

# The Levonorgestrel Intra-Uterine System (LNG-IUS or Hormone Coil)



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## What is an intra-uterine system?

The intra-uterine system (or IUS) is a safe and long-term form of contraception, which is over 99% effective at preventing pregnancy.



The IUS is effective as contraception for 5 years, (or until the menopause if you are 45 or over at time of fitting). It can be removed earlier if required and you would immediately return to your original level of natural fertility.

The IUS is a T-shaped plastic device which contains levonorgestrel; a hormone similar to progesterone. It is fitted in the womb and has two soft threads attached to the end which hang through the cervix into the top of the vagina. This makes it possible for us to remove it easily, if needed. The threads tuck out of the way and won't interfere with sexual intercourse. Please note that the IUS does not offer any protection against sexually transmitted infections.

It is still possible to use tampons or a menstrual cup if you have an IUS fitted.

## How does it work?

The IUS continuously releases a low dose of levonorgestrel which works by:

- thinning the endometrium (lining of the womb), which prevents an egg from implanting
- thickening the mucus at the entrance to the womb, which stops sperm from reaching the egg
- stopping the release of an egg (ovulation) in some women.

After the IUS has been inserted, it usually takes 7 days to start working effectively. This means that you need to use additional contraception (such as condoms) or avoid having sex for 7 days after having the IUS fitted.

It can be fitted at any time during your menstrual cycle, providing there is no possibility that you may be pregnant. It can also be fitted immediately after a miscarriage or abortion under 24 weeks.

### **For women close to the menopause:**

If your IUS was fitted at or after the age of 45, it can be relied upon for contraception until you reach the menopause. However, if the IUS stops your periods it can be difficult to tell when the menopause has started. If you are over 50 and want to have the IUS removed you will be able to find out whether you have reached the menopause by discussing your history with a GP or specialist and having a blood test. If the blood test confirms you have reached the menopause we can then plan to remove the IUS.

Alternatively, you can choose to keep the IUS and then come to discuss removal when you reach the age of 55 or 56. 96% of women have reached their menopause by the age of 55.

## Would an IUS be suitable for me?

### **The IUS is suitable:**

- for most women, including those who have never been pregnant
- if you want a reliable method of contraception
- if you have heavy, painful or troublesome periods
- for 4 years, as the progestogenic part of HRT (hormone replacement therapy)
- for 4 years, to keep the endometrium thin in women using tamoxifen treatment
- as treatment for pre-menstrual syndrome in some women.

If you have recently given birth it is recommended that you wait for 1 month before having the IUS fitted.

### **The IUS is not so good if:**

- you do not want to use hormonal contraception
- you like to have regular periods.

### **We would not normally fit an IUS if:**

- there is a chance you might be pregnant
- you have an untreated sexually transmitted infection
- your womb is a different shape to normal (some women are born with a different-shaped womb or may have had surgery to their womb which changes its shape)
- you are having unexplained vaginal bleeding
- you have had breast cancer within the last 5 years
- you have cirrhosis of the liver or liver tumours
- you have arterial disease or a history of heart disease or stroke.

If any of these points apply to you, we will talk with you to discuss your options and whether we can still fit the IUS.

## Are there any risks or complications?

Most of the hormone from the IUS remains in the womb but a small amount is released into the rest of the body. Some women experience side-effects from this including:

- changes in mood
- weight loss or gain
- changes to their skin
- hair loss
- changes to sex drive (libido)
- breast tenderness
- headaches.

Sometimes these changes are for the better; for instance some women find their mood improves. If you experience any unwanted side-effects after having the IUS fitted our advice would be to wait for 3-6 months, as they often settle down by this time. If you have had the IUS fitted for contraception as well as period control and find the side-effects are unacceptable, we may be able to change the device to another type of IUS with a lower dose of hormone, which lasts for 3 years.

- Some women will experience irregular bleeding for up to 6 months following fitting of the device. However, most women will find that they have lighter bleeding or no bleeding at all with an IUS.
- There is a small chance of infection during the first 20 days after an IUS is fitted. This may occur when bacteria which are normally found in the vagina (where they have no harmful effects) are pushed up into the womb during the fitting process. They can then cause inflammation and other symptoms of an infection. If a sexually transmitted infection (such as chlamydia) is present in the vagina this can also be pushed up into the womb.
- 1 in 20 IUS can fall out or be pushed out by the womb. If this does happen, it will usually be within the first few weeks after fitting.

