



## The hormonal IUD

### What does a hormonal IUD look like?

The hormonal IUD is a T-shaped plastic frame that contains a small hormone depot. The thread for pulling it out is fixed at the bottom. The progestogen hormone levonorgestrel is released directly into the uterine lining from the depot. There are different sizes of the hormonal IUD and also different dosages.

### How does the hormonal IUD work?

The hormonal IUD works primarily in the uterine cavity because it releases its hormone directly to the uterine lining. The amount of hormones that enter the body is significantly lower than with a pill.

For this reason, ovulation and the ups and downs in terms of mood and libido usually continue to occur in your cycle, which many women greatly appreciate.

The hormonal IUD prevents pregnancy in two ways:

Firstly, the mucus in the cervix is changed in such a way that it is difficult for sperm to enter the uterus. Secondly, the uterine lining builds up only very little. A fertilized egg cell could therefore not implant in it. Bleeding is therefore often very minimal and significantly shorter. Period pain also becomes significantly less.

### How safe is the hormonal IUD?

Depending on a statistical model, out of 1,000 women who the hormonal IUD for contraception for one year, 1 to 3 women will still become pregnant. This number is lower than for the copper spiral.

### How long does the contraceptive protection of the hormonal IUD last?

There are different models of the hormonal IUD, therefore contraceptive coverage can last from 3-8 years.



### **How is the hormonal IUD inserted?**

Before insertion, a gynecological examination and sonographic examination of the pelvis and a cervical swab are carried out. An already existing pregnancy, abdominal diseases and sexually transmitted diseases must also be ruled out.

In addition, the size of the uterus has to be measured in advance and it has to be checked whether an IUD can be inserted at all. An insertion can be carried out during your period, but it is not a must. In principle, a hormonal IUD can also be used in young women.

A check-up should be performed out 4 weeks after insertion or at the latest after the first menstruation. Thereafter, a check-up is recommended to be carried out once every six months.

If the hormonal IUD is inserted on the first to seventh day of the cycle after menstrual bleeding, contraceptive protection is provided immediately. If it is inserted at a later date, additional contraception must be used for seven days, for example with condoms.

### **When can I use a hormonal IUD inserted after childbirth?**

An IUD should not be placed before six weeks after childbirth and before 12 weeks after a cesarean section, as this increases the possibility of perforation or expulsion. You can breastfeed with a hormonal IUD.

### **How is the hormonal IUD to be removed?**

The hormonal IUD can be removed by carefully pulling on the retrieval threads after sonographic control. If the threads are not visible and the IUD is in the uterine cavity, removal may need to be postponed until after the next menstrual period, as the threads usually become visible again immediately after the period. If the threads are still not visible, the IUD can be removed using a small instrument. After removal, normal ability to conceive returns immediately.



If you wish to continue using an IUD for contraception after the removal of the one you just carried, a new or different IUD can be inserted at the same time.

### **How can I check whether the IUD is still seated correctly?**

You can feel the pulling string to understand if the IUD is still in place. If you do not feel the threads during your self-examination or if you feel the IUD itself in addition to the threads, please see your doctor immediately. It is then likely that the IUD is no longer positioned correctly in the uterus, highly increasing the chance of pregnancy.

If you have any doubts about the correct position of the IUD, please contact your doctor. A sonographic examination should also be carried out if the IUD suddenly causes discomfort and unusual symptoms.

### **Possible complications and precautions:**

You should see your doctor immediately if:

- You cannot feel the retrieval cords of the IUD
- You or your partner can feel the bottom of the IUD
- You think you are pregnant
- You have abdominal pain, fever or foul-smelling discharge
- You or your partner experience pain or discomfort during intercourse
- Your period starts late. Please then take a pregnancy test.
- the IUD is to be removed and/or you want to become pregnant.

There have been few reports of IUD expulsion in women who use a menstrual cup. There is a possibility of suction during the extraction of the cup, which can affect the IUD. Please ask your doctor about the correct use of the menstrual cup. Tampons can still be used.

### **Side effects of the hormonal IUD**

Although hormone-related side effects are rarer and fewer than with other hormonal contraceptives, they can occur, especially in the first few months. These include headaches, a feeling of tension in the breasts, nervousness, lack of sexual desire, depressive moods and acne as well as ovarian cysts, especially with high-dose hormonal IUDs (Mirena ®).



For many women, the hormonal IUD results in a shorter menstruation, which is lighter and less painful; For some, the bleeding almost disappears completely after a few months. The hormonal IUD is therefore often recommended for women with heavy bleeding and menstrual pain.

Unlike the pill and other contraceptives with use combined hormones, the risk of thrombosis, heart attack or stroke is not increased with a hormonal IUD.

Because of the low hormone dose, the hormonal IUD can be used in many cases where the combination pill is too risky.

Malformations of the uterus or diseases in which the shape of the uterine cavity is changed (e.g. fibroids) can mean that it is not possible to insert an IUD. Here it may be possible that the IUD is being ejected. Let's talk about it.