Intrauterine Devices (IUD) Frequently Asked Questions

An intrauterine device (IUD) is one of the most effective methods of pregnancy prevention, and depending on the type of IUD, it can be used up to 10 years. It is a long-acting method of reversible contraception, and has recently become very popular due to its high efficacy, safety, ease of use, and cost effectiveness. It provides a nonsurgical option for pregnancy prevention that is as effective as surgical sterilization. The most frequently used intrauterine devices have a plastic frame and contain either copper (ParaGard IUD) or progestin (Mirena, Skyla, Kyleena and Liletta) to enhance the contraceptive action of the device.

Who can use an IUD?
Most women can use IUDs safely and effectively, including women who have or have not had children, have just had an abortion or miscarriage, are breastfeeding, have hypertension, have had migraines headaches with aura or history of a blood clot. You should not use an IUD if you have a known or suspected pregnancy; are having abnormal vaginal bleeding; have abnormal uterine anatomy; have an acute sexually transmitted infection (STI) or pelvic inflammatory disease (PID); have known or suspected breast, uterine or cervical cancer; have liver disease or hypersensitivity to any component of IUD.

How does it work?
There are two types of IUDs: hormonal IUDs and ParaGard IUDs. A hormonal IUD can thicken the mucus lining in the cervix to stop sperm from reaching or fertilizing an egg. It can also thin the lining of the uterus and partially suppress ovulation. The copper released from the ParaGard IUD is toxic to sperm and the presence of the IUD interferes with sperm transport, fertilization and implantation.

Does an IUD insertion have to be done at any specific time during my menstrual cycle?
An IUD is usually inserted at the end of a menstrual period. This is the time of the cycle when the cervical opening (or “cervical os”) is most open, which allows for easier, and possibly less painful insertion. This also helps to confirm that a woman is not pregnant at the time of insertion. If a woman does not get regular periods due to continuous use of other methods of contraception, she should speak with a gynecological health provider to arrange the timing of the procedure.
What type of testing is required before I can have an IUD inserted?
At Student Life Student Health Services (SLSHS), we require a negative pregnancy test within 24 hours of the
IUD insertion. When the procedure is scheduled, an order for a urine pregnancy test will automatically be
generated, and the woman is expected to show up at the SLSHS lab between 20 minutes to 24 hours prior to
the procedure. Recent negative gonorrhea and chlamydia screening results are also necessary.

Can I have an IUD inserted if I have had a sexually transmitted infection?
It is not recommended to insert an IUD during an active STI. However, once you have had negative retesting
(approximately 2-3 months after a positive result), an IUD can be inserted safely.

Will a hormonal IUD cause weight gain?
There is no proven evidence to say that either the hormonal IUDs or ParaGard IUDs are correlated with
significant weight gain. Additionally, an IUD is a safe option for overweight or obese women who may not be
candidates for estrogen-containing contraceptives.

Will an IUD cause acne?
An IUD itself will not cause acne. Some women do experience acne after insertion of an IUD, however this
typically occurs in women who were previously using an oral contraceptive and now are experiencing the
effects of the loss of the combined hormones.

How can an IUD be used as emergency contraception?
Only ParaGard IUD can be used as an emergency contraception. Although it can be inserted up to five days
after unprotected intercourse, it should be inserted as soon as possible, and then can be used for a
contraception for up to ten years.

Do I have to use back-up contraception after I have an IUD inserted?
It is recommended that a back-up method of contraception be used for the first seven days after insertion of
any type of IUD. It is important to remember that an IUD will never protect against an STI, and therefore a
barrier method (such as a condom or dental dam) is always recommended for STI protection.

Will my partner or I be able to feel the IUD string during sexual intercourse?
The IUD string typically extends approximately two to three centimeters outside of the cervical opening and
into the vaginal canal, but never outside of the vagina. The string is not usually felt by the woman, nor does it
typically bother partners during sexual activity. If the string becomes bothersome, it can be trimmed shorter
by a health provider. It is not necessary for a woman to check for the string regularly, however she can if she
prefers to do so.

How soon can I become pregnant after I have my IUD removed?
When an IUD is in place, pregnancy is prevented by the effects of the presence of the IUD, and unlike other
methods of contraception, ovulation is minimally affected. Therefore, pregnancy can occur any time after an
IUD is removed.

What type of follow-up is necessary after I have an IUD inserted?
No routine follow-up appointment is required after an IUD is inserted. However, if at any point you experience
unexplained vaginal, urinary or pelvic symptoms, you should seek medical care immediately. Some women do
prefer to have a follow-up appointment to check the string placement six to eight weeks after insertion, and
we are happy to accommodate that request. After that, the string will be assessed at every subsequent
annual exam or other gynecological appointment.

2/2019