- If you were to become pregnant while fitted with an IUS, there is a very small risk that the pregnancy will be ectopic. This is when the egg is implanted outside of the womb, usually in the fallopian tubes. However, the overall risk of an ectopic pregnancy is less in women using an IUS than in women using no contraception at all.
- An IUS may occasionally cause symptoms such as discomfort throughout your monthly cycle or when having intercourse. If you are having these symptoms we would firstly rule out other causes of pain, such as infection. If the IUS is otherwise working well for you, but is uncomfortable, we may be able to fit a smaller IUS.
- About 1 in 100 women experience lost threads. You may notice this if you try to check the threads and can't feel them, or it might be noticed by your doctor/gynaecologist, during an internal examination, for example during a cervical cytology screen (smear) or at your 6 week check after the fitting. If we can't see the threads, we or your GP will organise an ultrasound scan to find out what has happened.

The following are possible causes of lost threads:

- o It is most likely that the threads have simply been drawn up into the cervical canal. Even if the threads can't be seen in your vagina, the IUS will still usually be in the right place within your womb and working properly. We will easily be able to get them back down when it is time to remove the IUS.
- o Very occasionally lost threads will mean that the IUS has fallen out unnoticed.
- o Rarely, (about 1 in 1000 chance) an IUS goes through the wall of the womb into the abdomen. This is called 'perforation'. If this happened you would need surgery to remove it.

If you are unable to feel your threads or you are worried your IUS has fallen out it is important to abstain from sex or use

alternative contraception such as condoms. Please seek medical advice as soon as possible from your GP or a nurse or doctor at the Sexual Health Service clinic. You may need to use emergency contraception if you have had sexual intercourse before discovering your IUS has fallen out.

## Preparing for the IUS fitting

Before we fit an IUS you will need to have a pre-fit consultation. We would do this even if you already have another type of device such as a copper IUD, or are having your current IUS replaced. The pre-fit consultation may be face to face or over the telephone. During this consultation you will receive more information about the IUS and will have a chance to ask any questions you might have. You will also be asked about your medical background.

All women planning to have an IUS fitted are offered a screen for chlamydia infection before or at the time of the fitting. The reason we do this is that you could have chlamydia but it is causing no symptoms. During placement of the IUS in the womb, the chlamydia infection may be taken from the cervix, where it is causing no symptoms, up into the womb where it can cause inflammation, pain and bleeding. Anyone who is, or has been, sexually active may be at risk of having chlamydia. The chance of this varies according to factors such as age and sexual history. You are at a higher risk of having chlamydia if:

- you are under 25
- you have had sexual intercourse with more than one partner
- you have had a recent change of sexual partner
- your current or recent sexual partners have recently had other sexual partners.

It is your choice whether to take up the offer of a chlamydia test, but we do recommend that you have it done, even if you don't feel that you are likely to have chlamydia.

## To ensure fitting can go ahead

- Do not have sex from the first day of your period until the fitting unless you are using the **pill, patch or injection reliably**.
- Do **not** rely on condoms.
- If you are **not** using reliable contraception and are not having regular periods, **please do not have sex for 3 weeks** before the fitting. You may need to bring an early morning urine sample to your appointment, in case a pregnancy test is necessary.
- If you are having a **current IUS removed and replaced**, avoid sex for 7 days before your appointment.

## How is the IUS fitted?

### On the day of your appointment:

- Allow at least 90 minutes for your appointment. Whilst it is likely that you will be able to leave shortly after the fitting, we may ask you to stay for a short while if you feel lightheaded.
- Take a painkiller, such as paracetamol or ibuprofen, about an hour before your appointment. Take whatever you normally use.
- Have breakfast and lunch as usual on the day of your appointment.
- Occasionally, women have abdominal pain and feel lightheaded following an IUS fitting. While this is not dangerous or serious, if this does happen, a friend or family member should ideally accompany you home. You will need to avoid driving immediately after the fitting. If you do come unaccompanied, please arrange for someone to be available for us to contact to collect you, just in case this happens. Alternatively, you can arrange to be taken home by taxi.
- There is room for a pram in the clinic but we don't have childcare facilities. If you need to bring children with you, please make sure that you have someone with you to supervise

them while they are in the waiting room. You will not be able to do this yourself during the procedure.

### **During the fitting process:**

A health care assistant or nurse will be present during the procedure to support you and make sure that you are comfortable.

You will be asked to undress your lower half and to then lie on the bed in the clinic room. The doctor or nurse fitting your IUS will use a device called a speculum to be able to see your cervix. They will measure the length of your womb and then fit the IUS.

The procedure can be uncomfortable and may be painful. We can give you some local anaesthetic in the form of a numbing gel in your cervix and womb. This is put in place with an applicator, not as an injection. Occasionally, if this is not enough to relieve any discomfort, we may also give you a local anaesthetic injection into your cervix.

The actual fitting procedure normally takes about 5-10 minutes.

Following the fitting, we will ask you to wait for 10-15 minutes before leaving the premises. Please let us know if you feel faint or lightheaded at any time.

