

"Insanity is doing the same thing over and over again and expecting different results."

—ALBERT EINSTEIN

For the past 50 years, half of all pregnancies in the United States have been unintended. We now need to move on to the more effective "Get It and Forget It" methods: implants and IUDs.

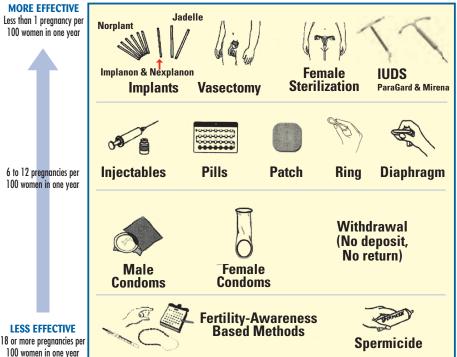
VERY, VERY important myths about IUDs:

MYTH: IUDs cause abortions. NO, this is not true. Major organizations in reproductive health throughout the world, and textbooks in reproductive health, strongly state that IUDs do not disrupt an implanted pregnancy and therefore do not cause abortion. IUDs work in several ways to prevent pregnancy.

- The hormonal IUD, called Mirena, works most often by blocking sperm from passing through mucus in a woman's cervix. This prevents fertilization, or when a man's sperm enters a woman's egg. Mirena occasionally prevents ovulation, when a woman's ovary releases an egg. Less often, Mirena may block implantation. This is when a fertilized egg attaches to the inside of a woman's uterus.
- The copper IUD, called ParaGard, works by preventing fertilization. Copper is a spermicide. The copper in the ParaGard IUD kills sperm when they are inside the uterus, and they cannot reach a woman's egg. ParaGard may block implantation of a fertilized egg in the rare instances where fertilization occurs.
- **MYTH: IUDs cause cancer.** This is not true! The hormonal IUD called Mirena prevents endometrial cancer. The copper IUD called ParaGard has been shown to prevent both endometrial and cervical cancer.
- **3 MYTH: Women with fibroids cannot use an IUD.** For most women with fibroids, this is not true. In fact, the Mirena IUD can be used to treat bleeding and pain in women with fibroids. In rare cases, a fibroid can change the shape of the uterine cavity and it may not be possible to insert an IUD.
- MYTH: Women cannot use an IUD until they have had a baby. SIMPLY NOTTRUE! Both the World Health Organization (WHO) and the Centers for Disease Control (CDC) have said the IUD is a good choice for birth control in women who have not had a baby. Also, teens who have never been pregnant CAN USE IUDs! Get It and Forget It birth control is a great way for teenagers to prevent pregnancy for many years.
- **MYTH: IUDs cost too much.** Over time, IUDs and implants are definitely the least expensive reversible methods of birth control. Some insurance programs help cover the cost of IUD and implants, and so do some college and community health services.
- **6 MYTH: IUDs cause infections.** Actually, women using Mirena IUDs in research studies were found to have a lower risk of pelvic infection, or PID, compared to women not using an IUD. Placing an IUD does involve a very small risk of infection. This risk is only 0.1% and is only during the two weeks following IUD placement. After two weeks, there is no higher risk of pelvic infection in women using an IUD.

Pelvic infections are serious, and can cause problems with pain and infertility. Infections cause infections, IUDs do NOT cause infections. These infections are usually sexually transmitted and can be prevented by perfect condom use. All women at risk of infection should use condoms every single time they have sex.

COMPARING TYPICAL EFFECTIVENESS OF CONTRACEPTIVE METHODS



How to make your method most effective

After procedure, little or nothing to do or remember.

Vasectomy: Use another method for first 3 months and until there are no motile sperm on 2 semen analyses.

Injections: Get repeat injections on time

Pills: Take a pill each day Patch, Ring: Keep in place, change on time

Condom, Diaphragm: Use correctly every single time you have sex Fertility-awareness based methods: Abstain or use condoms

on fertile days. Newest methods (Standard Days Method and Two Day Method) may be easier to use and consequently more effective. Withdrawal, spermicide: Use correctly every time you have sex.

Adapted from WHO 2007 and Contraceptive Technology, 20th Edition

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If you have questions about the "Get It and Forget It" methods, also called the Long Acting Reversible Contraceptives, you can go to managing contraception.com, bedsider.org or planned parenthood.org

"GET IT AND FORGET IT"

Women are 20 times more likely to become pregnant in one year if they use contraceptive pills, patches or rings rather than using an intrauterine device (IUD) or contraceptive implant.

