

IUS (intrauterine system) Post Insertion

Information for patients and carers

What to expect

Bleeding

It is normal to have bleeding after an IUS (intrauterine system, e.g. Mirena) is inserted. This may be as heavy as a period for the first week. Thereafter, it is normal to have spotting with intermittent bleeding for up to 6 months (but sometimes longer).

This usually improves and some women then have no bleeding at all for the remaining time the IUS is in place. The Mirena IUS keeps the lining of the womb thin so it is not necessary to have periods during its use. Some women with an IUS will experience bleeding from time to time but it may not follow a regular pattern. If you are still experiencing troublesome bleeding after 6 months you should speak to your doctor.

Cramps

Most women will experience menstrual like cramps after insertion of an IUS. This usually responds to treatment with paracetamol or ibuprofen and settles spontaneously over a few days as the womb adjusts to having an IUS inside.

Hormonal side effects

The IUS contains a synthetic form of progesterone. Although this is delivered locally, some hormonal side effects may be apparent after insertion. These may include greasy skin and hair, bloating and breast tenderness. These side effects usually subside as your body adjusts to having the IUS in place. Some women experience these side effects intermittently during the time they have the IUS.

What to look out for

Pain

If you experience pain following insertion of the IUS that does not settle with your usual painkillers or that persists for over 1 week, you should seek advice from your doctor. Occasionally, an IUS can perforate the womb wall and it may be necessary to check the position of your IUS with an examination, ultrasound scan or x-ray.

Signs of infection

There is an increased chance of infection for the 3 weeks following insertion of an IUS. You should seek medical advice if you experience persistent pain, an offensive discharge or fever. A course of antibiotics may be necessary to treat an infection. It is safe to leave your IUS in place as the infection is treated. To minimise the risk of infection, it is best not to use tampons for 3 weeks after insertion of your IUS.

The IUS coming out

Occasionally the IUS will fall out, particularly if you have heavy bleeding or fibroids. If this occurs you will not have any contraceptive cover. You must examine yourself vaginally to ensure that the threads are present before you rely on your IUS for contraception. If you cannot feel the threads you must attend your practice nurse or GP for an examination.

What to do

- Take paracetamol or ibuprofen if needed for a few days after insertion
- Do not use tampons for the first three weeks after insertion
- Attend your doctor if you are in pain or have an abnormal discharge
- Before you rely on your IUS for contraception, you should examine yourself to feel the threads vaginally. If you cannot feel them, book a thread check examination at your GP practice and use additional protection until this has confirmed your IUS is in the correct position
- In the unlikely scenario that you fall pregnant while using the IUS, there is a risk of an ectopic pregnancy (a pregnancy outside of the womb). If you have a positive pregnancy test you should seek prompt medical advice
- Your IUS will require changed at 5 yearly intervals (unless you are over 45 years old at the time of insertion). You should have been given a reminder card with the recommended date of removal at the time of insertion. It is your responsibility to remember to make an appointment to change/remove your IUS. The IUS cannot be relied upon for contraception after this date.

Further Information

Contact Telephone Numbers:

Edinburgh Royal Infirmary	0131 242 2551
Chalmers Centre	0131 526 1070
St John's Hospital	01506 524383

Information in these leaflets has been adapted from the National Institute for Health and Care Excellence (<https://www.nice.org.uk/>) and Royal College of Obstetricians and Gynaecologists (<https://www.rcog.org.uk/en/guidelines-research-services/>) guidelines.

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