



The Mid Yorkshire Hospitals  
NHS Trust

# Intrauterine System (IUS)

## **What is an Intrauterine System (IUS) ?**

This is an intrauterine device, commonly referred to as a coil (product names may be mirena or levosert). It consists of a small T-shaped frame made from a plastic coated polyethylene. This carries 52mgs of levonorgestral, a hormone used in many contraceptive pills. The hormone is contained within a substance called polydimethylsiloxane. The T-shaped frame also contains barium sulphate so that it can be seen on x-rays. This structure provides a system for releasing the hormone gradually into the uterus (womb).

There are two fine threads, made of iron oxide and polyethylene, attached to the bottom of the frame. These allow easy removal and allow you or your doctor to check that the system is in place.

## **What is the IUS used for?**

IUS is an effective long-term reversible method of contraception. IUS is useful for reducing menstrual blood flow so it can be used if you suffer heavy menstrual bleeding (menorrhagia). IUS can also be used to protect the lining of the uterus during menopause, and help to relieve the symptoms such as hot flushes and night sweats associated with the menopause.

## **How does the IUS work?**

### **The hormone in IUS prevents pregnancy by:**

- Controlling the monthly development of the uterus lining so that it is not thick enough for you to become pregnant.
- Making the normal mucus in the cervical canal (opening to the womb) thicker so that the sperm cannot get through.
- Preventing ovulation (the release of eggs) in some women.

### **The hormone in the IUS reduces menstrual bleeding by:**

- Controlling the monthly development of the womb lining, making it thinner so there is less bleeding every month.

### **The hormone in the IUS helps you through the menopause by:**

- Replacing the hormone that your body no longer makes.
- Protecting the lining of your womb from abnormal growth or cancer.

## **Will the IUS suit you?**

### **Not all women should use the IUS. Tell your doctor:**

- If you are sensitive to the hormone levonorgestrel.
- If you are pregnant, suspect that you are pregnant or are breast-feeding.
- If you have an unusual vaginal bleeding pattern.
- If you have an abnormal uterus or fibroids.
- If you have an unusual or unpleasant vaginal discharge or vaginal itching.
- If you have had an abnormal smear.
- If you have or have had pelvic inflammatory disease.
- If you have had a stroke, heart attack or any heart problems.
- If you have or have had any liver problems.
- If you have immunodeficiency. A doctor will have told you if you have this.
- If you have or have had cancer, suspected cancer or leukaemia.
- If you have or have had trophoblastic disease. A doctor will have told you if you have this.
- If you are diabetic, have high blood pressure or abnormal blood lipid levels.
- If you have fits (epilepsy).
- If you have a history of blood clots (thrombosis).
- If you are on long term steroid therapy or are taking any other medicines.
- If you have developed migraine, dizziness or blurred vision.
- If you have ever had an ectopic pregnancy or history of ovarian cysts.

**You must tell your doctor if any of these conditions occur for the first time whilst you have the IUS in place.**

## **What if I want a baby?**

If you want a baby ask your doctor to remove the IUS. Your usual level of fertility will return very quickly after the system is removed.

## **Can I breast feed while using the IUS?**

If you wish to breast-feed please discuss this with your doctor.

## **Can I become pregnant whilst using the IUS?**

It is very rare for women to become pregnant with an IUS in place. Missing a period may not mean you are pregnant. Some women may not have periods whilst using the system. If you have not had a period for 6 weeks then consider having a pregnancy test. If you do become pregnant with the system in place you should have it removed as soon as possible, and discuss your options with your doctor.

## **Will I need an anaesthetic?**

The IUS can be fitted without an anaesthetic. If the IUS is being fitted at the same time as other procedures you may need a general anaesthetic, if so please read you and your anaesthetic leaflet.

## **How is the IUS fitted?**

**Only a doctor or trained nurse can fit the IUS. They will:**

- Give you a pelvic examination to find the position and size of your uterus.
- Place a speculum (an instrument to help the doctor to see the cervix) into your vagina.
- Clean your vagina.
- Place a thin flexible tube containing the IUS system into your vagina and then through the cervix into the uterus.
- Withdraw the tube leaving the IUS system in place.
- Trim the threads to a suitable length for easy removal and checking.