Winner, B., Peipert, J., Zhao, Q., Buckel, C., Madden, T., Allsworth, J., & Secura, G. (2012). Effectiveness of long-acting reversible contraception. N Engl J Med, May 24 (21); 3: 1998-2007.

Now may be the time for you to look at IUDs and implants, or "Get It and Forget It" birth control.

There are two IUDs available in the United States. Both are small plastic devices easily placed inside the uterus by a clinician. They work for a long, long time and can be taken out any time you are ready to become pregnant. The Mirena IUD is also called the hormonal IUD, or levonorgestrel IUD. It may be used for up to 7 years and it is actually the most effective way to reduce menstrual bleeding, pain, and cramping. The ParaGard IUD, or Copper T IUD, works for 12 years and is also the most effective form of emergency contraception. It is much more effective than emergency contraceptive pills. The contraceptive implant is placed under the skin of your upper arm, and provides excellent protection against pregnancy for 3 to 4 years. Return of fertility is rapid after stopping use of all 3 Get It and Forget It contraceptives.

VERY, VERY important facts about IUDs and implants:

The two IUDs and the two implants, Nexplanon and Implanon, are the most effective methods of birth control ever developed that allow a woman to become pregnant as soon as they are removed. These methods are called Long Acting Reversible Contraception, or LARC methods. "Reversible" means that these methods of birth control stop working as soon as they are removed. We like calling them Get It and Forget It methods. IUDs are as effective at preventing pregnancy as having a tubal sterilization ("getting your tubes tied") or relying on a man's vasectomy. Women are 20 times more likely to become pregnant if they use contraceptive pills, patches or rings rather than if using an IUD or implant. This is explained largely by the fact that once you have an IUD or implant placed you don't have to think about it for years. This is why we call IUDs and implants the GET IT AND FORGET IT! methods.

2 The IUD is the method of birth control chosen most often throughout in the world and its use is on the rise in the United States.

Only about 5% of women in the United States choose the IUD. However, 18% of women who are ObGyn's (Obstetrician/Gynecologists) use IUDs. This suggests that women who know the very most about birth control choose and use IUDs much more often than other women. In St Louis, 75% of women who are given the choice of using any contraceptive method for free are choosing to use an IUD or an implant as part of the Contraceptive CHOICE Project. This program is already showing a fall in teen births at the Barnes Jewish Hospital.

3 Over time, the IUD and implant cost less than any other reversible method of birth control available. For many women there is an initial cost of purchasing the IUD or implant and having it inserted in a medical office. However, over time, IUDs and implants cost much less per year than pills, patches, rings or injections. Some women who do not have insurance that covers birth control pay \$50 to \$90 a month for each package of brand-name birth control pills! Some thoughts about getting around the high cost of having an IUD or implant placed:

- If you want an IUD or implant but can't afford it, start saving today!
- Hospitals, doctor's offices, college health clinics, community health clinics as well as IUD and implant manufacturers may offer financial help.
- The websites on the back of this pamphlet can help you find a way to start a **Get It and Forget It** method. Some of them may be able to help you find other ways to lower the cost.
- Keep in mind that the most important cost of any contraceptive is the cost to you if you become pregnant. There is a very low risk of pregnancy when using an IUD or implant. A person using these methods is much less likely to have to deal with the emotional and financial expenses associated with an unwanted pregnancy.

If a woman or man is sexually active then please do not forget that perfect use of condoms every time is the only way to be protected from sexually transmitted infections. Women and men at risk of infection should always use a condom.

You may copy all or part of this 11"x17" presentation. Please credit as follows: Get It and Forget It; Camaryn Chrisman Robbins, MD, MPH; Jeffrey F. Peipert, MD, MPH and Robert A. Hatcher, MD, MPH 7-9-12

Once in place, IUDs and implants work or years and are sometimes called GET IT AND FORGET IT METHODS



Implanon & Nexplanon Implants

Contraceptive implants are placed under the skin of the upper arm, where they remain effective for 3 to 4 years, maybe longer. This birth control method stops ovulation more completely throughout the first 3 years after insertion than any currently available contraceptive. Unpredictable spotting and bleeding improves over time. The total days of bleeding a woman has are decreased by implants.



