

PATIENT INFORMATION LEAFLET: The intrauterine contraceptive device (IUCD) – often called a 'coil'

A 'coil' is a safe & reliable form of contraception. It is considered as reliable as sterilisation, but is fully and immediately reversible upon removal of the coil.

A coil is a small flexible T-shaped device which is put inside the womb. Small threads protrude from the cervix (but not from the vagina) and these enable the coil to be removed.

There are two types of coil:

	The Mirena Coil (IUS)	The Copper Coil (IUD)
Effectiveness	Over 99% effective. Less than 1 in 100 women will get pregnant over 5 years use	Over 99% effective. Less than 2 in 100 women will get pregnant over 5 years use
Duration of Use	5 years but can be removed anytime sooner	5-10 years depending on which type is used, but can be removed anytime sooner
Additional benefits	Periods usually become lighter, less painful & may stop altogether Fertility & usual menstrual cycle return when the coil is removed Effective 7 days after insertion	Hormone-free The menstrual cycle will continue in its usual pattern Normal fertility returns when the coil is removed Effective immediately
Potential Drawbacks	You may experience erratic bleeding, typically for the first 6 months of use You may experience mild hormonal side effects (although the overall hormone dose is much lower than that in a contraceptive pill)	Periods can be heavier, longer & more painful

INSERTION OF A COIL – what to expect:

A coil is inserted by a trained Doctor or Nurse, assisted by a Healthcare Assistant or Nurse. You will be given a 20 minute appointment to allow plenty of time for any questions to be answered. During the procedure it is usual to experience some mild period-like pain or cramping. This may continue for a few hours during the day of the procedure, and may be accompanied by some period-like bleeding. Please consider taking some paracetamol or ibuprofen about half an hour before your appointment to ease any discomfort.

Whilst the procedure is very safe, there are some infrequent but important risks about which you should be aware:

- 1) Infection (usually in the first 20 days post-insertion) this would cause heavier pain / bleeding or a temperature after the coil insertion and would require treatment with antibiotics
- 2) Expulsion about 1 in 20 coils fall out this is not dangerous. We teach women to be able to check for their coil threads to ensure the coil is still in place. A new coil can be inserted if the coil is expelled. Expulsion is most common during the first year of having a coil, and particularly during the first 3 months
- 3) Perforation a rare occurrence when a small hole is made in the lining of the womb during the coil insertion. This would cause heavier pain / bleeding after the coil insertion and may necessitate surgical removal of the coil
- 4) Ectopic in the very unlikely event of a woman falling pregnant with a coil in place, there is greater risk of this being an ectopic pregnancy. But this method of contraception is so reliable that falling pregnant with a coil in place is extremely unlikely

5) Cervical shock – a rare occurrence when intervention to the cervix causes a woman's blood pressure to drop resulting in light-headedness. This is usually reversed by stopping the procedure +/- administering an injection called atropine which we keep in stock at all times

WHEN CAN A COIL BE INSERTED?

A coil can safely be inserted at ANY time of your menstrual cycle, providing that you can be certain that you are not pregnant. A negative pregnancy test can only be relied upon 3 weeks after unprotected intercourse. If you would like to use a short term alternative form of contraception (such as a contraceptive pill) while waiting for your coil appointment please contact The Surgery (01707 329292). Post-natal insertions can be considered 4 weeks after childbirth.

HOW OFTEN WILL I NEED A CHECK-UP?

You will be invited for a coil check about 6 weeks after your coil insertion. This will involve a speculum examination to check that the threads of the coil are in the correct position. You and your partner should not be able to feel the coil during intercourse and if either of you are aware of the threads during sex then the threads can be trimmed at this coil check appointment (or anytime thereafter)

HOW IS A COIL REMOVED?

Removal of a coil is a quick and safe procedure. Some mild period-like pain may occur but would be transient. The trained doctor or nurse would insert a speculum and remove the coil by gentle traction on the threads. Infrequently the threads are tucked up inside the neck of the womb – if so an ultrasound scan would be arranged to confirm that the coil is still in place and the gynecology team may then be asked to assist in removal of the coil

WHAT TO DO IF YOUR COIL NEEDS REPLACING:

We will send you a reminder when you coil is due for removal, but bear in mind it can be removed any time sooner if you no longer want this type of contraception

If you would like to have another coil inserted this can usually be done at the same time as removal of the current coil, but it is important that you use barrier contraception (condoms) or abstain from intercourse for 7 days prior to the removal of the current coil, just in case the next coil cannot be inserted straight away. In this unusual eventuality, we would book a follow up appointment for the new coil to be inserted and you would need to use alternative contraception in the interim

HOW TO PROCEED:

If you would like to have a coil please contact Peartree Surgery on 01707 329292 and request a specific 'coil insertion appointment'. You will then be booked into one of our coil clinics. You do not need to specify which type of coil you would like to use – we keep both types in stock and you can discuss this with the coil team at your appointment to help to ensure you are making the right choice for you

If you are due cervical smear please notify the coil team prior to your coil insertion as this can usually be done at the same time