|  |  |
| --- | --- |
| Preparing for insertion and / or removal of an IUD (intrauterine device) for Contraception**Important: please read this leaflet before your IUD (‘coil’) appointment** | HI_blk |

*Please note that this form is only for those requesting an IUD for contraception. Patients requiring an IUD for non-contraceptive reasons such as heavy periods or HRT must see their GP in the first instance who can then refer to our service.*

Please read this as soon as you receive it. We hope it will help your clinic visit go smoothly. If possible print out this leaflet, tick the appropriate boxes and bring it to clinic.

**We recommend you find out about the IUD before your appointment**

**(tick the boxes that apply to you)**

|  |  |
| --- | --- |
|  | I am using or have previously used an IUD and am familiar with the method. |
|  | I have had a telephone or face to face discussion about the IUD with a doctor or nurse. |
|  | I have read an information leaflet or seen information on an NHS or Highland Sexual Health website (click link to view): [Contraception :: Highland Sexual Health](https://highlandsexualhealth.co.uk/contraception) |
|  | I have watched the video about IUD fitting (click link below to view): [Cu-IUD (copper coil) :: Highland Sexual Health](https://highlandsexualhealth.co.uk/contraception/iud-copper-coil)[LNG-IUD :: Highland Sexual Health](https://highlandsexualhealth.co.uk/contraception/ius) |

**We can’t fit an IUD if there’s a chance you’re already pregnant. It takes 3 weeks after sex before a negative pregnancy test can rule out pregnancy**

**(tick the boxes that apply to you)**

|  |  |
| --- | --- |
|  | I have used hormonal contraception or condoms for at least 3 weeks before the appointment with no accidents (e.g. missed pills, condom split/failure). |
|  | I have **not** had unprotected sex, taken emergency contraception, relied on withdrawal or a fertility app for 3 weeks before the appointment. (An emergency copper IUD may still be possible if any of the above applies to you; please call us **01463 888300**). |
|  | My IUD or implant is **out of date** but I have avoided sex or used other hormonal contraception or condoms for at least 3 weeks before the appointment with no accidents. |

**If you’re coming for IUD removal, it is possible to become pregnant from sex in the 7 days before it is removed. This is also a risk if you come for IUD change and we are not able to fit the new IUD**

|  |  |
| --- | --- |
|  | I already have an IUD and am coming for a change or removal. I have used condoms or not had sex for 7 days before my appointment. |

**Infection risk**

Sexually Transmitted Infections (STIs) such as chlamydia may increase the risk of pelvic infection after IUD fitting. They do not always cause symptoms.

|  |  |
| --- | --- |
|  | I understand that I’ll be asked about my risk of STIs when I come to clinic and offered tests. |
|  | I understand that the IUD will not protect me or my partner against STIs. |
|  | I know there is a small risk of pelvic infection for 3 to 4 weeks after IUD fitting. |
|  | I know that people using a Cu-IUD are more likely to get bacterial vaginosis (BV) and may be more likely to get candida (thrush). |

**Pregnancy and IUD**

|  |  |
| --- | --- |
|  | I understand that no contraceptive method is 100% effective. All IUDs have a small risk of failure; less than 1 in every 100 people using an IUD for the recommended time will become pregnant. |
|  | Pregnancy with an IUD in place is rare, but more likely to be an ectopic pregnancy. If I think I might be pregnant, I will do a pregnancy test as soon as possible and seek medical advice if it is positive. |
|  |  I understand that fertility returns to a natural level within a few weeks of IUD removal. |

**Complications with IUD**

|  |  |
| --- | --- |
|  | I understand that it may not be possible to fit an IUD as planned at the clinic visit (for example if an unexpected gynaecological problem is found on examination). |
|  | I understand that there is a 1 to 2 in 1000 risk that the IUD will accidentally go through or “perforate” the wall of the uterus at the time of insertion. This risk is higher, 6 in 1000 during breastfeeding. A perforated IUD needs to be removed with an operation under anaesthetic. |
|  | I understand that there is a risk the IUD will fall out. This happens to 5 in every 100 women who have an IUD fitted. I understand that I should check my IUD threads after each period and will discuss this in clinic. I can use a menstrual cup (but not for the first 6 weeks after insertion) or tampons with an IUD but need to be careful not to pull the IUD threads.  |
|  | There is a risk that the threads will move up inside the cervix or uterus so they can’t be seen or felt. I may need an ultrasound to check the IUD is in place and may need to come to a specialist clinic when the IUD needs to be removed. |

**There are different types of IUD**

|  |  |
| --- | --- |
|  | I know that the hormone-free copper IUD (Cu-IUD) may make periods heavier, longer and more painful than a natural period. There may be light bleeding between periods. |
|  | I know that the hormonal IUDs (LNG-IUD) release a small amount of the hormone progestogen into the uterus. Some hormone goes into the bloodstream but a much lower amount than with any other type of hormonal contraception. Some people notice hormone side effects such as headache or breast tenderness. If these side effects occur they are usually mild and settle within a few weeks. |
|  | I know that the Mirena® or Levosert® progestogen IUD are expected to make my periods much lighter or stop, but can cause prolonged irregular bleeding or brown discharge for the first 3 months or so. This is not usually heavier than a natural period. |
|  | I know that the smaller hormone devices (Kyleena® or Jaydess®) release less hormone and are less likely to stop periods. They may cause irregular bleeding, especially in the first 3 months or so. This is not usually heavier than a natural period. |
|  | The person fitting my IUD will tell me how soon I can rely on it and how many years it can work for. This depends on the type of IUD, why I am using it and my age. |
|  | I know that I can ask for my IUD to be removed at any time. |

**Clinic visit arrangements**

|  |  |
| --- | --- |
|  | I will call the clinic before my appointment if I have heart problems, take blood thinning medication or if my IUD threads are missing so that I see the right doctor. |
|  | I will have breakfast or lunch before my appointment. |
|  | I will take a painkiller such as paracetamol and/or ibuprofen about an hour before clinic. We can discuss local anaesthetic options with you when you come to clinic. |
|  | I will be able to provide a urine sample for a pregnancy test if required. |
|  | I can come to the appointment if I have a period. |
|  | I will arrange childcare for the appointment. |
|  | I understand that IUD fitting usually takes less than 10 minutes. However, I will allow an hour for the appointment as some people feel crampy or lightheaded for a short time afterwards. |

**Contact details**

If you need further information or wish to have a telephone discussion prior to your appointment, please call us on the number below. If you can’t keep your appointment for any reason please let us know. We can then offer your appointment to someone else.

**Highland Sexual Health, NHS Highland**

**Phone: 01463 888 300**

**Website:** [Home :: Highland Sexual Health](https://highlandsexualhealth.co.uk/)