

Woman's Health Options

Intrauterine Device (IUD)

What is an IUD?

The IUD is a small soft piece of plastic wrapped in copper with a nylon string attached to it. When the IUD is in place the string hangs through the opening of the cervix and into the top of the vagina (see diagram).

There are two types of IUDs. The copper IUD (Nova-T/Flexi T) has a thin copper wire wrapped around it and the other type of IUD (Mirena) releases small amounts of a hormone called progestin. An IUD is inserted into a woman's uterus by a doctor and can stay in place for 1-3 years.

IUDs work by preventing the fertilization of the egg. The IUD changes the chemical environment in the uterus. It affects the way the sperm move and changes the lining of the uterus so that an egg cannot become implanted.

Does it Work?

IUDs are 98% effective. This means that in a year, 1 or 2 out of every 100 women will get pregnant using an IUD.

How Is It Used?

In order to get an IUD you may need to make two visits to your doctor. The first visit is a consultation visit, so you can talk to your doctor about the IUD, and if necessary, have a pelvic examination and test for sexually transmitted infections (STIs). The second visit is for the actual insertion of the IUD. This usually occurs during your period. Some doctors may want you to return three months after insertion to make sure that everything is going well with your IUD.

Check the strings once a month to make sure the IUD is in place. Most women do this after their periods. You can do this by inserting your finger into your vagina until you feel the strings (see diagram).

See your doctor immediately if:

- You can't feel the string.
- The string is longer or shorter than usual.
- You have signs of infection (fever, discharge, odor, pain).
- You miss your period. You need to have your IUD removed if you are pregnant.

What are the Advantages?

An IUD is a convenient and long-term method of birth control. It can stay in place for 1-3 years but can be taken out by a doctor whenever you want. You can get pregnant as soon

as the IUD is removed. The IUD does not interfere with sexual intercourse. Alberta Health Care covers the cost of a doctor putting in the IUD. It does not, however, cover the cost of the IUD. If you have prescription benefits through work or Alberta Blue Cross they will usually cover the cost of the IUD. The average cost of a copper IUD is approximately \$155 .The average cost of a hormonal IUD is approximately \$350.

Things to Think About:

With the copper type of IUD, you may have:

- Cramps (especially with your period); for most women these get better after 3 months.
- About 5-15% of women have more bleeding during their periods.
- Sometimes light bleeding or spotting can happen between your periods.

With the hormonal IUD, you might have:

- A change in your bleeding pattern. For some women their periods will get lighter.
- Headache.
- Breast tenderness.
- Acne.
- Weight change.
- Mood changes.

These hormone changes usually lessen over time.

During the first three months after the insertion, you are at an increased risk of developing a pelvic infection. In addition, when using an IUD, you are not protected from contracting STIs. If you get an STI while using an IUD, you are at greater risk of developing a serious pelvic infection.

Because of this, the IUD is often recommended for women with one long-term partner and some doctors do not like to insert IUDs in women who have not given birth. However this is not the preference of all doctors. It is important that women are given the appropriate information about IUDs and then a woman can make an informed choice about whether or not the IUD is appropriate for her. If you have issues finding a doctor that will insert and IUD be persistent until you find someone who will do it for you.

For More Information Call

The Birth Control Centre	735-0010
Options Sexual Health Association	423-3737
Woman's Health Options	484-1124
STD Clinic	413-5156

The Canadian Women's Health Network – www.cwhn.ca
Sexuality and You – www.sexualityandu.ca

** Some of the above information was extracted from Capital Health handouts.

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