



INTRAUTERINE DEVICE (IUD)



What is an IUD?

An Intrauterine Device (IUD) is a small object that is inserted through the cervix and placed in the uterus to prevent pregnancy. A small string hangs down from the IUD into the upper part of the vagina. The IUD is not noticeable during intercourse. IUDs can last 1-10 years. They affect the movements of eggs and sperm to prevent fertilization. They also change the lining of the uterus and prevent implantation. IUDs are 99.2-99.9% effective as birth control. They do not protect against sexually transmitted infections, including HIV/AIDS.

Use

Getting an IUD involves a clinic visit. To prevent infection, clinics require women to have check-ups prior to insertion. This can include a full medical, pelvic, and breast exam, with a Pap smear, STI check, and pregnancy test. If anything unusual is found, it is addressed before the IUD is inserted. After insertion, an IUD is effective immediately.

Insertion:

An IUD is usually inserted during a menstrual period when the cervix is slightly open and pregnancy is least likely. It may be inserted at any time, however. The procedure for insertion takes about 5-15 minutes. Most women feel cramping during and after insertion. Ibuprofen can help relieve cramping.

Awareness

You can keep track of your IUD by checking its strings. You can feel for the string by putting a finger into your vagina. Some women prefer to look at the string using a speculum, mirror, and flashlight.

It is recommended that women check their IUD after each period. A shorter than normal string can be a warning sign of an imbedded IUD. Missing strings may mean that the IUD was expelled. If the string is missing, call the clinic and use a backup method of birth control.

If you miss a period while on an IUD, you may want to take a pregnancy test. If you have any concerns about your IUD, call the clinic. The longer the IUD remains in place, the less likely it is that the uterus will reject the IUD and expel it.

Removal

An IUD can be **removed** at any time and the procedure is

quicker and easier than insertion. If it is removed near ovulation, a woman may become pregnant from recent intercourse before IUD removal.

Types of IUDs

There are two types of IUDs available: ParaGard and Mirena. The ParaGard has a tiny copper wire wrapped around the plastic body and should not be used by anyone who is allergic to copper. The Mirena releases small amounts of a synthetic progesterone hormone. This was added to attempt to decrease the excessive bleeding and cramping that some women have with the IUD.

Your Health

Every woman is different and IUDs are not recommended for all women. Due to the risk of serious health problems, women with the following conditions should not use IUDs:

- ◆ Recent or repeated pelvic infection
- ◆ Known or suspected pregnancy
- ◆ Severe cervicitis
- ◆ Salpingitis
- ◆ Malignant lesions in the genital tract
- ◆ Unexplained vaginal bleeding
- ◆ HIV/AIDS
- ◆ History of ectopic pregnancy
- ◆ History of Toxic Shock Syndrome
- ◆ Physical inability to check IUD

IUDs are not recommended for women who are at risk for PID, have lower immune response, abnormal pap smear, heart disease, anemia, a history of severe menstrual cramping and heavy flow, a history of ectopic pregnancy, or previous problems with an IUD. Copper IUDs are not recommended for women with Wilson's disease or allergies to copper.

- ◆ Women with a history of breast cancer cannot use the Mirena IUD.
- ◆ Women with diabetes should be monitored carefully if they use the Mirena IUD.
- ◆ Breastfeeding women should be aware the synthetic hormone in the Mirena IUD is excreted in breast milk.

Risks

Getting any vaginal infection while using an IUD can increase the risk of developing a serious pelvic infection. This can result in a loss of fertility. For this reason, women need to assess their own risk for infection. If you have multiple

(continued on back)

partners or if your partner has multiple partners, your chance of infection is much higher. Piercing or perforation of the uterine wall may occur during insertion of the IUD. Over time, an IUD may become imbedded in the uterine wall. An imbedded IUD is still effective, but it can be painful and may need to be removed. There is a risk of surgery and/or sterility if an IUD becomes imbedded.

If a woman becomes pregnant while using an IUD, it is highly recommended that she have the IUD removed, whether or not she wants to carry the pregnancy to term. An IUD increases the risk of having a miscarriage or premature birth.

A woman who becomes pregnant while using an IUD is also more likely to have an ectopic pregnancy. An ectopic pregnancy occurs when a fertilized egg attaches and grows outside the uterus. This can be very dangerous and requires emergency medical attention.

Side Effects

Both the ParaGard and the Mirena IUDs can cause longer, heavier, and more painful menstrual periods, but this is much less common with the Mirena. The increased blood flow may cause anemia. Spotting may occur without serious cause or as a sign of infection.

The Mirena IUD can cause ovarian cysts. Some women using the Mirena stop bleeding altogether. Usually their menstrual periods return when the IUD is removed. Mirena can cause weight gain, headaches, increased blood pressure, acne, depression, and decrease in sex drive.

Future Fertility

Women who want to become pregnant may have their IUD removed at any time. While most women who stop using IUDs are able to become pregnant, IUDs can have negative effects on a woman's fertility. If perforation, embedding, or pelvic infection occurs, the uterus or tubes may become damaged and lower the chance of pregnancy. In cases of severe damage or infection of the uterus, a hysterectomy (removal of the uterus) may be required, resulting in permanent sterility. The synthetic hormone in the Mirena IUD can cause a delay in return of menstruation and fertility after it is removed.

Advantages

- ◆ Allows sexual spontaneity.
- ◆ Requires no daily attention.
- ◆ Immediately effective.
- ◆ Long-lasting.
- ◆ Not messy.

Disadvantages

- ◆ Does not protect against sexually transmitted infections, including HIV/AIDS.
- ◆ Insertion and removal require clinic visits.
- ◆ Can be expelled.
- ◆ Can cause more difficult menstrual periods.
- ◆ Possible risk to future fertility.

Emergency Contraception

You can prevent pregnancy *after* unprotected intercourse by having a copper IUD inserted. Within one week of unprotected intercourse, copper IUDs can be used as Emergency Contraception. (see ec.princeton.edu)

Your Cervix

The cervix is the opening to the uterus where menstrual blood, babies, and sperm pass. It is the opening through which abortions are performed. IUDs are inserted through the cervix into the uterus.

Barrier methods of birth control, including the diaphragm, female condom, and cervical cap, work by covering the cervix and preventing sperm from entering the uterus.

Hormonal methods of birth control, including oral contraceptives, the Mirena IUD and Depo Provera affect the mucus around the cervix and make the opening more resistant to sperm.

Women's bodies also naturally produce hormones that change the cervix during a menstrual cycle. You can learn more about your cervix using a speculum to perform a self-exam. For instructions and a speculum, ask your clinician or see FWHC.org.

Further Resources

- Contraception and Sex Information You Can Actually Use: www.io.com/~wwwwomen/contraception/
- *Birth Control Handbook*. Montreal Health Press, 2000.
- *Our Bodies, Ourselves*. Boston Women's Health Book Collective, 2005.
- Feminist Women's Health Center at www.FWHC.org and www.Birth-Control-Comparison.info