**Are you having a Coil fitted?**

It is essential you read and understand the information below – particularly the rules around unprotected sex in the days before the insertion of the new coil or when you attend we will not be able to fit your coil. If your coil or implant is overdue replacement you cannot rely on it for contraception and will need an alternative method or to abstain for at least 2 weeks prior to your appointment.

* Please do a pregnancy test on the morning of your appointment. Use the first urine you pass that day as this will be the most concentrated and confirm the result with the GP when you arrive.
* Do not have sex from the 1st day of your period until the fitting unless you are using a pill, patch or injection. Do not rely on condoms. **Failure to do this may prevent the fitting from going ahead.** If you are not having periods please do not have sex for 2 weeks prior to the fitting. If you have sex within this time, you risk pregnancy.
* If your coil or implant is overdue replacement you cannot rely on it for contraception and will need an alternative method or to abstain for at least 2 weeks prior to your appointment. If you have sex within this time, you risk pregnancy.
* If you are having an IUD/IUS exchanged or removed, do not have sex without a condom for 7 days prior to the appointment. If you have sex within this time, you risk pregnancy.
* Please take a pain killer such as paracetamol or ibuprofen about an hour before your appointment.
* Most people feel fine after an IUD/IUS fitting, but some feel a little light headed or have period-like cramps. If it is possible bring someone with you to take you home afterwards. If you have driven yourself we may advise you to sit in the surgery for 20 minutes after fitting.
* Before the appointment, read the Leaflet that came with our appointment letter and bring it, signed, to your appointment for the fitting.
* Please telephone the surgery if you need to cancel or change your appointment time or if you have any concerns about you fitting.

**The Intrauterine Device (IUD or Coil) and the Intrauterine System (IUS)**

This is a small plastic or copper device which is put into a woman's womb. It is very effective with a small failure rate. (Less than 1-3 women per 100 will become pregnant each year using this method of contraception).

**The Intrauterine Device (IUD)**

The IUD works mainly by releasing copper, causing an increase in white blood cells in the cervix, which kill sperm and stop them reaching the egg. IUDs also make it harder for the egg to travel along the fallopian tubes and settle in the womb.

**Advantages**
It works as soon as it is put in and generally lasts at least 5 years. There is no need to think about contraception every day and it does not interrupt lovemaking. It is a good method for someone who has had a child and wants to have a gap between children or does not want further children. As it is not a hormonal method of contraception it has no effects on the rest of the body. It can be used as post-coital contraception if fitted up to five days after your expected date of ovulation.

**Disadvantages**Some women find their periods are heavier and longer at first. Periods may also be more painful so it is not usually suitable for women who have heavy painful periods. The IUS (see below) is more suitable in this case. Some women have a small amount of bleeding, "spotting", before and after periods. Rarely the IUD may come out without being noticed and pregnancy may result.

The IUD is also not suitable for those with previous pelvic infections and those who are at risk of getting a sexually transmitted infection. Remember that condoms can also be used to prevent sexually transmitted infections.

**Intrauterine System (IUS, “Mirena”)**

The intrauterine system (IUS) is a small T-shaped device made of plastic and contains the hormone progestogen. It stops sperm fertilizing an egg and makes the womb lining unsuitable for implantation. It is inserted into the uterus and starts to work as soon as it is in place. It can last for up to 5 years but can be removed at any time. If fitted in women who are over 45 years of age, they can be left until after the menopause. They are also licensed to treat heavy periods as they will often result in lighter periods or no periods at all. Irregular spotting is not uncommon for the first few weeks after fitting as the lining of the womb thins. The IUS is not suitable for post-coital contraception.

**Risks (IUS and IUD)**

* There is a very small chance of infection during the first 20 days after a fitting. You may be advised to have swabs to rule out infection prior to fitting.
* The IUS and IUD can be pushed out/expelled by your uterus or it can move. This is not common and is more likely to happen soon after fitting. You may not notice that the coil has been expelled so your doctor should explain how to check for the coil threads.
* Rarely an IUD or IUS can perforate your uterus or cervix when it is put in. This may cause pain but often there are no symptoms. If this does happen the IUD/IUS may need removal by surgery. A recent study put these risks as follows:

If you are breastfeeding and 6-36 weeks after having a baby the risk is about 1in 200;

if you are not breastfeeding and 6-36 weeks after having a baby the risk is about 1 in 600;

If you are breast feeding and >36 weeks after having a baby the risk is about 1 in 600

If you are not breastfeeding and >36 weeks after having a baby the risk is about 1 in 1600.

In all cases it is considered that the benefits outweigh any risks.

* If you do become pregnant whilst using an IUS/IUD there is a small risk of ectopic pregnancy (pregnancy growing outside of the womb, e.g in fallopian tubes). This is because IUDs do not prevent all ectopic pregnancies. The overall risk of ectopic pregnancy in those using an IUD/IUS is lower than in women using no contraception at all.

**Fitting Your IUD or IUS**
Fitting is best done towards the end of a period or shortly after. The IUD can in some circumstances be fitted up to about day 19 of a 28-day cycle (day 1 is your first day of bleeding). The IUS and IUD is easier to fit between days 2 and 7 of your cycle so it is best to aim for these days. If this is not possible please make sure you have read and understood the information on page one regarding having no sex from day one of your period until fitting.

The doctor will perform a vaginal examination to assess the position of your uterus (womb), and will then insert a speculum into your vagina in the same way as when you have a smear or internal examination. He or she will then pass a small instrument into your uterus to check its size and then the IUD is fitted.

The procedure usually takes only a few minutes but we ask you to remain lying down for a short while afterwards as sometimes you can feel a bit faint or have some crampy pains after having a coil fitted. You should be able to go home immediately after the fitting. You can continue to use tampons if desired.

We may ask you to come back for a check-up about 2 weeks after the start of your next period but further regularly checks are not nowadays felt to be necessary.

**Notes**
A doctor should be consulted in the following circumstances: -

* Prolonged abdominal pain following IUD/IUS insertion.
* A delayed period or bleeding between periods.
* A delayed period and lower abdominal pain, which may be due to an ectopic pregnancy.
* Offensive vaginal discharge with or without pain (which may indicate infection).
* It is suspected that the IUD/IUS has come out or is coming out (it is usually possible to feel the threads of the IUD/IUS inside the vagina to check it is in place).

**If you have further questions about having your coil fitted please ask your doctor prior to the procedure.**