

INTRAUTERINE DEVICE (COIL) FITTING



WHO CAN HAVE A COIL FITTING?

We are happy to discuss a coil fit for any of the following

- ➔ Anyone who wants contraception management, no matter what age you are.
- ➔ Women who have recently had a baby.
- ➔ Women with heavy menstrual bleeding.
- ➔ Anyone who needs endometriosis management.
- ➔ Women who think they are entering the peri-menopause/menopause
- ➔ Women who don't want a contraception with hormones.
- ➔ Women who would like a copper coil or emergency contraception.



WHAT ARE THE CHOICES?

➔ Copper Coil (IUD)

- ➔ The Copper Coil does not have any hormones and works by preventing the egg and sperm embedding into the lining of the womb.
- ➔ The Copper Coil is effective immediately after insertion and can be inserted at any time in the menstrual cycle if it is reasonably certain that you're not pregnant.
- ➔ The Copper Coil is the first choice for an emergency contraception method.
- ➔ Please go to the web addresses below to look at information which will help you decide if this is the coil for you.
 - ➔ www.fpa.org.uk
 - ➔ <https://patient.info/health/long-acting-reversible-contraceptives-larc/intrauterine-contraceptive-device>

➔ Hormonal Coil

- ➔ There are a few to choose between: Jaydess, Kyleena, or Mirena (IUS) Coils.
 - ➔ An IUS can be inserted any time in the menstrual cycle if it is reasonably certain the woman is not pregnant or at risk of pregnancy; the practitioner will discuss this pre-fitting.
 - ➔ You may be asked to abstain from sex 7 days prior to and after the IUS is fitted. You may be asked to continue with your current contraception until 7 days after the IUS has been fitted.
 - ➔ The main way the IUS works is by thinning the lining of the womb and creating a thicker mucosal plug in the lower part of the womb to prevent sperm movement.
 - ➔ You may find they alter your bleed pattern and for many women stop their bleeding all together by the end of the first year of use.
 - ➔ The Mirena Coil is offered to women who wish to have long acting reversible contraception, have heavy menstrual bleeding problems, endometriosis, or as part of their HRT management.
 - ➔ Please go to the web addresses below to look at information which will help you decide if this is the coil for you.
- ➔ www.fpa.org.uk
 - ➔ <https://patient.info/health/long-acting-reversible-contraceptives-larc/intrauterine-system>



TIMING OF FITTING THE COIL

- 🕒 We can fit a coil on any day of your menstrual cycle as long as you are 100% certain that you have no risk of pregnancy.
- 🕒 If in any doubt at all, please wait for your next period and book a coil fit. It does not matter if you are still bleeding when you have your coil fitted.
- 🕒 If you are attending for a change of coil, please abstain from intercourse for 7 days before your appointment.



SEXUALLY TRANSMITTED INFECTIONS (STI)

- Using either the copper coil or hormonal coil for contraception does not prevent an STI. It is always advisable to use condoms for sexual intercourse and access your GP service or local STI service for sexual health screening when starting or ending a relationship or if symptoms arise to cause you concern. It is recommended to access STI screening yearly in long term relationships and this is a good time to check your threads if you don't like looking for them yourself.
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OTHER THINGS TO KEEP IN MIND



Using a coil should not prevent you having your routine cervical smear test.



Both the copper coil and hormonal coil can be used whilst breast feeding.



WHAT RISKS ARE THERE TO HAVING A COIL FITTED?

Having a coil fitted is a very safe and simple procedure. But with any medical intervention there are always some risks which you must be aware of before proceeding with your coil fit.



Risk of infection - there is a tiny risk of introducing an infection into the womb. The coil is fitted using sterile, disposable equipment to minimise this risk. Generally, this would present as heavy discharge and/or pain a few days after a coil fit and can be treated with antibiotics. We will take swabs to test for chlamydia/gonorrhoea prior to fitting a coil. Often these do not cause symptoms, but would significantly increase your risk of a serious womb infection after having a coil fitted. It is very simple for one of the practice nurses or doctors to take these swabs, or you can take them yourself following all instructions carefully and we will have the results back in a few days. If these are all negative we can proceed to fitting the coil. If you have any concerns at all, please discuss this with a GP/nurse before booking a coil fit.



Risk of expulsion - occasionally people expel the coil. This normally happens in the first 6 weeks and normally with a period - if at all.



Contraceptive failure - no contraception is 100% successful. The Mirena coil is one of the best methods of contraception with a failure rate comparable to sterilisation. The copper coil is greater than 99% effective.



Womb perforation - very rarely, in about 1 in 1000 coil fits, your womb could be perforated. This means making a small hole in the womb wall. It is very unlikely to happen, but may necessitate hospital admission.



WHAT IS HAVING THE PROCEDURE LIKE?

Having a coil fitted is similar to a smear test, but takes about 10 minutes on the couch. A speculum is inserted into the vagina and the coil is inserted through your cervix (neck of the womb). It can feel slightly uncomfortable and can cause some period-like pains afterwards. If you have had children delivered vaginally, the procedure is normally very straight forward.



ON THE DAY OF THE FIT

- ➔ You are requested to arrive at the Surgery 10 minutes before your designated appointment.
- ➔ Ensure you have had some food and drink before the procedure i.e. a light lunch
- ➔ Please bring a drink with you. i.e. bottled water or diluted squash (preferably nothing fizzy).
- ➔ Please take Ibuprofen 600mg (or Paracetamol if Ibuprofen is not tolerated) before your appointment (this helps the womb to relax and reduces pain afterwards).
- ➔ Please bring a sanitary pad for post insertion/removal of coil
- ➔ Please allow for at least an hour at the Surgery. Sometimes clinics are running late and sometimes you may need some time to sit quietly afterwards.
- ➔ Please come without children if possible as there is a little space and they can be a distraction.
- ➔ Try not to rush back to work/childcare immediately - it is ideal to have a few hours to rest afterwards.
- ➔ It is normal to have light bleeding and period-like cramping for the remainder of the day.
- ➔ You will be given more information on the day about follow-up and the particular device you have chosen.



FOLLOW-UP FOR BOTH THE IUD & IUS

- ▶ A routine follow-up visit can be advised after the first period following insertion of IUC or 3 - 6 weeks later. However, it is not essential and a follow-up appointment can be offered if there is a problem relating to your coil.
- ▶ This appointment enable you to discuss any concerns you may have and an opportunity to discuss thread checking.
- ▶ Women are advised to seek medical assistance at any time if they develop symptoms of: pelvic infection, pain, abnormal bleeding, late menstrual period (IUD), non-palpable threads, or can feel the stem of their coil device.



TAMPONS AND MOON CUPS

- ➔ Moon cups and tampons do not appear to be associated with an increased risk of IUC expulsion, however, you are encouraged not to use either for the first 6 weeks.



FURTHER QUESTIONS

If you have any further questions, please don't hesitate to contact Sharon Hartmann (you can use the 'Ask my Sexual Health Nurse' form on this website!) before attending the appointment to have your coil fitted. If you need to cancel your pre-arranged appointment on the day, please contact the Surgery at the earliest opportunity. Please remember that if you have to cancel for any reason, you must let us know in good time. Appointments are precious and yours could be given to someone else.



WHO WILL BE PERFORMING MY COIL FIT?



Sharon Hartmann is our coil fitter at Tudor Lodge Surgery. She is a specialist nurse who has advanced training in contraception and sexual health.



MORE INFORMATION

www.fpa.org.uk
www.patient.co.uk



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