

RECOMMENDATIONS CONCERNING INSTALLATION OF AN IUD

Before insertion, you will meet the doctor to discuss the IUD and any questions you have.

We will also do a **pregnancy test** at this time, as it is important to confirm that you are not pregnant at the time of insertion. If we cannot be sure, we may postpone the appointment or ask you to take another pregnancy test in a few weeks.

During insertion, it is **normal to feel cramps**. This is why we suggested that you take **anti-inflammatories** before the appointment. If you weren't able to take some in advance, let us know and we can give you some.

To limit discomfort, we generally perform **local anesthesia (freezing) of the cervix**.

It is **normal to have some bleeding after insertion of the IUD**. Moreover, each IUD has a different bleeding profile as well as advantages and disadvantages. You can consult the comparison table on the back.

The risks associated with insertion and use of the IUD are as follows :

- **DISPLACEMENT OF THE IUD (expulsion)**
 - The IUD may move or you may expel it. The loss of the IUD may not be felt or it may be that:
 - You have unusual cramps in your lower abdomen.
 - You feel a small hard piece (end of the IUD) at the cervix.
 - You no longer feel the strings of your IUD or that they are longer (**see the back or on our website for checking the threads**).
 - If this is the case, make an appointment at the clinic and use a condom during every sexual encounter until you are examined.
- **INFECTION**
 - An infection of the uterus in the first month is **rare, but it should be treated promptly**. Call us if you have the following symptoms:
 - Increasing pain in your lower abdomen.
 - New pain in the lower abdomen during sexual intercourse.
 - Fever
 - To prevent it, we suggest that you **do not put anything in the vagina for 24-48 hours after insertion** (no tampon, no menstrual cup, no vaginal cream or ovule, no finger, no intercourse) .
 - We will screen for **chlamydia-gonorrhea** during insertion, but the IUD **does not protect against sexually transmitted infections (STIs)**.
- **PERFORATION**
 - There is a risk of approximately 1/1000 that the IUD will perforate the uterus during insertion. If so, the doctor will remove it. A perforation of the uterus heals on its own and there are no fertility problems associated with this **rare complication**.

It is possible to have a vagal reaction (dizziness, hot flashes, nausea) after the insertion. It is therefore **preferable that you stay 15 minutes in the waiting room** immediately after installation.

Comparative table

	Hormonal (progesterone)	Copper
<i>Models and duration</i>	<ul style="list-style-type: none"> - Mirena (52mg) – 8 years - Kyleena (19,5mg) – 5 years 	<ul style="list-style-type: none"> - Mona Lisa mini/Standard – 5 years - Mona Lisa 10 – 10 years - Liberté, etc. – up to 12 years
<i>Bleeding</i>	<ul style="list-style-type: none"> - Irregular bleeding with frequent spotting, possible for the first 3-6 months - Then, irregular, light bleeding with reduction of menstrual flow of 80-90% - After 1 year, approximately ¼ no longer bleed with Mirena and 1/6 with Kyleena 	<ul style="list-style-type: none"> - Usually, cycles unchanged except for an increase in duration, flow and menstrual pain
<i>Side effects</i>	<ul style="list-style-type: none"> - Minimal, because the effect is mainly localized to the endometrium (unlike systemic anovulants, pills, patches or rings) - Rare and usually temporary: acne, swelling, mood disorders and reduced libido 	<ul style="list-style-type: none"> - Increased menstrual duration, flow and pain
<i>Effectiveness</i>	<ul style="list-style-type: none"> - Less than 2 pregnancies out of 1000 users per year 	<ul style="list-style-type: none"> - Less than 8 pregnancies out of 1000 users per year
	<p>In the rare situation that you become pregnant with an IUD, it is important to seek medical attention to have it removed and to ensure that you do not have an ectopic pregnancy (outside the uterus).</p>	
<i>Non-contraceptive benefits</i>	<ul style="list-style-type: none"> - Reduction of menstrual pain - Possible cessation of menstruation - Possible improvement in PMS - Possible reduction in the risk of endometrial cancer - No increase in migraines (because no estrogen) 	<ul style="list-style-type: none"> - No positive or negative hormonal effects

Checking the strings

The IUD is inserted in the uterus, but strings come out into the vagina so that it can eventually be removed. If the strings are cut too short or not visible, it may be more difficult to remove the IUD. We will then have to use some specialized instruments.

After the first few months, these threads should not bother you or your partner, but if you put a finger in the vagina, you should be able to feel them.

Suggested technique:

- You can place yourself in a squatting position, lying on your back or with one foot on the edge of the bathtub.
- Insert one or two fingers into the vagina and try to reach all the way down to touch the cervix (a donut-shaped structure similar to the tip of the nose).
- As you work your way around the cervix, you should be able to feel the strings.

