

Intrauterine Device (IUD)

- 99.5 - 99.8% effective
- Lasts five to 10 years
- No sexually transmitted infection protection

What is an IUD?

IUDs belong to a group of contraceptive options called Long Acting Reversible Contraception (LARC). These are the most effective forms of contraception.

IUDs are small contraceptive devices that are placed in the uterus (womb) to prevent pregnancy. All IUDs need to be fitted and removed by trained doctors.

At Family Planning Tasmania, two types of IUD are used:

- Hormonal IUD (sold as Mirena and Kyleena), which is made of plastic and releases small amounts of progestogen into the uterus. They are 99.7-99.9% effective.
- Copper IUD (sold as Multiload or Copper T), which is made of plastic and has copper wrapped around it. It is 99.5% effective.

IUDs do not give you protection from sexually transmitted infections (STIs). The best way to lessen the risk of STIs is to use a barrier method such as condoms.

How do IUDs work?

IUDs affect sperm movement to the egg and change the lining of the uterus (womb) to make it difficult for a fertilised egg to take hold. A fertilised egg is when a sperm and egg have merged together.

Hormonal IUDs thicken the mucus at the neck of the uterus (womb), blocking the sperm. They may also affect ovulation by changing the hormones that cause an egg to be released each month.

Copper IUDs affect the way sperm can move and survive in the uterus, and stop sperm cells from reaching & fertilising the egg. IUDs also change the lining of the uterus to stop a fertilised egg from sticking.

Differences between hormonal and copper IUDs

There are a number of differences between the copper and hormonal IUD:

| | Hormonal IUD | Copper IUD |
|--------------------|---|--|
| Menstruation | <p>After a hormonal IUD has been put in, you may have three to five months of frequent and irregular bleeding between periods.</p> <p>After this time, your periods may be shorter, lighter, and less painful.</p> <p>About 50 percent of women stop bleeding all together.</p> | <p>After a copper IUD has been put in, you may have a few weeks of irregular bleeding between periods.</p> <p>After this time, your periods may be heavier and more painful.</p> |
| Cost | <p>The hormonal IUD is covered by a health care card in Australia.</p> <p>It costs around \$6 if you are a card holder and around \$37 if you do not have a card.</p> | <p>The copper IUD is not covered by a health care card and may cost around \$120 outside a public hospital setting.</p> |
| Side effects | <p>The hormonal IUD may cause headaches, acne, breast tenderness and an increase in appetite in the first few months.</p> | <p>The copper IUD has no hormonal side effects.</p> |
| Medical conditions | <p>The hormonal IUD should not be used if you have had breast cancer in the last five years.</p> | <p>With rare exceptions, the copper IUD will not have any known effect on existing medical conditions.</p> |

Is an IUD right for me?

IUDs are suitable for most people. A doctor will assess you to see if it's right for you. The hormonal IUD is the most popular form of Long Acting Reversible Contraception (LARC) in the world. It is safe for women who have never had a pregnancy to have an IUD.

An IUD might not be right for you if you:

- have an active pelvic infection or abnormal vaginal bleeding
- are at high risk of STIs i.e. you have multiple partners & don't use a condom

- have had certain types of surgery to the cervix
- have a condition that might alter the shape of the uterus such as fibroids
- have had breast cancer in the last five years (hormonal IUD only) or
- have heavy painful periods or if you are anaemic (copper IUD only).

Advantages

- over 99% effective at preventing pregnancy
- lasts between five and 10 years
- once it has been inserted, you only need to check the strings monthly.
- a rapid return to usual fertility (ability to have a baby) once the IUD is removed.
- a hormonal IUD may help with heavy periods and period pain.
- does not interfere with breastfeeding.
- safe for women who have never had a pregnancy to have an IUD
- the device can be removed at any time by a trained doctor or nurse

Possible side effects

- A small risk of infection at the time the IUD is fitted and for the first three weeks (1 in 300 users).
- A small risk of perforation, which is when the IUD makes a hole in the wall of the uterus when it is fitted (1 in 500 users).
- If the IUD does not work and you get pregnant, there may be complications if you continue with the pregnancy.
- A small risk that the IUD can fall out.

Even if an IUD becomes infected or perforates, fertility is rarely affected.

Hormonal IUD side effects

Hormonal side effects are rare but may cause headaches, acne, breast tenderness and increased appetite in the first few months. You are more likely to develop ovarian cysts with a hormonal IUD. Most ovarian cysts are harmless and disappear without treatment in two to three months.

How does an IUD get inserted and removed?

- IUDs are inserted using a small procedure carried out by a trained professional in a clinic.
- Never attempt to remove an IUD yourself. Removal should only be undertaken by a health professional, who will remove it by pulling gently on the threads.
- Mild cramping and some bleeding may be experienced when the IUD is removed.
- It is important to consider contraception before your IUD is removed as your fertility will return to normal as soon as it is removed.
- Hormonal IUDs can be inserted at any time if there is no chance you are pregnant. They take seven days to start working as a contraceptive.
- Copper IUDs can also be inserted at any time as long as you are not pregnant. They start working as soon as they are inserted.
- For most women, it is safe to have an IUD fitted four weeks after having a baby.

How do I get an IUD?

An IUD can be inserted at Family Planning Tasmania clinics, some GPs, private gynaecologists and public hospitals.

At Family Planning Tasmania, an IUD insertion involves three appointments:

1. Assessment: discuss the procedure, check your suitability, and arrange any necessary tests.
2. Insertion: a doctor inserts the IUD.
3. Follow up: a check six weeks after the insertion.

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