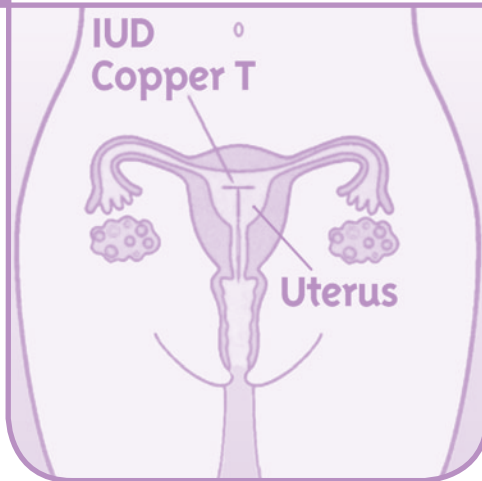
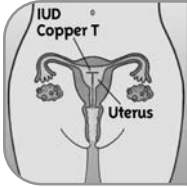


Intrauterine Device

IUD



Balanced Counseling Strategy



Intrauterine Device

IUD

General information:

- Provides long-term protection against pregnancy for up to 12 years.
- Is a small, flexible, plastic and copper device placed in the uterus. Most IUDs have 1 or 2 thin strings that hang from the cervix into the vagina.
- A trained provider must insert and remove the IUD.
- Typically causes longer and heavier bleeding and more cramps or pain during monthly bleeding.
- Safe for a woman with HIV or with AIDS who is clinically well on antiretroviral (ARV) therapy.
- Not advised for a woman at very high risk of having a sexually transmitted infection (STI).

Effectiveness for pregnancy prevention: The pregnancy rate is:

- In first year of use — less than 1 pregnancy per 100 women (1%)
- Over 10 years of use — 2 pregnancies per 100 women (2%)

How method works:

- A trained provider inserts the IUD into your uterus, where it stays.
- The plastic and copper device helps prevent the sperm and egg from meeting.

Important facts:

- One of the most effective and long-lasting methods.
- Must be inserted and removed by a trained provider.
- Immediate return to fertility after IUD is removed.
- Does not interfere with sex.
- Does not require you to do anything once the IUD is inserted.
- Does not protect against STIs, including HIV.
- Use condoms (male or female) if you feel at risk of STIs, including HIV.

Method not advised if you:

- Are pregnant or think you might be pregnant.
- Have unusual vaginal bleeding.
- Have genital or pelvic infections.
- Have AIDS and are not taking ARV medicine or are not doing well clinically.
- Are at very high risk of having an STI.

Side effects:

- Some bleeding or spotting after insertion. This may continue for 3 to 6 months.
- Cramping and some pain for a few days after insertion.
- Changes in bleeding patterns. They include prolonged and heavy monthly bleeding, irregular bleeding, or more cramps and pain during monthly bleeding. These are normal, especially in the first 3 to 6 months after insertion.
- These are not signs of illness.
- Side effects usually lessen after the first several months.

Health benefits:

May help protect against cancer of the uterus.

How to use:

- Have a pelvic exam to rule out genital infections.
- Take ibuprofen, paracetamol, or other pain reliever 30 minutes before insertion to reduce cramping and pain.
- A trained provider inserts the IUD in a place with the necessary supplies and equipment.
- The provider inserts the IUD into your uterus through your vagina and cervix. S/he cuts the strings on the IUD, leaving about 3 cm hanging out of the cervix.
- You will feel some discomfort or cramping during the procedure. This is normal.
- After the procedure get the following information from your provider:
 - Type of IUD you have
 - Date of insertion
 - Date when IUD will need to be removed or replaced

Return to the health care facility any time if:

- You have questions or problems.
- You have any of the following, especially in the first 20 days after insertion:
 - increasing or severe pain in the lower abdomen
 - pain during sex
 - unusual vaginal discharge
 - fever, chills, nausea, or vomiting
- Your provider scheduled a post-insertion visit 3 to 6 weeks after insertion of the IUD.
- You think the IUD may have slipped out of place (you do not feel the strings or you feel the hard plastic of an IUD that has partially come out of the uterus).
- You miss your menstrual period or think you may be pregnant.
- You want to remove the IUD for any reason.