

IUDs

There are two types of IUDs (Intrauterine devices) available in Canada.

Copper IUDs \$65.00 - \$180 (Liberté, FlexiT, Monalisa and NovaT)	Levonorgestrel IUD approx. \$320-400.00 (Mirena, Jaydess)
Effective for 2 ½ to 10 years	Effective for 5 years
They are made of plastic and copper	They are made of plastic and release a hormone called levonorgestrel .
The copper interferes with both sperm and eggs and prevent fertilized eggs from attaching to the uterus.	They interfere with both sperm and eggs by thinning the uterine lining and thickening cervical mucus.
They are very effective with about 1 in a 100 women getting pregnant each year.	They are extremely effective; only about 1 in 1000 get pregnant each year.
Periods become heavier, longer, and more painful by 20-50% for each woman. After 3 months, they get easier.	There may be irregular bleeding in the first three months; then periods usually get lighter than normal. In half of women, periods disappear completely.
Infection in the uterus and fallopian tubes (or PID) is slightly more common in the first 20 days after insertion.	Infection in the uterus and fallopian tubes (or PID) is slightly more common in the first 20 days after insertion.
There are no side effects outside the uterus.	The hormone used is about one fifth the dose in birth control pills, so hormonal side effects are uncommon. About 5% of women stop using them because of depression, acne, weight gain and loss of libido.
99% effective for preventing pregnancy within 7 days AFTER unprotected intercourse.	Excellent treatment to control heavy, painful periods.

The doctor puts the IUD inside your uterus. Most women feel a pinching feeling and then a sharp cramping pain which lasts a few minutes. IUDs are usually put in during or after a period or towards the end of the bleeding after childbirth, abortion, or miscarriage. There is about 5% chance of the IUD coming out and 1/1000 chance of perforation (hole in your uterus which heals within 2 weeks) from the IUD. Spotting (on and off light bleeding or brown discharge) is common during the first month.

After your first period, you should get the IUD checked by a doctor. Every month, after your period, you can check to see if you can feel the string by putting your finger inside, to the top of your vagina. If you can't feel the string, or if you feel any hard plastic, check with a doctor.

WHAT TO WATCH FOR:

If you have fever or chills, a smelly discharge from your vagina, lower abdominal (belly) pain, see a doctor right away because these may be signs of infection.

If you get pregnant, see your doctor. The doctor will take the IUD out right away, whether you decide to keep the pregnancy or not. IUDs do not prevent tubal or ectopic pregnancies as well as they prevent the usual ones; you will be checked for ectopic.

Indications for IUDs

- Contraception
- Emergency contraception (copper only)
- Dysmenorrhea/menorrhagia (Mirena only)

For all ages, regardless of obstetrical history or risk of STI (use antibiotic prophylaxis in high-risk women)

Contraindications for IUDs

- Uterine bleeding of unknown cause*
- Active PID, septic abortion
- Pregnancy
- Copper allergy (copper IUDs only)
- Some uterine abnormalities

* may combine endometrial biopsy and IUD

Pearls for Difficult IUD insertions

Obese patients

- Speculum choices (long, wide)
- Patient positioning (knees to chest)
- Side wall retraction/ assistant
- Lighting

++ retroverted or anteverted

- Tenaculum positioning
- Bending the IUD and the sound
- Use os finder or dilator

Known or suspected fibroids/Abnormal uterus

- Use os finder or dilator
- Ultrasound guidance

Tight os

- Local anesthetic (5 cc lidocaine)
- Timing of insertion (intra-menstrual)
- Misoprostol 200 mcg pv 3 h prior
- Os finders

Anxiety

- Auditory (music, distraction)
- Lighting
- Comfort (bed/pillow)
- Support person
- Medication (lorazepam/oxycodone)

For more information: http://www.willowclinic.ca/?page_id=22