

Appointments 510/642-2000 Online Appointment www.uhs.berkeley.edu

ParaGard[®] Intrauterine Device (IUD)/Contraceptive (IUC) Patient Information

ParaGard® has been safely used by women in the United States since 1988. ParaGard® is an intrauterine device made of polyethylene with barium sulfate (which aids visibility during x-ray). The stem and arms of the 'T' shaped device have a fine copper wire wound around its surface. Once ParaGard® has been inserted, the uterus and fallopian tube fluids change. Copper ions, enzymes, prostaglandins, and white blood cells contained in the fluids impair sperm function and prevent fertility. Once ParaGard® is removed, the fluids return to normal and fertility is restored. ParaGard® is a very effective contraceptive. Less than 1/100 women become pregnant each year while using ParaGard®.

Many negative ideas about the IUD were developed because of the Dalkon Shield; the Dalkon Shield was an IUD introduced in 1970 and recalled in 1975. It was associated with a significant incidence of pelvic inflammatory disease (PID) and infertility. The Dalkon Shield contained multifilament threads which were believed to transmit bacteria into the uterus and fallopian tubes. Today, two IUDs are approved for use in the United States; both are monofilament threads that minimized the risk for bacteria transmission.

Advantages of ParaGard®:

- Highly effective contraceptive
- Long-lasting (10 years, but can be removed earlier if desired)
- Convenient
- · Low risk of side effects
- Well-liked by users
- Cost effective
- Reversible (immediate return to fertility after removal)
- Hormone free

You should not use ParaGard® if you:

- might be pregnant
- currently have pelvic inflammatory disease (PID);
 have had PID in the past 3 months; have a history of recurrent pelvic infections
- have a history of a uterine infection after a pregnancy or abortion in the past 3 months

- have cancer of the uterus or cervix
- have unexplained vaginal or uterine bleeding
- have an infection in your cervix (cervicitis)
- have Wilson's disease (a rare disorder affecting copper excretion)
- are allergic to copper or anything in ParaGard®

What is the process for obtaining an IUD?

ParaGard® is inserted and removed by a clinician during a clinic appointment. You will need at least 2 appointments. During the initial appointment your clinician will determine if you are a good candidate for ParaGard® and a detailed consent will be reviewed, STD and pregnancy screen will be completed if indicated. Another appointment will be needed for the actual insertion.

How is ParaGard® placed in the uterus?

Your healthcare provider will check the position of your uterus and then insert an instrument ("sound") through the cervix to determine the length of your uterus, after which the IUD will be inserted. The exam, preparation and insertion will take an average of 30 minutes. Many people notice cramping (similar to severe menstrual cramps) when the sound instrument

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(continued)

is inserted through the cervix. The intensity of the cramps varies according to each person's pain tolerance and cervix sensitivity. Some women notice transient symptoms such as: feeling faint, nauseated, or dizzy.

How do I know if ParaGard® is in place?

Once ParaGard® has been inserted; your provider will teach how to check for the two thin threads which extend from your cervix into the upper vaginal area. Locating the threads is an indication that the IUD is in place. The thread should be checked by you at least once per month. Do not pull on the threads, this may cause pain and may dislodge the IUD. If you cannot feel the threads, you must use condoms or abstain and return to the clinic for an exam to determine if the IUD is in place.

What side effects can I expect with ParaGard®?

- All contraceptive methods have side effects. ParaGard® side effects may include: menstrual cramping, heavier, longer periods and spotting between periods (usually these symptoms improve after 2-6 months).
- Other side effects include: anemia (low blood count), backache, pain during sex, menstrual cramping, allergic reaction, increased vaginal discharge.

Complications related to ParaGard® use may include:

- Pelvic inflammatory disease (PID): The IUD itself does not increase the risk of PID, however PID may occur if
 infection is present during insertion or you are participating in sexual activity which increases your risk of a sexually
 transmitted infection (STI) exposure. Women with multiple sex partners or who are having sex with men who have
 other sex partners, have an increased risk of STI & PID and therefore are not appropriate candidates for ParaGard®.
 Condoms use will reduce the risk of contracting an STI or PID.
- Difficult removals: Occasionally ParaGard® may be hard to remove because it is lodged in the uterine wall. Surgery
 may be needed to remove ParaGard®.
- **Perforation**: Perforation (ParaGard® goes through the wall of the uterus), may rarely occur during IUD placement. If perforation occurs the uterine wall often heals without surgery or complications.
- **Expulsion**: ParaGard® may partially or completely fall out of the uterus (expulsion). Women who have never been pregnant are more likely to expel ParaGard® than women who have been pregnant before.
- **Pregnancy**: Rarely, pregnancy occurs with the IUD in place. If you are pregnant with an IUD in place it is more likely to be an ectopic/tubal pregnancy. Early evaluation by your health care provider is necessary.

When should I call my healthcare provider?

- think you are pregnant
- have pelvic pain or pain during sex
- have unusual vaginal discharge
- have unexplained fever
- might be exposed to sexually transmitted infection (STI)
- miss a menstrual period

- cannot feel ParaGard®'s threads or can feel the threads are much longer than usual
- can feel any other part of the ParaGard® besides the threads (e.g. feel plastic at cervix)
- if you or your partner become HIV positive
- have severe or prolonged vaginal bleeding

The IUD does not protect against sexually transmitted infections

The IUD is very effective in preventing pregnancy but it does not protect you from STIs. Using condoms will reduce your risk of STIs such as herpes, chlamydia, gonorrhea, HIV, etc.

If you have more questions check our website: www.uhs.berkeley.edu If you experience problems with the IUD, visit www.uhs.berkeley.edu, call 642-2000 for an appointment, or call the Clinic Nurse 643-7197. If you have an urgent need



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go the Urgent Care Clinic during clinic hours; after hours, if you have SHIP insurance, go to Alta Bates Medical Center, call your medical provider if you do not have SHIP.