

Intrauterine Device - IUD

How does the IUD work?

The IUD is a small plastic medical device that is inserted through the cervical canal and into the uterus. IUDs work primarily by preventing fertilization. IUDs are safe for most people, including people who have never given birth. Older styles of IUDs used in the 1960s were associated with medical complications not seen with today's models. The IUD is not ideal for all people. You should discuss your particular situation and contraceptive needs with the clinician who performs the IUD insertions.

The following IUDs are available through the Student Health Center: Paragard, Kyleena and Mirena. The Paragard IUD contains copper and is effective for 10 years. Copper inhibits the functions of the sperm. Mirena and Kyleena both contain a progestin hormone, levonorgestrel. Kyleena is effective for 5 years; Mirena is effective for 8 years as a contraceptive, but its menstrual cycle control fades after 5 years. Progestin changes the cervical mucus and the lining of the uterus, inhibiting sperm entrance and movement into the uterus or fallopian tube. The Mirena IUD may also be prescribed to control heavy uterine bleeding in people with no contraceptive needs. All the IUDs are equally effective for contraception. Because the Kyleena IUD is smaller in size, it can be used when the uterus is too small to accommodate Mirena or Paragard.

It is important to remember that:

- IUDs do not control acne as do some oral contraceptives
- IUDs do not regulate the menstrual cycle or prevent ovarian cysts as do some oral contraceptives
- Mirena and Kyleena may reduce the amount of bleeding during your period and the number of bleeding days in your period. Some people experience very light or no monthly bleeding
- Paragard may increase the amount of bleeding and cramping, and it may make your period longer. This usually improves with time and can be managed with ibuprofen or naproxen

Before having an IUD inserted, you will need screening tests for pregnancy and sexually transmitted infections. Risks and benefits of all methods of birth control should be considered before selecting the best method for the individual.

How effective is the IUD?

The intrauterine device (IUD) is one of the most effective Long Acting Reversible Contraceptives (LARC). With an effectiveness rate of over 99%, it may be the ideal method for people not planning pregnancy for several years. IUDs are effective contraceptives for 5-10 years, depending on the type selected.

Risks:

- Infection – there is a risk of infection with placement of the IUD that is greatest in the first three weeks after the insertion. The symptoms could be pelvic pain, fever, or foul smelling discharge. The treatment could be antibiotics, removal of the IUD or both.
- Expulsion – the uterus pushes out the IUD. Symptoms would be bleeding, cramping, and feeling strings when you hadn’t previously, or lengthening strings (or feeling a plastic object in your vagina)
- Failure of the device – pregnancy rates are VERY low with an IUD (below 1%), but if you have pregnancy symptoms then please do a pregnancy test. For the very few pregnancies that do occur, there is an increase in ectopic pregnancies (pregnancy outside the uterus), although still a decrease in rate over the general population.
- Perforation – There is a risk of the IUD being placed into the wall of the uterus or through the wall of the uterus. This is very rare, but would require a small surgery for removal. The symptoms can vary, but would likely be a persistent pain after insertion and not feeling the strings.

** Please note – there are numerous cases of menstrual cups (such as Diva Cup which is sold in our pharmacy) inadvertently removing IUDs. The breaking of suction with removal of the menstrual cup can put you at risk for accidental removal of the IUD. Please use with caution if at all.

Comparison of serum level of progesterone in picograms (one trillionth of a gram)

Type of contraceptive	Serum Level of Levonorgestrel
Combination oral contraceptive (also contains estrogen)	3,000 – 5,000 pg/ml depending on brand
Progestin only minipill	1,000 – 1,500 pg/ml
Mirena IUD	150 – 200 pg/ml
Kyleena IUD	65-170 pg/ml
Paragard IUD	Hormone free

Instructions and Reminders for IUD Appointments:

- No unprotected intercourse for 2 weeks prior to your IUD insertion appointment.
- Take three Ibuprofen 200 mg tablets 1-2 hours before your appointment. Ibuprofen should be taken with food to prevent stomach irritation. Do not take the medicine if you are allergic or have stomach problems.
- Please arrive 30 minutes before your appointment time for the pregnancy test. We cannot start the procedure without the result.
- If possible, do not plan sports activities, exams, meetings, etc. for 2-3 hours after your procedure in case you need to rest.

Your provider will let you know if there are special instructions required prior to your IUD insertion:

- If misoprostol vaginal tablets were ordered for your procedure, please place both tablets high in the vagina 3 to 4 hours before your procedure. First, empty your bladder, then insert the tablets and lie down for at least an hour to allow them to absorb.
 - STI testing needed—please go to the lab to do the testing at least 1 week before your IUD insertion appointment.
 - Other Instructions: Eat and drink normally the day of the insertion procedure.
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Have questions?

Appointment Line:	831-459-2500
Nurse Advice Line:	831-459-2591
SHS Main Phone:	831-459-2211
Pharmacy:	831-459-2360

IUDs do not protect you against sexually transmitted infections. You must still use a condom, practice safer sex and get regular STI testing to reduce your risk of an STI and identify problems early.