INTRAUTERINE DEVICE (IUD)

What is an IUD?
An IUD is a type of birth control. It is a small T-shaped device that is inserted into the uterus to prevent pregnancy. There are three kinds of IUDs -- Mirena, ParaGard, and Skyla. Mirena is made of flexible plastic that delivers small amounts of a hormone called progestin to the uterus. It can provide contraception for up to 7 years. ParaGard is made of flexible plastic, which is wrapped with a copper coil and does not contain hormones. It can provide contraception for up to 12 years. Skyla is a smaller hormonal IUD that can provide contraception up to 3 years.

What is an IUD used for?
An IUD is used for contraception, or to prevent pregnancy. Both Mirena and ParaGard prevent sperm from reaching an egg in the uterus. Mirena may also prevent ovulation, or the release of an egg from the ovaries, because it releases a hormone called progestin. It is possible to get pregnant very soon after having an IUD removed.

What happens during the procedure?
You may be asked to take a pregnancy test to make sure you are not pregnant. Your provider may also do a pelvic exam to determine which way your uterus is facing. He or she will then insert a speculum into your vagina, which is the same instrument used during a Pap smear. Your cervix, the opening to your uterus, will be cleaned with an antiseptic solution. Your provider may use a cervical dilator to open your cervix in order to make inserting the IUD easier. You may feel cramping when the dilator is inserted. He or she will then use a long, plastic tube to insert the IUD into your uterus. The IUD springs open, making the T shape, and your provider will pull the plastic tube out. He or she will then cut the IUD strings so they are about \frac{1}{4} - \frac{1}{2} inch long and hang right outside of your cervix. The strings will remain concealed within the vagina and you should not be able to feel them.

What are the risks?
• Bleeding
• Cramping during and after the procedure. Rarely, the cramping will be strong enough to push the IUD out of the uterus.
• A small risk of:
  o Infection or poking a hole in the uterus

What should I do to prepare for the procedure?
• Do not have unprotected sex for 2 weeks before you get the IUD as we will not be able to confirm a negative pregnancy test and will be unable to perform the procedure.
• If you are using a different type of contraception, like the Pill or Nuva Ring, continue to use it as prescribed by your doctor
• Come to your appointment with a full bladder so you can take a pregnancy test before the procedure

What should I expect after the procedure?
You will be able to drive yourself home after this procedure. You may bring someone to drive you if you would like.

• You may experience cramping. You can take an over-the-counter (OTC) pain reliever.
• You may have vaginal bleeding- you can wear pads or tampons.
• Changes in your monthly periods:
  o Mirena: For the first 3-6 months, your period will likely become irregular and you may have frequent spotting or light bleeding. After your body adjusts, the number of days you experience bleeding will likely decrease. Your periods may eventually stop while the Mirena is in place.
  o Skyla: Changes will be similar to Mirena except that you are more likely to continue having a regular period since the amount of hormones in Skyla is smaller.
  o ParaGard: For the first 3-6 months, your period will likely be heavier and last longer. You may also have spotting or light bleeding between periods. After your body adjusts, you may continue to experience longer and/or heavier periods than what is typical for you, or you may have periods that go back to what they were like before you got the ParaGard.
• It takes the IUD seven days to become effective. You should continue to use your current birth control and/or condoms during that time.
• If your IUD falls out you will need to use a back-up birth control method, like condoms.
• An IUD does not protect against sexually transmitted infections (STIs). Only condoms can protect against STIs.

Call your provider if you experience:
• Heavy vaginal bleeding (soaking more than 1 pad an hour)
• Foul-smelling vaginal discharge
• Pain that is not relieved with an OTC pain reliever
• Fever greater than 100.4 degrees Fahrenheit
• Pain during sex
• Any signs of pregnancy

Office number: (404) 778-3401, Monday – Friday 8:00AM – 5:00PM
• For emergencies after hours, calling this number will connect you to the operator, who will page the OBGYN physician on call.

If your pain becomes severe, or your fever rises above 102° F in the first 3 days after the procedure you should go to the emergency room.