

## TROUBLESHOOTING: When to call the office or seek medical attention

### How much bleeding is too much?

The first day or two, bleeding can be heavy with small clots due to the insertion procedure. With the hormone IUDs, spotting on and off is normal for a few weeks to up to 6 months.

### How much pain is too much?

Some cramping is normal. Ibuprofen (Advil, Motrin) and a hot water bottle are best for cramping pain.

### Other reasons to call the office

- Feel the "T" part of the IUD passing through your cervix
- Think you may be pregnant
- Missed, late, or unusually light period using the copper IUD
- You or your partner have been exposed to a sexually transmitted disease
- Severe cramps, pain, or tenderness in your abdomen
- Pain or bleeding during sex
- Unexplained fever or chills
- Unusual discharge from the vagina or sores on your genitals
- Unexplained vaginal bleeding

If you are concerned, please call the office. If pain or bleeding is intense, and you think you are pregnant or if you have pain and a high fever, go to your nearest emergency department. IUDs are extremely safe and although rare, infections or pregnancies can occur.

#### TRU Medical Clinic

Call 250-828-5126 or

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# INTRAUTERINE DEVICE (IUD) INFORMATION

The IUD offers safe, effective and reversible contraception. IUDs are covered under your TRUSU Extended Health & Dental (Green Shield Canada Benefits Plan).

### How do IUDs work?

The intrauterine device (IUD) is a small, plastic device that is inserted and left inside the uterus to prevent pregnancy. Depending on the type, an IUD must be replaced every 3, 5 or 10 years. The copper IUD releases a small amount of copper, which changes intrauterine chemistry, provokes low-grade inflammation and destroys sperm.

### Are there different types?

Currently there are two groups available in Canada: the hormonal group (Mirena and Kyleena) and the Copper group. They work in different ways.

The hormonal IUD releases a small amount of the hormone progesterone into the uterus. It does not contain estrogen. The lining of the uterus becomes thinner and the cervical mucus becomes thicker, making it harder for sperm to enter the uterus.

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# Benefits

- It is a highly effective method of contraception.
- It is easy to use. You don't have to take a pill each day.
- Does not interfere with sexual intercourse or daily activities. You cannot feel an IUD (neither can your partner).
- The hormonal IUDs decrease the amount of bleeding—some women do not have periods at all.

The IUD is for you if you want the most effective method to prevent pregnancy, want to delay pregnancy for at least 1-2 years, or would like to avoid estrogen products.

# Concerns and Risks

Some women have some bleeding and cramping during the first few days or months after the IUD is inserted. The bleeding can sometimes be daily and can be brown, red or pink. Bleeding can be frustrating, but settles down in 90% of cases by 3-6 months.

Pain can sometimes be due to the fact that the IUD is too large, malpositioned, or possibly related to an ovarian cyst formation. An ultrasound is useful to understand—and plan a solution for—this problem.

- **Expulsion:** The IUD can be pushed out of the uterus into the vagina. If this happens, it is no longer effective. The chance of this happening is 3%.
- **Perforation:** The IUD can perforate (or pierce) the wall of the uterus during insertion. This is very rare and occurs in only about 1 out of every 1,000 insertions.
- **Pregnancy:** It's rare, but pregnancy can occur while a woman is using an IUD. If the IUD is still in place, there can be risks to the mother and fetus, like miscarriage, infection or ectopic pregnancy. The IUD should be removed as soon as possible.
- **Infections:** Infections in the uterus or fallopian tubes can occur after insertion. It is more common in the first 21 days. It is usually due to chlamydial infection. If treated early, the IUD does not need removal.
- **Side effects:** Mirena/Kyleena/Jaydess users may experience side effects associated with progesterone, such as mood swings, breast tenderness, and bloating. However, periods become lighter, and are not present at all in 40-50% of women using an IUD.
- **STD's:** Although the IUD is an effective protection against pregnancy, it does not protect against STDs. If you and your partner are not in a relationship with only each other, use a condom every time you have sex.

## Before the insertion

Obtain urine samples to screen for chlamydia, gonorrhea, and pregnancy (please have this done at the lab three days prior to insertion).

*NOTE: If you take birth control pills, you can stop them three days prior to insertion (but use alternate protection if you're having sex). This way you should be on your period for the appointment, which can make it a bit easier to insert an IUD.*

## The day of the procedure

IUD insertion is performed in the office. To reduce the discomfort during the procedure, you can take 600mg ibuprofen 1-2 hours beforehand. Please bring a pad of your choice and we suggest a juice box to have a quick drink after. Avoid having sex, having a bath, or using tampons for 24 hours.

## After the procedure

Cramping can continue for 1-7 days. Ibuprofen (Motrin, Advil) or Naproxen (Aleve) are the best pain medications for cramping. Please make an appointment to check the strings in our office 4-6 weeks after the insertion.

## Intrauterine Device (IUD)

