good and stable, as indicated by compos mentis consciousness, vital signs within normal limits, and no abnormalities found during the physical examination. Aside from spotting, no other side effects related to the use of the DMPA injectable contraceptive were found. Therefore, the mother's overall health can be assessed as good with no disorders affecting her general condition.

In research(Yusmiati et al., 2023)It is said that spotting is not only related to external factors but also influenced by an individual's intrinsic factors. The use of hormonal contraceptive injections is known to cause changes in menstrual patterns, characterized by menstrual cycle disruption, irregular bleeding, and spotting, a side effect often seen in users. According to research results(Witczak et al., 2022)Those who use DMPA injectable contraceptives are at risk of several serious side effects, such as changes in uterine bleeding patterns, decreased bone density leading to osteopenia and osteoporosis, metabolic disorders, and deep vein thrombosis. Therefore, regular health monitoring is essential while using DMPA injectable contraceptives.

Based on the assessment results, there was a decrease in the client's weight from 84 kg on the first visit to 75 kg on the third visit.

The weight loss experienced by the client is thought to be influenced by several factors, including changes in diet, increased physical activity, and a person's response to hormones, so it cannot be concluded as a direct effect of using DMPA contraception.

This is in line with research(Ntobuo, 2022)Weight loss in DMPA users can be influenced by several factors, including changes in diet, increased physical activity, and individual responses to hormones. Therefore, weight loss is not always a direct effect of DMPA use.

3. Analysis

Based on the results of the objective and subjective data review, the diagnosis is DMPA injectable contraceptive use with spotting as a side effect. This diagnosis is based on the presence of the primary signs and symptoms of spotting, which is spotting that occurs outside the menstrual cycle.

Spotting is one of the common side effects experienced by users of DMPA injectable contraceptives, especially during the first year of use.

This finding is in line with research findings.(April, 2021)Changes in menstrual patterns, including shorter or longer cycles, irregular bleeding, and spotting, are more common in the first year of use. These changes generally decrease with use. A diagnosis of spotting in DMPA injectable contraceptive users is based on complaints of spotting outside the normal menstrual cycle. Spotting is a common side effect caused by changes in the endometrium influenced by the progesterone hormone in injectable contraceptives.(Ramadhani et al., 2023)

4. Management

Providing education to mothers about spotting as a side effect that is often found in users of hormonal contraceptives will also generally decrease as the body adapts.

Providing education about spotting is important to increase mothers' understanding of their condition, thereby reducing anxiety and increasing confidence in continuing to use contraception.

This is in line with(BKKBN, 2021)Spotting is a common side effect of DMPA injectable contraceptives, especially in the first few months of use. This condition is generally temporary and resolves as the body adapts to the contraceptive, so it's not a cause for concern unless accompanied by excessive bleeding or other symptoms.

The mother was given a combination pill, one tablet daily, for seven days to address the spotting. She was also given instructions on how and when to use the medication, as recommended, to ensure optimal therapy.

Providing combination pill therapy, along with education on how and when to use the medication, is a crucial part of managing spotting in those using the DMPA injectable contraceptive. The purpose of this explanation is to ensure mothers understand the correct use of the medication, thereby increasing adherence to therapy. By using the medication as directed, it is hoped that spotting will be reduced, the mother's condition will improve, and contraceptive use can be maintained.

This is in line with research(Putri & Arifah, 2024)The purpose of administering combined contraceptive pills is to help reduce spotting experienced by those using DMPA injections. This reduction in spotting is expected to improve patient comfort, reduce anxiety about contraceptive side effects, and increase adherence to the prescribed contraceptive regimen.

Mothers are advised to maintain personal hygiene by wearing cotton underwear and changing it regularly, at least 2–3 times a day. Furthermore, mothers are advised to maintain genital hygiene by wiping from front to back to help prevent infection during spotting.

Maintaining good genital hygiene can help prevent infections caused by spotting. Good personal hygiene, such as keeping the genital area clean and changing underwear regularly, can also improve maternal comfort, reduce genital moisture, and support reproductive health while using DMPA injectable contraception.

This finding is in line with research(Maufiroh, 2021)By explaining personal hygiene to birth control users experiencing spotting, the aim is to prevent vulvar inflammation. This education includes advice on maintaining genital hygiene by wiping from front to back to keep the genital area clean and prevent the risk of infection.

