

Copper Intrauterine Device (IUD)



Quick Facts

A long-acting reversible contraception (LARC). One of the most effective methods of contraception available in Australia.

Method

Non hormonal

Effectiveness

More than 99%

Return to Fertility

No delay

Availability

Simple insertion and removal by a health professional.

There are two types of copper IUDs currently available in Australia - the Copper T® and Load 375®.



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What is it?

An IUD is a small, flexible device which is inserted into the uterus by a health professional to prevent pregnancy.

The copper IUD is a plastic frame with copper bands and/or wire. It has fine threads which extend through the cervix into the vagina. Once inserted, IUDs are not usually noticeable to the woman or her partner/s.

How does it work?

The copper IUD prevents pregnancy by:

- affecting sperm movement so they cannot move through the uterus
- affecting egg movement, and in the rare instance of an egg being fertilised, preventing the egg from attaching to the lining of the uterus.

How effective is it?

The copper IUD is more than 99% effective at preventing pregnancy and can last for 5-10 years (depending on the type). Copper IUDs inserted in women over 40 can be left until after menopause.

Copper IUDs can also be used as a very effective form of emergency contraception, up to five days after unprotected sex or up to day 12 of a woman's menstrual cycle. Contact the Sexual Health Helpline for more information.

Who can use it?

A health professional will take a detailed medical history and pelvic examination to ensure that an IUD is suitable for you.

Copper IUDs are suitable for women who:

- are looking for very effective and reliable long-term contraception
- cannot tolerate hormones due to side effects or other medical conditions
- have difficulty remembering to take daily contraception
- are breastfeeding.

Copper IUDs are not suitable for women who have:

- a current sexually transmissible infection or recent history of pelvic inflammatory disease
- current cancer of the cervix or uterus
- unexplained vaginal bleeding e.g. bleeding between periods or after sex
- uterine or cervical abnormalities.

Copper IUDs may not be suitable for women who have:

- very heavy, painful or prolonged periods, or iron deficiency anaemia.

How is it inserted?

The insertion of an IUD does not usually require a general anaesthetic or sedation.

1. A health professional will do an internal examination to determine the size and position of the uterus.
2. A speculum is put into the vagina so that the cervix can be seen.

3. After measuring the length of the uterus with a thin rod, the device is inserted using a special applicator.

Most women tolerate the procedure well. Many women have cramping and some feel faint during the procedure. You can discuss pain relief options with a health professional.

When can it be inserted?

IUDs can be inserted at any time that pregnancy can confidently be excluded.

A copper IUD can be put in up to five days after unprotected sex or up to day 12 of a woman's menstrual cycle. The copper IUD is effective immediately.

Advantages

- Very reliable long-acting reversible method of contraception.
- Can be used as emergency contraception and is effective immediately.
- Inexpensive considering how long it lasts.
- Not affected by other medications.
- Can remove at any time - fertility returns quickly.

Disadvantages

- Periods may be heavier, longer, and more painful. This may improve after the first few months.

Possible but rare risks

Pelvic infection

The risk of infection is highest in the first three weeks following insertion. SHQ tests for STIs prior to insertion, to reduce this risk.

Perforation

Rarely, the IUD may be pushed through the wall of the uterus and then require removal by surgery under general anaesthetic.

Ectopic pregnancy and miscarriage

Very few women become pregnant while using an IUD. If a pregnancy does occur, there is a small chance of an ectopic pregnancy. This is a serious condition that needs urgent medical attention.

The risk of having an ectopic pregnancy with an IUD is lower than that of the general population. If a pregnancy occurs in the uterus and the IUD is left in place, there is an increased risk of miscarriage or premature birth. If you think you may be pregnant, do a pregnancy test and see a health professional as soon as possible if it is positive.

What to do after an IUD is inserted

To reduce the risk of infection, SHQ recommends that women don't put anything into their vagina for 48 hours after insertion (i.e. no tampons, intercourse, swimming or baths).

You will need to visit a health professional for a check-up a few weeks after the insertion, and after that if you have any concerns, or want the IUD removed.

In a small percentage of women, the IUD can be expelled by the uterus. This most commonly happens in the first few months after insertion, so learn to check the threads of your IUD regularly.

To feel the threads, place two fingers deep in your vagina and feel for your cervix. The threads should come out of the cervix and lie next to it. If you cannot feel the threads, visit a health professional for a check-up, and use other contraception.

How is it removed?

Never attempt to remove an IUD yourself. Removal should only be undertaken by a health professional who will remove it by pulling gently on the threads. Mild cramping and some bleeding may be experienced when the device is removed.

It is important to consider future contraceptive needs before having your IUD removed, as its contraceptive effects will cease upon removal – discuss this with a health professional.

IUDs do not protect against sexually transmissible infections (STIs).

For information about hormonal IUDs, please see the Hormonal IUD Information Sheet available on our website.

SHQ is on Whadjuk land. We acknowledge the traditional owners of country across Western Australia.



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