





Once in place, IUDs and implants work for years and are sometimes called

# “GET IT AND FORGET IT” METHODS

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

**The Copper IUD:** ParaGard is a flexible T-shaped plastic device with three sleeves of copper wrapped around the IUD. ParaGard prevents pregnancy because the copper ions released by the device act as a spermicide. This means sperm are unable to reach the fallopian tubes, and unable to enter a woman's egg. ParaGard is FDA-approved for 10 years of use. Excellent research shows that ParaGard is highly effective for 12 years. It can be removed any time a woman wants to become pregnant.

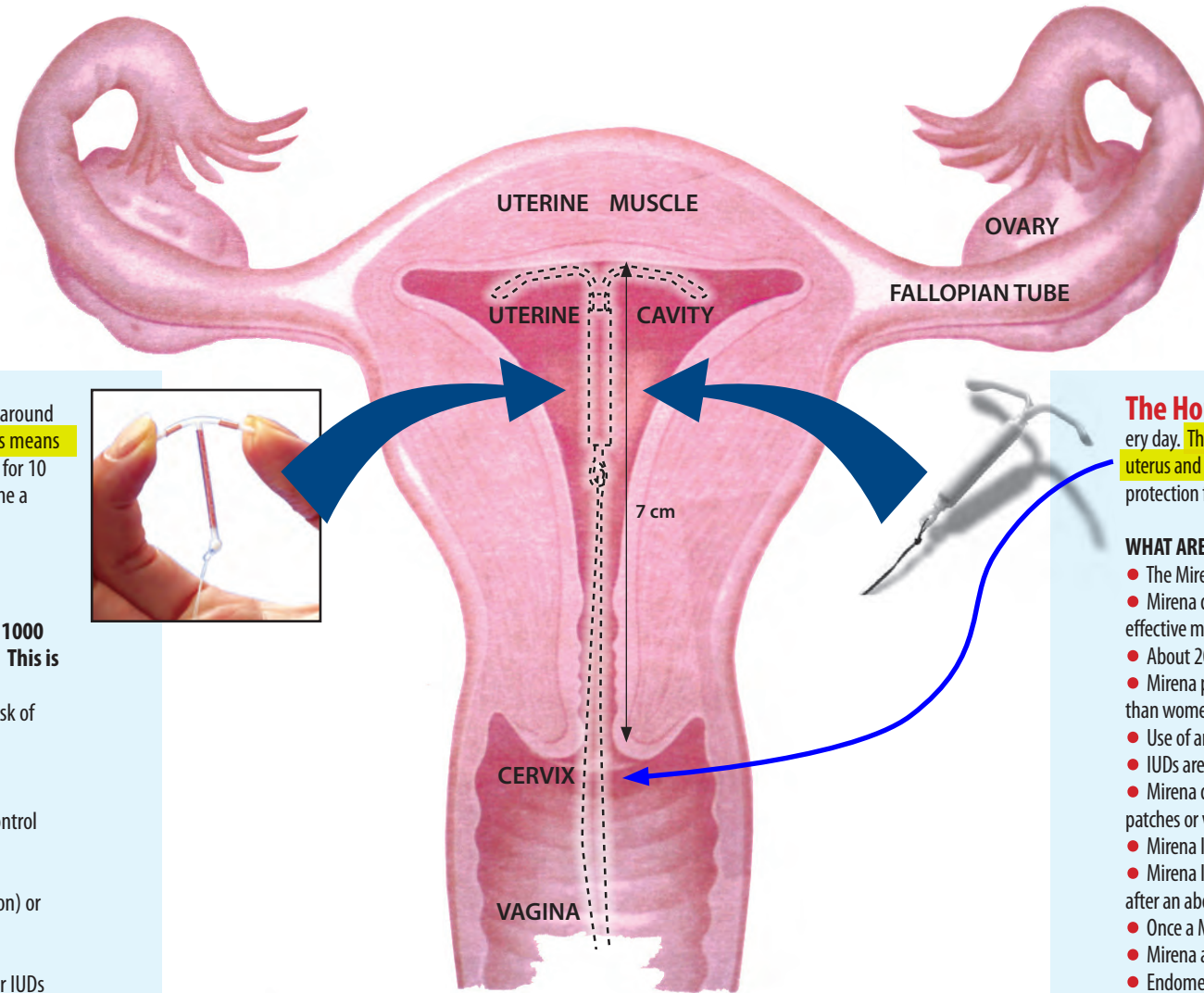
### WHAT ARE THE ADVANTAGES OF THE COPPER IUD?

- 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.

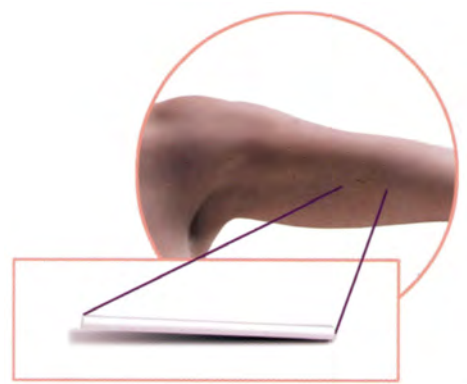
### HOW IS AN IUD REMOVED?

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.

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 uterus 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 after an abortion.
- 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
  - Endometriosis
  - Adenomyosis
  - Anemia
  - Dysfunctional uterine bleeding (DUB)
  - Fibroids
  - Endometrial hyperplasia

### 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 and very light.
- Women who choose the Mirena IUD should be encouraged to be patient for the first 6 to 8 months, their spotting and bleeding WILL decrease 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 side effect and is not “unhealthy”.
- Mirena contains a hormone. While most of this hormone stays in the 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.
- 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.

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 inserted over 200 IUDs in the last year helpful: “I tell women, you may not like it for several months, but you’re going to love it for many years!”