Mothers are advised to consume balanced nutritious food containing sufficient amounts of protein, carbohydrates, vitamins, fats, and minerals to meet their nutritional needs and maintain their health during spotting.

Nutritional fulfillment through a balanced diet is recommended for those receiving DMPA injectable contraception who experience spotting. Adequate nutritional intake can help maintain maternal health and reduce the risk of anemia due to persistent spotting.

Second visit

1. Subjective data

On Wednesday, July 1, 2026, at 4:00 PM WIB, a second home visit was conducted to Mrs. T, 28 years old. She had no spotting after taking the combination pill for 7 days.

Compliance with the combination pill by taking it regularly for seven days can help manage spotting. Daily consumption according to the recommended dosage helps maintain stable hormone levels, thus maintaining the stability of the endometrium and preventing it from shedding, which can trigger spotting. Once spotting resolves, use of the combination pill should be discontinued as directed by a healthcare professional to prevent excessive hormone exposure, which can cause side effects such as nausea and digestive problems.

In line with research findings(Maufiroh, 2021)by explaining that regular use of combination pills is effective in stopping spotting. This was demonstrated in Mrs. T, who showed improvement after taking the combination pills consistently for seven days, marked by the cessation of spotting and a stable condition.

2. Objective data

According to the examination results, the mother's general physical condition was good and within normal limits. Based on her symptoms, the light bleeding was suspected to be a side effect of the DMPA injectable contraceptive. The mother's spotting stopped after taking the combination pill regularly for 7 days as recommended by her healthcare provider. This suggests that the spotting was likely related to hormonal changes caused by the DMPA injectable contraceptive.

Based on research(Nurhajijah et al., 2024)More than half of women using injectable hormonal contraceptives experience spotting. To address this issue, some respondents were given a combination

pill to be taken daily for three to seven days. Research shows that regular use of the combination pill can stop spotting, resulting in improved health.

3. Analysis

Based on the subjective and objective data assessment, the mother was diagnosed as a new user of the DMPA injectable contraceptive. During her previous visit, she complained of spotting outside of her menstrual cycle, a side effect of long-term hormonal contraceptive use. After treatment with the combination pill, which she took regularly, the spotting resolved. At the current visit, the mother's condition was stable and no other complaints were noted.

4. Management

Mothers are given IEC to maintain personal hygiene, especially cleanliness of the genital area, by changing their underwear regularly to clean and dry underwear at least two to three times a day or whenever it feels damp or dirty.

Education about personal hygiene is an important promotive and preventive strategy in midwifery care. This education is expected to improve mothers' personal hygiene, particularly genital hygiene, thereby maintaining reproductive health and minimizing the risk of infection.

This finding is in line with research(Maufiroh, 2021)By explaining personal hygiene to birth control users experiencing spotting, the aim is to prevent vulvar inflammation. This education includes advice on maintaining genital hygiene by wiping from front to back to keep the genital area clean and prevent the risk of infection.

Mothers are advised to consume balanced nutritious food containing sufficient amounts of protein, carbohydrates, vitamins, fats, and minerals to meet their nutritional needs and maintain their health during spotting.

Fulfilling nutritional needs through a balanced diet should be encouraged for mothers as part of efforts to maintain good health. Adequate intake of carbohydrates, protein, fat, vitamins, and minerals plays a role in meeting energy needs, supporting the body's metabolic processes, and helping maintain optimal health.

The mother was told to stop taking the combination pill because the spotting had stopped, and a follow-up visit was planned seven days later to evaluate the mother's condition and ensure that spotting or other complaints did not recur.

Discontinuing the combined pill once spotting symptoms resolve indicates that the goal of therapy has been achieved. Follow-up visits are also an important part of midwifery care to evaluate the mother's condition, ensure the effectiveness of therapy, and detect recurrent symptoms or side effects early.

This is in line with research(April, 2021)It states that women who take the pill regularly have a lower risk of spotting compared to those who are non-compliant. Therefore, maternal compliance with the recommended dosage, timing, and instructions is a crucial factor in supporting successful therapy and reducing the risk of spotting and contraceptive discontinuation (dropout).