## **How quickly does the IUS work?**

**For contraception:** the IUS will be effective 7 days after insertion.

**For menorrhagia:** the IUS usually achieves a significant reduction in blood loss in 3-6 months of treatment.

**For protection of the lining of the womb during the menopause:** the hormone in the IUS will begin to protect the lining of your womb as soon as it is fitted. You will be given a menstrual calendar to record your blood loss.

## **How often should I have the system checked?**

You should have the system checked usually 6 weeks after it is fitted, again at 12 months and then once a year until it is removed. It can stay in place for 5 years.

## **What happens if the IUS comes out by itself?**

If the IUS comes out either completely or partially you may not be protected against pregnancy. It is rare but possible for this to happen without you noticing during your menstrual period. An unusual increase in the amount of bleeding during your menstrual period might be a sign that this has happened. Tell your doctor or clinic if there are any unexpected changes in your bleeding pattern.

## **How can I tell the IUS coil is in place?**

After each menstrual period you can feel for two thin threads attached to the lower end of the system. Your doctor will show you how to do this. Do not pull the threads because you may accidentally pull it out. If you cannot feel the threads go to your doctor. You should also go to your doctor if you can feel the lower end of the system itself or you or your partner feel pain or discomfort during sexual intercourse.

## **Can I change my mind?**

Yes, your doctor can remove the IUS at any time. The removal is very easy. Unless you plan to have a new IUS or an intrauterine device (IUCD) fitted immediately, it is important to use another form of

contraception in the week leading up to the removal. Intercourse during this week could lead to pregnancy after the IUS has been removed.

## **How will the IUS affect my periods?**

The IUS will affect your menstrual cycle. You might experience spotting, shorter or longer periods, lighter periods or no periods at all. Many women have spotting (a small amount of blood loss) for the first 3-6 months after the system is fitted. Others will have prolonged or heavy bleeding. Overall you are likely to have fewer days bleeding in each month and you might eventually have no periods at all. This is due to the effect of the hormone (levonorgestrel) on the lining of the womb.

## **What are the risks and side effects?**

Taking any medication carries risks and possible side effects. With IUS these are most common during the first months after the IUS is fitted and decrease as time goes on. The most common side effects are menstrual changes and ovarian cysts (fluid filled sacs in the ovary).

### **Other common side effects might include:**

- Weight gain
- Headache
- Abdominal, pelvic or back pain
- Nausea
- Acne or other skin problems
- Painful periods
- Increased vaginal discharge.
- Tender breasts
- Inflammation of the neck of the womb.

### **Uncommon side effects might include:**

- Genital infections
- Vaginal itching
- Increased hair growth
- Hair loss.

### **Rare side effects might include:**

- Reduced sex drive
- Migraine
- Bloating abdomen
- Rashes or eczema.

Ectopic pregnancy is possible with IUS but highly unlikely. You should tell your doctor if you have lower abdominal pain especially if you have missed a period or have unexpected bleeding. This might be a sign of ectopic pregnancy. (Ectopic pregnancy is the development of a fertilised egg outside the womb).

If you think you are reacting badly to the IUS or are having any other problems, please tell your doctor.

### **What to expect after the mirena is fitted**

On the day the IUS is fitted you can continue your normal daily activities. You may experience some period like cramping for which you can take basic painkillers such as paracetamol/ibuprofen.

Do not use tampons for 4 weeks following insertion and avoid sex for the first few days.

If used for contraception - the IUS will be effective 7 days after insertion.

Please see your GP if you experience:

- Pain in lower abdomen
- High temperature
- Smelly discharge
- Heavy bleeding.

**For further information please contact:**

**Pinderfields Hospital**

Gynaecology Assessment Unit (GAU) 01924 541135

**Opening hours**

Monday - Friday 8.30-18.00

Saturday and Sunday 8.30 - 12.30

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We are committed to providing high quality care. If you have a suggestion, comment, complaint or appreciation about the care you have received, or if you need this leaflet in another format please contact the Patient Advice and Liaison Service on: **01924 542972** or email: **pals@midyorks.nhs.uk**

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