

What to Expect When Having an Intrauterine Device (IUD) Inserted

When you are making a decision about contraception, your clinician will ask you certain questions about your medical, contraceptive and sexual history. You should answer these questions honestly so that your clinician can help you decide if an intrauterine device (IUD) is right for you. An IUD is a device that is placed in the uterus, where it prevents pregnancy. Two IUDs are on the market in the United States. One contains copper and the other contains the female hormone progesterone.

Best Candidates for an IUD

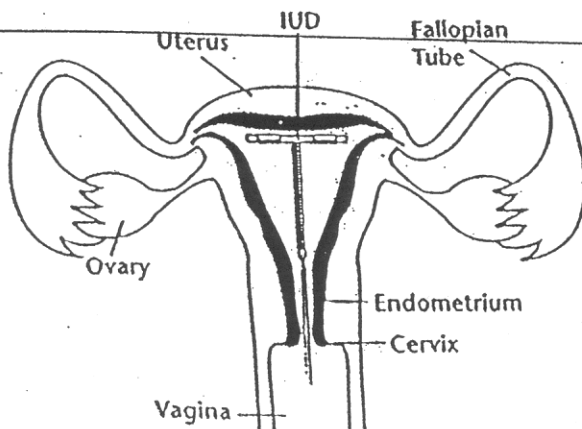
The best candidates for an IUD are women who:

- have a normal uterus
- don't have any genital tract infection or sexually transmitted diseases (STDs) now or within the past 3 months
- have a low risk of STDs (in a long-term, steady relationship with one partner who has no infection)

IUD Insertion

The process of having an IUD inserted takes only about 5 to 10 minutes. The clinician will perform a pelvic examination to measure the size, shape and position of your uterus and reproductive organs. Next, the clinician will apply an antiseptic solution to your cervix.

The IUD in Place in the Uterus



Your clinician will insert the IUD up through the opening of your cervix into the uterus (womb). The IUD is put inside using a special applicator that holds it flat and closed until it reaches the top of the uterus.

At this point during the procedure, most women feel cramping; however, most women describe the cramping as mild to moderate, not severe. After the device is inserted, the string at the end of your IUD will be cut short enough that the string doesn't bother you or your partner, but long enough to allow you to feel it and to periodically check that it remains safely in place.

After the IUD is inserted, your clinician or counselor will review some follow-up instructions with you. After your next period, it's a good idea to check to be sure that you can feel the IUD string.

Normally the string hangs about 2 inches down from your cervix into your vagina. Anytime you (1) cannot feel the string with your finger or (2) can feel the plastic part of the device, it means your IUD may have slipped out of place. If you have any doubts about the presence or position of your IUD, use an additional contraceptive (such as latex condoms with vaginal foam, cream, or jelly) and call the office or clinic for instructions or an examination.

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Modern IUDs: An Update

What is an IUD?

An intrauterine device (IUD) is a small, plastic device that is inserted into the uterus (womb) to prevent pregnancy.

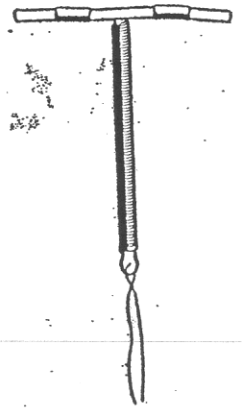
Are there different types of IUDs?

Yes, many different kinds of IUDs are used all over the world. Two types of IUDs are currently available in the United States: one has copper and the other contains the female hormone progesterone. Both are shaped like the letter "T" and are about 1 1/4 inches tall (see pictures). Each IUD has a thread or string on the end, which allows the woman to check that the IUD is in place; it also makes it easier for your clinician to remove the IUD.

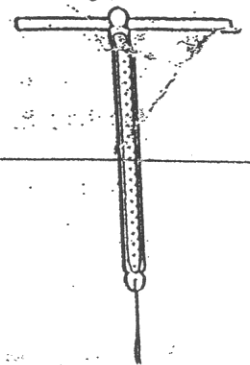
The copper IUD has copper wire coiled around the stem and arms. The copper IUD can be used for up to 10 years. The progesterone device has a hollow stem that contains the hormone progesterone.

The hormone is continuously released into the uterus and acts locally, so there are no hormonal effects throughout the body. This IUD must be replaced once a year.

The Copper IUD



The Progesterone IUD



IUDs are shown actual size.

**The Copper IUD Is More
Than 99% Effective**



Fewer than one woman in 100
will get pregnant over 1 year
while using the copper IUD.

How does the IUD work?

All the ways an IUD can prevent pregnancy are not fully understood. The most recent studies suggest that IUDs work mainly by preventing fertilization, interfering with the normal development of the egg and the sperm's ability to reach the egg.

How effective are IUDs?

IUDs are the most effective form of nonpermanent birth control. The copper IUD is about as effective in preventing pregnancy as sterilization (getting your tubes tied). For every 100 women using the copper IUD, fewer than 1 per year will get pregnant (less than a 1% failure rate). With the hormone-containing IUD, about 3 women per year will get pregnant (about a 3% failure rate).

Are there side effects?

With the copper IUD, the most common side effects are increased menstrual flow and cramps. Cramps can be relieved by the use of over-the-counter pain medication such as ibuprofen or naproxen. These side effects usually lessen after the first few months as the uterus gets used to the IUD. With the hormonal IUD, bleeding may also occur between menstrual periods, although total blood loss and painful periods are reduced.