Perseverance is key.

- increased risk of pelvic inflammatory disease, which can lead to infertility (which is related to the number of sexual partners)
- unnoticed accidental expulsion of the IUD, which may result in unexpected pregnancy
- & embedding of the IUD in the uterine wall
- Representation of the uterus by the IUD, with possible damage to other organs as well as internal bleeding
- Description potential problems if pregnancy occurs with an IUD in place, including an increased risk of ectopic (tubal) pregnancy, a 2 to 35% risk of miscarriage, plus risks of infection in the uterus and preterm birth of the baby.

There has been no evidence of birth defects resulting from the use of an IUD.

When should I call my doctor? Call if you:

- & Cannot find the IUD string.
- & Have vaginal discharge with a bad odor.
- Have severe, unexpected pain in your lower abdomen, especially if it happens when you have intercourse.
- & Have a fever with no apparent cause.
- the Think you might be pregnant with the IUD still inside the uterus.
- \& Want to have the IUD removed.



Breast, feeding is not a recognized form of contraception.

The Intrauterine device is

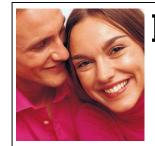
safe for breastfeeding mothers

Information contained in this booklet is meant for informational purposes only and should not substitute the visit to your doctor nor his/her advice for your health care.

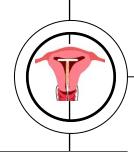
Accuracy of the content is current to the date of the printing.

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Intrauterine Device (IUD)



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What is an intrauterine device (IUD)?

The intrauterine device (IUD), previously also called a coil or loop, is a birth control device placed into a woman's uterus by a doctor. It is usually made of plastic or metal with a string attached. IUDs that contain copper can stay in the uterus for up to 10 years. IUDs that contain the female hormone progesterone can stay in place up to 5 years. The IUD prevents pregnancy by changing the physical environment of the reproductive tract. These changes appear to prevent the egg from being fertilized.

There has been some controversy over the use of the IUD because of its association with pelvic infections. Talk to your doctor about the risks of using an IUD if you have had any of the following problems:

- & heavy menstrual bleeding
- an infection in any of your reproductive organs (ovaries, uterus, fallopian tubes)
- pregnancy in a fallopian tube (ectopic pregnancy).

How is it used?

Your doctor will insert the IUD into the uterus through the cervix (opening of the uterus). The IUD is usually inserted at the end of the menstrual period, when the cervix is slightly open and you are least likely to be pregnant. It takes only a few minutes to insert an IUD. You may feel some cramping pain when the IUD is being inserted. You may be given a local anesthetic or pain medicine to help control discomfort during insertion.

Your doctor may examine you after your next menstrual period to be sure the IUD is staying in the right place. You should also check for the string after every menstrual period. You can do this by putting a finger inside the vagina and feeling for the string near the cervix. As long as you can feel the string, the IUD is in position and it is unlikely that you will become pregnant. If you feel the hard plastic of the IUD, it is no longer in the correct place and you will have to see your doctor to change it.

The IUD could come out accidentally in the first few months, possibly without being noticed. Always check the IUD position and if you are not sure of its position, consider using a backup method of birth control until you see your doctor.

You may be able to have an IUD from 5 to 10 years before it needs to be replaced. Usually progesterone IUDs are replaced after 5 years. Copper IUDs must be replaced after 10 years.

You should not use an IUD if:

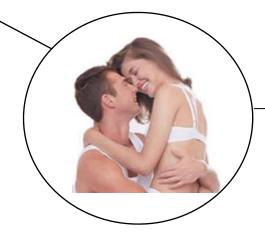
- You have cancer in the uterus or cervix.
- & You have unexplained vaginal bleeding.
- & You may be pregnant.
- & You have pelvic inflammatory disease.

You should not use a copper IUD if you are allergic to copper or metals.

What are the benefits?

The benefits of an IUD are:

& It is 97% effective as a method of pre-



venting pregnancy.

- Lovemaking does not need to be interrupted by the insertion of a birth control device or spermicide.
- Replacement is required just every 5 to 10 years, depending on the type.
- The progesterone-containing IUD decreases the amount of bleeding and cramps that you have during your periods.

Women do not have a harder time getting pregnant after removal of an IUD than they do after the use of other forms of birth control.

What are the risks?

A number of problems could occur while you are using an IUD, some of which can be severe. These problems are listed below (the first two are the most common):

- k increased menstrual bleeding and cramps, mostly during the first few weeks of use
- & spotting between menstrual periods
- & irritation of your partner's penis