

The IUS

Your questions answered

This leaflet is supplied by your doctor, nurse or clinic to answer the main questions you may have on the hormonal intrauterine system (IUS). If you have any other questions or are not sure about anything, please ask your doctor, nurse or clinic.



The hormonal intrauterine system (IUS) is an effective, long-term and reversible method of contraception. It can also be used to treat heavy periods (menorrhagia).

It consists of a small, plastic T-shaped frame which is inserted into the uterus (womb). This carries the hormone in a sleeve around its stem, and has two fine threads attached to the base. The hormone (progestogen) is identical to one of the hormones found in contraceptive pills.

How is the hormone released?

The hormone is released gradually into the uterus. The rate of release is controlled by a special covering on the hormone sleeve.

How does it work?

The hormone in the IUS prevents pregnancy by:

- Keeping the lining of the uterus thin.
- Thickening the normal mucus in the cervix (opening of the uterus) so that the sperm cannot get through to fertilise the egg.
- In a few women ovulation (the release of eggs) is occasionally prevented.

There are also direct effects on the lining of the uterus caused by the T-shaped frame.

How effective (reliable) is it?

The IUS is a very reliable method of contraception. Studies have shown that if 1000 women use the system for one year, no more than two may become pregnant. This is more effective than sterilisation, which has a failure rate that can be as high as 1 in 200.

Can any woman use it?

Most women can use the IUS, but as with all methods of contraception it will not be suitable for everyone. You can discuss this with your doctor.

If you are breast feeding this system is likely to be suitable, but again, your doctor will advise you.

For how long does it work?

The system is effective for five years. Its reliability remains the same throughout the five years.

What if I want a baby?

If you want to become pregnant, ask your doctor to remove the system. Your usual level of fertility will return very quickly after the system is removed. Some women have become pregnant in the first month after removal.

How is it fitted?

The doctor or nurse will inspect your cervix using a speculum, in the same way as when you have a smear test. A plastic tube containing the IUS is passed through the cervix and into the uterus. When the tube is removed, the IUS is left in the uterus. The threads hang down through the cervix into the vagina and are cut to about two to three centimetres (one inch) in length. If you have to collect your IUS from a chemist, do not be alarmed by the size of the box. The system is in fact very small as can be seen by the diagram below.

Will it hurt?

Most women find that fitting causes only a little discomfort. However, for some it might be uncomfortable. You might wish to discuss the need for pain killers or local anaesthetic with your doctor.

Afterwards you might feel some cramping, like a period pain. This usually disappears after a few hours.

When is it fitted?

The system can be fitted at any time during your cycle, as long as the fitter is sure you are not pregnant. You therefore must use reliable contraception or abstain in the three weeks prior to this. If you already have the system and it is time to replace it with a new one, it can be changed at any time as long as you have not had intercourse for the 7 days prior to the change.

After having a baby the IUS can be fitted from six weeks after delivery.

The IUS starts working 7 days after it is fitted.

How long does the fitting take?

Preparations for fitting usually take about five minutes but the actual fitting of the system takes only a few seconds. Most doctors will book a double appointment for the booking.

Can I change my mind?

You can ask your doctor to remove the system at any time. The removal is very easy. Unless you plan to have a new system or an intrauterine device fitted immediately, it is important to use another reliable method of contraception in the week leading up to the removal. Sex during this week could lead to pregnancy after the system is removed.

Can I become pregnant with the system in place?

It is very rare for women to become pregnant whilst using the system.

However, if you think you may have become pregnant with the system in place you should see your doctor as soon as possible. If you do not have it removed you might increase the chance of miscarriage or infection. Also the effects of the hormone on a pregnancy are not yet fully known. You will need to discuss this with your doctor to decide whether or not you wish to continue with the pregnancy.

Can it get dislodged or fall out?

It is unlikely but should the system come out either completely or partially you are not protected against pregnancy.

An unusual increase in the amount of bleeding during your period might be a sign that this has happened. If you think the IUS has come out, use another reliable method of contraception until you see your doctor.

Tell your doctor or clinic if there are any unexpected changes in your bleeding pattern. (See "What happens to my periods?")

How can I check to see if it's in place?

After each period or about once a month, you can feel for the two fine threads. Your doctor or nurse will show you how to do this.

If you cannot feel the threads go to your doctor, and in the meantime use another reliable method of contraception.

You should also go to your doctor if you can feel the lower end of the system itself or you or your partner feel discomfort during sexual intercourse.

Will my partner feel the threads?

It is possible for your partner to feel the ends of the threads. If this causes discomfort your doctor can adjust the threads for you.

What happens to my periods?

The IUS will affect your periods. Many women have spotting (a small amount of blood loss) or light bleeding in addition to their periods for the first three-six months after the system is fitted. Some women may have heavy or prolonged bleeding during this time.

Overall you are likely to have a gradual reduction in the number of bleeding days and in the amount of blood lost each month. Some women eventually find that their periods stop altogether, and for many women this is a very welcome change.

Panty liners should be all that is required for protection during the first week after fitting, and after this, tampons may be used if needed.

When the system is removed, periods return to normal.

Isn't it abnormal not to have periods?

Not at all. Absent or light periods with the IUS do not mean that there is any ill effect on your health or the way your body is functioning. The change in your periods is simply because of the direct effect of the hormone on the lining of the uterus. The monthly growth and the thickening of the womb lining does not occur and there is therefore very little lining and blood to come away as a period. The absence of periods does not mean that you have reached the menopause. Your own hormone levels remain normal. In fact not having periods can be a great advantage for women's health.

How will I know if I'm pregnant?

If you have not had a period for six weeks and are concerned, then consider having a pregnancy test. If this is negative there is no need to carry out another test, unless you have other signs of pregnancy eg sickness, tiredness or breast tenderness.

How will I know if I've reached the menopause?

Apart from changes in their bleeding patterns, the majority of women have noticeable symptoms when they reach the menopause e.g. flushing or unusual sweating. If you think you have reached the menopause discuss this with your doctor who can decide whether any change in your care is needed, such as starting HRT.

Will I put on weight?

The IUS should not cause any change in your weight. Studies have shown that women using the IUS have not changed their weight any more than women not using it.

What about side effects?

The level of hormone in the woman's blood stream is much lower than with the pill, so that side effects such as tender breasts, headaches or acne are less likely. If they occur they should go away after a few months.

What about other complications?

The IUS should not increase your risk of either pelvic infection or ectopic pregnancies (pregnancy outside the uterus). Your doctor or nurse should advise you of the risks and benefits.

How often should I see my doctor?

This can vary but it is usual to have the system checked six weeks after it is fitted. As long as you check the IUS yourself you don't need a check with the doctor or nurse until you want it changed or removed.

This leaflet is compiled with advice from the Family Planning Association and The Margaret Pyke Family Planning Centre.

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