INTRAUTERINE DEVICES (IUD)

What is an IUD and how does it work?

An IUD is a small T-shaped device that is inserted inside a woman’s uterus by a medical practitioner. The IUD stays in place until it is removed by a medical practitioner. There are two types of IUD’s available:

- **Copper IUD’s** are made of plastic and copper. They prevent pregnancy by stopping sperm from fertilizing an egg and preventing implantation. Copper acts as an effective spermicide (to destroy sperm).

- The **Mirena intrauterine system (IUS)** is made of plastic and contains a small amount of the progesterone hormone. The hormone is continuously being released at low levels to thin the lining of the uterus, thicken the cervical mucus making it difficult for sperm to fertilize an egg, and can stop the release of an egg from your ovary.

IUDs prevent conception. They do not cause an early abortion.

How is an IUD inserted and removed?

- The procedure can be done in a doctor’s office or clinic and can be inserted postpartum or after a surgical abortion.
- IUD’s can be inserted at any time during the menstrual cycle.
- Some women experience a brief sharp cramp or sting on insertion.
- Testing for sexually transmitted infections (STIs) can be done at the time of insertion or in advance of insertion.
- Removal of an IUD is done by a doctor during an office or clinic visit.

What is the procedure at an Opt clinic? (please note: IUDs purchased from Opt are not refundable for any reason).

In order to have an IUD inserted at an Opt clinic, the following requirements must be met:

1. We have taken a medical history.
2. You have been counselled on the benefits and risks of having an IUD inserted.
3. We have discussed whether or not you are a good candidate for an IUD, and which IUD (copper or Mirena) may be more appropriate for you. A consent form is signed.
4. We have discussed when an IUD can be inserted:
   - Any time during your cycle
   - Four weeks postpartum
   - Immediately following an abortion (under 14 weeks)
   - Two weeks following an abortion (over 14 weeks)
5. Pregnancy is ruled out, you have met one of the following requirements:
   - You have your period now, or
   - You have been using a reliable method of birth control, or
   - You have not had intercourse for the last two weeks
   - Please note a urine pregnancy test will be done before an IUD insertion and it recommended that you do not have intercourse 7 – 14 days prior to the insertion to reduce the chance of an inaccurate pregnancy test

Note: a Copper IUD can be inserted as emergency contraception within 5 days of unprotected intercourse.
How effective is it?
- An IUD is an excellent method of birth control: approximately 98% - 99% effective immediately after insertion.
- An IUD is effective from two and a half to five years before needing to be replaced (the amount of time depends on the kind of IUD you choose).
- A copper IUD is an extremely effective form of emergency contraception if inserted within 5 days of unprotected intercourse.

Advantages
- Convenience. The IUD is always in place. There is nothing to do before you have intercourse.
- It is a good method for breastfeeding mothers or women who cannot use estrogen methods of birth control.
- It is reversible.

Disadvantages
- Requires at least one doctor's visit
- Does not protect against STIs
- Mirena is at least twice as expensive as a copper IUD.

Who might not be able to use an IUD?
Women who:
- Have an active pelvic infection or are at high risk for STIs
- Are allergic to copper (for copper IUDs) or adverse effects from progesterone (for the Mirena IUD)
- Are pregnant
- Have unexplained uterine bleeding or anemia
- Have an abnormal cervix or unusually shaped uterus
- Have heart or blood diseases
- Are immunosuppressed individuals

Could there be complications?
Although rare, perforation of the uterine muscle or wall by the IUD can occur. Infection can rarely occur during any pelvic procedure, most commonly this is because of an STI. Infertility may be a consequence of an untreated STI, however there is no evidence supporting a relationship between IUDs and infertility.

Early warning signs:
P Period late (pregnancy), abnormal spotting, or bleeding
A Abdominal pain, pain with intercourse
I Infection exposure, abnormal discharge
N Feeling ill, fever, or chills
S String missing, or shorter or longer

If you experience any of these, call a clinic or go to an emergency department immediately.

Which IUD is right for me?
<table>
<thead>
<tr>
<th>Consideration</th>
<th>Copper IUD</th>
<th>Mirena IUS</th>
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<tbody>
<tr>
<td>Cost</td>
<td>Approx. $80-160</td>
<td>Approx. $325-$360</td>
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<tr>
<td>Menstruation</td>
<td>May cause an increase in bleeding (period is heavier) and cramping.</td>
<td>Reduction in bleeding (lighter and shorter period) and less cramping. May cause irregular periods to start, eventually leading to no periods.</td>
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<tr>
<td>(bleeding pattern)</td>
<td></td>
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<tr>
<td>Side effects</td>
<td>Insertion done by Gynaecologists, some GP’s and at some Opt clinics (referral available if not.) Sold at Opt clinics and clinics or doctors offices where insertions are done.</td>
<td>Insertion done by Gynaecologists, some GP’s and at some Opt clinics (referral available if not.) Sold at Opt clinics and clinics or doctors offices where insertions are done. Can be purchased from pharmacies.</td>
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<td>Availability</td>
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