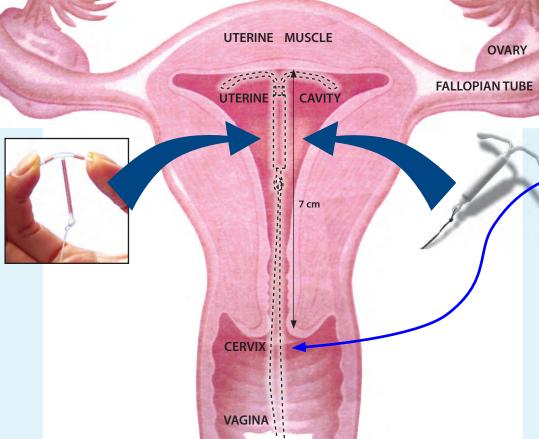
WHAT ARE THE ADVANTAGES OF THE COPPER IUD?

- The copper T 380 A IUD is effective for at least 10-12 years.
- ParaGard may be used as emergency contraception if inserted within 5 days of unprotected intercourse. **If 1000** women have a copper IUD inserted as an emergency contraceptive, only 1 will become pregnant! This is the most effective emergency contraception available to women.
- ParaGard prevents ectopic, or "tubal", pregnancies. In fact, women using ParaGard have a 10 times lower risk of ectopic pregnancy than women who are not using any contraception.
- Use of an IUD is convenient, safe, and private.
- IUDs are the most COST EFFECTIVE REVERSIBLE CONTRACEPTIVES ever developed!
- The copper IUD has no hormones. It may be used by women who cannot use estrogen—containing birth control pills, patches or vaginal rings.
- ParaGard IUD may be used in women who are breastfeeding.
- ParaGard IUD may be inserted immediately following the delivery of a baby (vaginally or by cesarean section) or immediately after an abortion.
- Once a ParaGard IUD is removed, fertility returns right away.
- Here is a fascinating and unexpected advantage of copper IUDs: A number of studies of women with copper IUDs have shown a decreased risk of uterine and cervical cancer.
- Most women who have a ParaGard placed will continue to have regular periods. For some women, having a monthly period is important and the ParaGard IUD is an excellent choice for them.

WHAT ARE THE DISADVANTAGES OF THE COPPER IUD?

- Women may have up to a 35% increase in menstrual bleeding while using ParaGard, as well as increased cramps.
- If you already have heavy, painful periods and want an IUD, ParaGard may make these symptoms slightly worse and may not be the best choice for you.
- Most women feel mild to moderate discomfort during the IUD insertion. Rarely, a woman may feel very strong cramps during the IUD insertion. This discomfort improves quickly after the IUD has been placed. A woman may want to take an anti-inflammatory such as ibuprofen one hour before her appointment and then every 6 hours the day of placement.

About 2 percent of women who have had either a Paragard or Mirena placed will expel the IUD in the first year. This means the IUD may be pushed out of the uterus. Women at higher risk of expulsion include women who have never had a baby, have heavy and/or painful periods, or have the IUD placed right after delivery of a baby or after an abortion. Symptoms of expulsion include cramping, vaginal discharge, bleeding, being unable to feel the IUD strings, or being able to feel the hard plastic of the IUD at the cervix or in the vagina. Because expulsions can also happen without symptoms, your provider will discuss how to check the IUD strings so you know the IUD is in place.



In this diagram, the distance from the opening of the cervix up to the top of the uterine cavity measures 7.0 centimeters (just less than 3 inches). Before having a baby, 70% of women 15-25 years of age have a uterus this large or larger. A uterus this size has adequate room for a Mirena or ParaGard IUD.

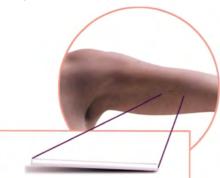
HOW IS AN IUD PLACED?

Whether you choose the Mirena or ParaGard IUD, they are inserted the same way. A pelvic exam is performed to determine the size of your uterus, and its position in your pelvis. A speculum is then placed in the vagina in order to see your cervix, similar to when you have a pap smear. For some women, a local anesthesia may be injected to numb the cervix before the cervix is dilated, or opened. The IUD is gently passed through the cervix and into the uterine cavity. The IUD insertion itself takes 3 to 5 minutes. There will be soft strings that are attached to the IUD and that are left long enough to extend through your cervix and into your vagina (but not outside of your vagina). These allow you and/or your provider to check that the IUD is still in place, and also allow your provider to remove the IUD. Your provider may ask to see you for a return office visit 4 to 6 weeks after the IUD was placed to check that the IUD is still in place, and talk to you about any concerns you may have.