## After the fitting

In the first few days after having the IUS fitted you may experience cramps, similar to period pain, and spotting. This will usually settle. If pain is severe, becomes worse, or does not settle after 3 days you should contact your GP or nearest Sexual Health Service clinic.

We do not recommend use of tampons or a menstrual cup in the first 28 days after having an IUS fitted.

If you feel comfortable, a good way of checking your IUS is in the right place is by gently feeling for the threads. Advice on

how to do this will be given at the time of the fitting procedure. Not all women are comfortable self-checking; alternative ways of ensuring the IUS is still in place can also be discussed at your fitting appointment.

We will invite you to a follow-up appointment approximately 6 weeks after your fitting. It is important that you come to this appointment so that we can confirm that the IUS is still correctly placed. This appointment is normally scheduled so that you will have had your first period with the IUS in place. The IUS will also have had a month (a whole cycle) to settle in. We will also ask you whether you have tried to self-check the threads of the IUS, and if so, whether you were successful. If you do not wish to check or cannot feel the threads, we will give you advice on what to look out for and how to be confident that the IUS remains correctly placed in the future.

Very occasionally, women report that their partner is aware of the threads during intercourse. The first follow-up appointment is a good time to raise this, as we can then trim the threads.

The appointment is also an opportunity to ask any further questions you might have about the IUS.

**If you have any concerns following your fitting then seek medical advice before your routine follow-up appointment.**

If all is well at your first follow-up you will need no further appointments. However, you should seek medical advice if any of the following arise:

- you are having any problems with the IUS
- you have any signs of infection such as smelly discharge, lower abdominal pain, pain during sexual intercourse, high temperature
- you want your IUS to be removed
- you are worried you could be pregnant

- you have done a home pregnancy test which is positive and you have an IUS in place
- you are worried your IUS may not be in the right place or has fallen out. Use extra protection or do not have sex until your appointment. If you think you may have had sex since the IUS moved you may need emergency contraception. Please seek advice as soon as possible.

**If you have concerns about your IUS at any time after the follow up appointment please seek medical advice from your GP or local Sexual Health Service clinic.**

## Can I have the IUS removed?

You may wish to have your IUS removed:

- to become pregnant
- because it is reaching its expiry date and a new one is required
- because you are having problems with it
- because you are postmenopausal.

If you want to become pregnant we recommend that you prepare for this in advance. This includes starting to take vitamin D supplements and folic acid at least three months before you start trying for a baby. Your natural fertility will return immediately when the IUS is removed, so you could become pregnant straight away.

If you are not planning on becoming pregnant or are having the IUS replaced, we will need you to avoid having sex in the 7 days before you come in for removal or fitting of a new IUS. This is to avoid the chance of you falling pregnant once the IUS has been removed, or in the uncommon event that we are unable to replace your removed IUS with a new one.

# Insertion and post-fit appointment booking forms

## Appointment details

- Suitable for**  routine  
 complex clinics  
 non contraceptive clinic  
 accepts appointment in training clinic

IUS can be fitted any time from:

- now  
 the following date ...../...../.....

## Your appointment is on

...../...../.....

at .....:.....am/pm

It will be at the Oxford Sexual Health Service clinic at:

- Churchill Hospital, Oxford  
 Rectory Road, East Oxford  
 Oak Tree Health Centre, Didcot  
 Windrush Medical Practice, Witney  
 Orchard Health Centre, Banbury

If you have not received an appointment within 4 weeks of your pre-fit consultation please ring the IUD Service Administrator:

Tel: **01865 231 231**

IF YOU ARE UNABLE TO KEEP YOUR APPOINTMENT PLEASE RING TO LET US KNOW. THIS ALLOWS US TO ALLOCATE THE TIME TO SOMEONE ELSE AND RE-SCHEDULE YOUR APPOINTMENT, IF YOU WISH.

## Post-fitting details for your IUS

### First follow-up at

..... weeks

Appointment date: .../.../.....

Appointment time: .....:.....

**OR** drop in

### As a contraceptive

• Your IUS is effective immediately  After 7 days

• It will remain effective for ..... years  
EXPIRY DATE: ...../...../.....

• Review as contraceptive method at ..... years  
REVIEW DATE: ...../...../.....

**To treat** .....

Your IUS will be effective for .....

REVIEW DATE: ...../...../.....

EXPIRY DATE: ...../...../.....

## Useful information and websites:

### **Oxfordshire Sexual Health Service**

Web: [www.sexualhealthoxfordshire.nhs.uk/](http://www.sexualhealthoxfordshire.nhs.uk/)

### **Family Planning Association**

Website: [www.fpa.org.uk/](http://www.fpa.org.uk/)

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **[PALSJR@ouh.nhs.uk](mailto:PALSJR@ouh.nhs.uk)**

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