

Intrauterine system (IUS)

The IUS is a method of long-acting reversible contraception (LARC). LARC is very effective because it doesn't depend on you remembering to take or use contraception.

The IUS works as contraception for three, four or five years depending on the type. There are different types and sizes with different amounts of the progestogen hormone.

Effectiveness

- It's over 99% effective.
- Less than 1 IUS user in 100 will get pregnant in a year.

Who can use it?

- Most people with a uterus (womb) can use an IUS, including those who've never been pregnant and young people.
- It may not be suitable if you've had problems with your uterus (womb) or cervix, or unexplained bleeding from your vagina.
- It may not be suitable if you've had certain illnesses, such as serious heart disease, stroke, liver problems, breast cancer or if you have a pelvic infection.
- A doctor or nurse will ask about your own and your family's medical history. Tell them about any illness or operations you've had as you may need specialist care when the IUS is fitted.
- **After having a baby:** You may be able to have an IUS fitted at the time of vaginal delivery or caesarean section. If an IUS isn't fitted in the first 48 hours after you give birth you'll need to wait until four weeks after the birth. It can be used while you're breastfeeding.

How it works

- A small plastic device which slowly releases the hormone progestogen is put into the uterus (womb).
- It makes the lining of your uterus thinner so it's less likely to accept a fertilised egg.
- It thickens the mucus in your cervix. This makes it difficult for sperm to move through it and reach an egg.

Advantages

- You don't have to remember to use it.
- Periods usually become lighter, shorter and sometimes less painful. They may stop altogether.

- Two types of IUS (Mirena and Levosert) can be used specifically to treat heavy painful periods.
- Works for three, four or five years, depending on type, but can be taken out sooner.
- Can be used if you're breastfeeding.

Disadvantages

- Your periods may change in a way that isn't acceptable to you.
- Some IUS users may get side effects such as acne, headaches and breast tenderness.
- Some people develop small fluid-filled cysts on their ovaries that may cause pain. These aren't dangerous and usually don't need treatment.
- You'll need an external examination when the IUS is fitted.

Risks

- There's a small chance of you getting an infection during the first few weeks after an IUS is put in.
- Can be pushed out (expulsion) by your uterus or can move (displacement). This isn't common.
- Might go through (perforate) your uterus (womb) or cervix when it is put in. This isn't common and the risk is low when the IUS is fitted by an experienced doctor or nurse.
- You're unlikely to become pregnant while using an IUS but if you do, there's a small risk of ectopic pregnancy (where a pregnancy develops outside of your uterus, usually in a fallopian tube).

Periods and fertility

- In the first six months, it's common to have irregular bleeding or spotting.
- Periods usually become lighter but can be irregular.
- Many IUS users find that their periods stop altogether. This isn't harmful.
- Your fertility returns to normal as soon as the IUS is taken out.
- It's safe to use tampons or a menstrual cup during your period.

Other things to know about the IUS

- If fitted after age 45, the Mirena IUS will work as contraception until the menopause.
- You're taught to check that the IUS is in place.
- A check for any existing infection is usually advised before an IUS is put in.
- The IUS isn't affected by other medicines.

For lots more information about the implant go to www.sexwise.org.uk/IUS

All methods of contraception come with a Patient Information Leaflet which

provides detailed information about the method.

This is general information based on evidence-guided research from The Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists and the World Health Organization.

Contact your doctor, practice nurse or a sexual health clinic if you're worried or unsure about anything.

General information

- Get information about contraception and sexual health at www.sexwise.org.uk or www.fpa.org.uk
- Get information for young people under 25 at www.brook.org.uk
- Find your closest contraception or sexual health clinic at www.fpa.org.uk/clinics
- Find a GP or pharmacy at www.nhs.uk (England), www.nhsdirect.wales.nhs.uk (Wales), www.nhsinform.scot (Scotland) and www.hscni.net (Northern Ireland).

Emergency contraception

If you've had sex without contraception, or think your method might've failed, there are different types of emergency contraception you can use.

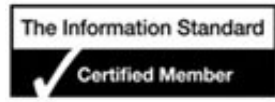
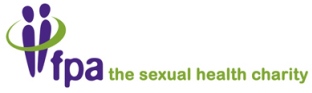
- An IUD (copper coil) is the most effective option. It can be fitted up to five days after sex, or up to five days after the earliest time you could've ovulated (released an egg).
- An emergency contraceptive pill with the active ingredient ulipristal acetate can be taken up to five days (120 hours) after sex. It's available with a prescription or to buy from a pharmacy. ellaOne is the only brand in the UK.
- An emergency contraceptive pill with the hormone levonorgestrel can be taken up to three days (72 hours) after sex. It's available with a prescription or to buy from a pharmacy. There are different brands

Try to get emergency contraception as soon as possible after unprotected sex. Emergency pills are available for free from some pharmacies. Age restrictions may apply.

INFORMATION LAST UPDATED MAY 2018. NEXT PLANNED REVIEW BY MAY 2021.

For more information about the IUS visit www.sexwise.org.uk/ius

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