Third visit

1. Subjective data

On Tuesday, June 7, 2026 at 16:00 WIB, the third home visit was carried out on Mrs. T, aged 28 years, the mother did not experience spotting and had no other complaints.

The mother has no longer experienced spotting or other symptoms. This indicates that the care and management provided are working well, and her body has begun to adapt to the use of the DMPA injectable contraceptive.

Spotting in DMPA injectable contraceptive users occurs due to the influence of the hormone progestin, which causes changes in the endometrium, making it thin, fragile, and prone to light bleeding outside of the menstrual cycle. Additionally, several factors such as stress, physical fatigue, and delays in injection schedules can influence or worsen spotting. However, once the body adapts or additional therapy such as combination pills is administered, the bleeding usually stops and the condition returns to normal.(Maufiroh, 2021).

2. Objective data

Based on the objective data obtained, no side effects or other abnormalities were found related to the use of the DMPA injectable contraceptive. The mother's general condition was good, as indicated by a physical examination and vital signs within normal limits. Furthermore, no signs of complications related to the woman's spotting were found.

This is in line with research by Satriyandari and Mahmudah (2021), which states that the use of DMPA injectable contraceptives has the potential to cause several side effects, such as changes in uterine bleeding patterns, decreased bone density ranging from osteopenia to osteoporosis, metabolic disorders, and an increased risk of deep vein thrombosis. Therefore, those using DMPA injectable contraceptives need to undergo regular health monitoring to detect potential side effects during contraceptive use.

3. Analysis

Based on the subjective and objective data assessment, the mother was diagnosed as a DMPA injectable contraceptive user. The examination revealed her general condition was good and stable, and no complaints or other side effects related to the use of the contraceptive were found.

4. Management

Mothers are given communication, information, and education (KIE) regarding the importance of maintaining personal hygiene, especially in the genital area, by changing underwear to clean and dry underwear regularly, namely at least two to three times a day or whenever underwear feels damp or dirty.

Education about personal hygiene is a form of promotive and preventive effort in obstetric care. This education aims to improve mothers' knowledge and behavior regarding personal hygiene, particularly in the genital area, thereby maintaining reproductive health and reducing the risk of infection.

This aligns with research by Maufiroh (2021), which states that implementing personal hygiene for birth control users experiencing spotting aims to prevent vulvar inflammation. The education provided includes recommendations to maintain genital hygiene by wiping from front to back to maintain cleanliness and minimize the risk of infection.

Mothers are advised to maintain a balanced, nutritious diet by consuming foods containing carbohydrates, protein, fat, vitamins, and minerals in appropriate amounts to meet nutritional needs and maintain health during spotting.

Fulfilling nutritional needs through a balanced diet should be recommended to mothers as a way to maintain good health. Consuming a balanced diet containing adequate amounts of protein, carbohydrates, vitamins, fats, and minerals helps meet energy needs, supports the body's metabolic processes, and helps maintain optimal health.

CONCLUSION

Based on the case report, administering a 7-day combination pill to new DMPA injectable contraceptive users demonstrated positive results in addressing spotting complaints. At the first visit, the mother experienced spotting for 3 days, accompanied by anxiety, discomfort during worship, and restrictions on sexual intercourse. After receiving education about spotting, counseling, personal hygiene practices, recommendations for a balanced diet, and one tablet of the combination pill per day for 7 days, at the second visit, the mother reported that her spotting had stopped and her anxiety had decreased. At the third visit, the mother continued to experience no spotting or other complaints and chose to continue using the DMPA injectable contraceptive. These findings suggest that administering the combination pill, along with education and monitoring, can be part of spotting management to increase comfort and support continued contraceptive use.

Limitations of this report include the use of a case report approach on a single user, making the results infeasible for generalization to all DMPA users. Furthermore, monitoring was conducted over a relatively limited period. Therefore, further research involving a larger number of subjects and a longer monitoring period is recommended to gain a broader understanding of the effectiveness of combination pills in treating spotting in DMPA users. Practically, the results of this report can be used by healthcare professionals to provide appropriate education, monitoring, and management of

spotting, including attention to psychological conditions, personal hygiene, nutritional patterns, and ongoing contraceptive use according to the user's needs.

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