HOW IS AN IUD REMOVED?

If you decide to have your IUD removed, your provider will place a speculum in your vagina to see the cervix. Then she or he will grasp the IUD strings with a small instrument. With a gentle pull the IUD can be removed in SECONDS, with minimal or NO cramping. You can get pregnant right away after IUD removal. Be sure to have a plan for switching to another birth control if you do not want to become pregnant.

IUDs and implants are immediately reversible when removed. Sometimes they are called the Long Acting Reversible Contraceptives or LARC methods.



In the remarkable St. Louis Contraceptive CHOICE Project, 69% of adolescents aged 14 to 17 years chose to use an IUD or an implant. Of these young teenagers using a LARC method, 63% chose to use the Implanon implant.

Renee Mestad, et al, Contraception, 2011

There may be some bruising or pain after placement of an implant. Infections at the site of the implant are rare.

The Hormonal IUD: The Mirena IUD releases small amounts of a progesterone-like hormone called levonorgestrel every day. The hormone released by the IUD causes cervical mucus to thicken. Sperm is prevented from reaching the inside of the terus and fallopian tubes. This means that sperm from a man cannot enter a woman's egg. The Mirena IUD provides pregnancy protection for 5-7 years but can be removed any time a woman wants to become pregnant.

WHAT ARE THE ADVANTAGES OF THE HORMONAL IUD?

- The Mirena IUD is effective for at least 5-7 years.
- Mirena decreases menstrual cramping and dramatically decreases menstrual blood loss. In fact, the hormonal IUD is the most effective medical therapy for heavy menstrual bleeding. Women using this IUD experience a reduced flow by 90-95%.
- About 20% of women experience an absence of menstrual bleeding after one year of using the hormonal IUD.
- Mirena prevents ectopic, or "tubal", pregnancies. In fact, women using Mirena have a 10 times lower risk of ectopic pregnancy than women who are not using any birth control.
- Use of an IUD is convenient, safe, and private.
- IUDs are the most COST EFFECTIVE REVERSIBLE CONTRACEPTIVES ever developed!
- Mirena does not contain estrogen, and may be used by women who cannot use estrogen—containing birth control like pills, patches or vaginal rings.
- Mirena IUD may be used by women who are breastfeeding.
- Mirena IUD may be placed immediately following the delivery of a baby (vaginally or by cesarean section) or immediately
- Once a Mirena IUD is removed, fertility returns right away.
- Mirena appears to have a 50% protective effect against pelvic infections.
- Endometrial cancer is one of the most common reproductive cancers in women. It can be prevented if postmenopausal women on estrogen therapy use Mirena.
- Mirena IUDs are often prescribed for women with:
- Heavy menstrual bleeding
- Cramping or pain with periods
 - Anemia
- Adenomyosis Fibroids Endometrial hyperplasia
- Endometriosis
- Dysfunctional uterine bleeding (DUB)

WHAT ARE THE DISADVANTAGES OF THE HORMONAL IUD?

- If you choose to have a Mirena IUD placed your periods WILL change.
- You should NOT start this method of birth control unless it is OK if your periods change.
- Bleeding patterns after Mirena IUD placement are unpredictable. Women may bleed more often at first, and over time bleeding may become infrequent
- Women who choose the Mirena IUD should be encouraged to be patient for the first 6 to 8 months, their spotting and bleeding WILL decease over time.
- If not having periods is unacceptable, the hormonal IUD may not be the best choice for you. The good news for many women is that 20% of women will stop having periods after 1 year of Mirena IUD use. This is an expected
- Mirena contains a hormone. While most of this hormone stays in the

love it for many years!"

Mirena can cause cramping

and increased days of bleeding

in the weeks or months after

the IUD is placed, but this gets

better over time. Women

considering Mirena may find

the advice of a North Carolina

Nurse Practitioner who has in-

serted over 200 IUDs in the last

year helpful: "I tell women,

you may not like it for several

months, but you're going to

 Most women feel mild to moderate discomfort during the IUD insertion. Rarely, a woman may feel very strong cramps during the IUD insertion. This discomfort improves quickly after the IUD has been placed. A woman may want to take an antiinflammatory such as ibuprofen one hour before her appointment and then every 6 hours the day of placement.

side effect and is not "unhealthy". uterus, a small amount can make its way into the bloodstream and cause side effects. These may include acne, hair loss, mood changes and even depression. These side effects occur in VERY FEW women.