



9195 Grant Street, Suite 410
Thornton, CO 80229
Phone: 303-280-2229(BABY)
Fax: 303-280-0765

300 Exempla Circle, Suite 470
Lafayette, CO 80026
303-665-6016
303-665-0121

6363 West 120th Avenue, Suite 300
Broomfield, CO 80020
303-460-7116
303-460-8204

www.whg-pc.com

FACTS ABOUT THE IUD

What is an IUD?

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

How does the IUD work?

The ways an IUD can prevent pregnancy are not fully understood. The most recent studies suggest that IUD's work by preventing fertilization.

Are there different kinds of IUDs?

There are two types of IUD's available in the United States: one contains copper and the other contains a hormone called progesterone. Both are shaped like the letter T and are 1 1/4 inches tall. Each IUD has a thread or tail on the end, which allows the woman to check that the IUD is in place; it also makes it easier for the clinician to remove the IUD.

The copper IUD has copper sleeves on the arms and copper wire coiled around the stem. The copper IUD can be left in place, and is effective for ten years. The progesterone device has a hollow stem that contains the natural hormone progesterone, which is continuously released into the uterus and acts locally, so there are no hormonal effects throughout the body. This IUD must be replaced every five years.

How effective are IUDs?

IUD's have been found to be highly effective. For every 100 women using the copper IUD, less than 1 per year will get pregnant. The Mirena® or progesterone IUD has the same effectiveness rate and less than 1% of users will get pregnant over a five year period.

Are there any side effects?

With the copper IUDs, the most common side effects are increased menstrual flow and cramps, which can be relieved by the use of over-the-counter pain medication such as ibuprofen. These side effects lessen after the first few months as the uterus adapts to the presence of the IUD. The progesterone IUD (Mirena®) changes the menstrual bleeding patterns for the first 3 to 6 months of use. The number of days of bleeding and spotting may increase during this time. After three to six months, however, the bleeding and spotting usually lessens noticeably. About 20% of women will have no bleeding after 12 months use of the Mirena®.

Are IUDs safe?

IUDs are a safe and effective method of birth control when used appropriately. The insertion process may be linked with infection of the uterus or fallopian tubes in some women at risk for infection.

Who should use IUDs?

A woman should consult with her health care provider to determine if an IUD is an appropriate form of birth control for her. The IUD is best for a woman who is in a long-term, mutually monogamous relationship with a partner who does not have any sexually transmitted diseases (STDs). This is important because the IUD does not protect against STDs. STDs can increase a woman's risk of becoming infertile. If you are using an IUD and believe you may be at risk of getting an STD, use a latex condom to help protect yourself.

What are the benefits of an IUD?

IUDs are safe, effective, easy to use and less expensive than most other forms of contraception. There is no need to remember to use the method every day or with the sex act.

What is it like to have an IUD inserted?

Having an IUD inserted takes only 5 to 10 minutes. Your clinician will perform a pelvic examination to measure the size,



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shape, and the position of your uterus. An antiseptic solution is applied to the cervix, and then the IUD is put inside using a special inserter that holds the IUD until it reaches the top of your uterus. At this time you may experience cramping that is mild to moderate. After the device is in place, the string at the end of the IUD will be cut short enough so that it does not bother your partner. Most women have little discomfort wearing an IUD. The cramps experienced during insertion are usually transient and can be relieved with ibuprofen.

When should I call my clinician?

If you have a fever or chill with pelvic pain or tenderness, severe cramping, or unusual vaginal bleeding, contact your clinician because you may have an infection. A slightly increased risk of infection exists during the first three weeks after putting in the IUD. After that, the risk is very low.

Can an IUD fall out of the uterus?

It is possible, although rare, that the IUD can become dislodged. If you or your partner can feel the plastic part of the device, it means you IUD has slipped out of place. If you have any doubts about the presence or the position of your IUD, use a latex condom and call the office for instructions. You should be able to feel the strings by the cervix.

What should I do if I want to have an IUD for my birth control method?

Make an appointment to see your provider to discuss this method of birth control and to be evaluated. STD testing may be required prior to insertion in certain instances. Our office will check with your insurance company prior to your insertion appointment to determine if your insurance will cover this method of birth control.

Common myths about the IUD you may have heard:

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| "IUDs cause infection" | The truth is that IUD's do not cause infection. STD's do. Bacteria entering the womb during insertion are usually the cause of infection. However, an IUD may increase the risk of getting an STD if you change sexual partners frequently. |
| "IUDs cause ectopic pregnancy" | Overall, the ectopic risk is 5% but more women get an ectopic pregnancy who have no birth control than women with an IUD. |
| "IUDs can make you sterile" | The truth is the IUD does not affect your ability to have a future pregnancy. Sexually transmitted disease are usually the cause of the problem. As with oral contraceptives and barrier methods, most women who stop using IUD's are able to conceive within the first year after removal. |
| "IUDs work by causing an abortion" | The latest evidence suggests that IUD's work by preventing fertilization. Therefore, the IUD does not cause an abortion. |