IUD (intrauterine device): Another birth control option

Dear Alice,

As I looked in your list for contraception methods, I couldn't find a thing called "Intrauterinpessar," or maybe it's a bad translation of the popular German word, "coil." Isn't that used in the U.S.? Are there reasons for not using them? Thank you for answering.

? A European Woman

Answer

Dear A European Woman,

You're probably referring to a method of contraception known in the United States as the intrauterine device or IUD for short. An IUD is a small long-acting reversible contraceptive (LARC) which is placed in the uterus by a health care provider and can prevent pregnancy for up to three to ten years. Some IUDs have a coiled shape, which may explain the German translation that you mentioned. Others, such as the ones available in the U.S., resemble the letter "T." To answer your question, before the approval of the current generation of IUDs, some people experienced severe complications from earlier generations of devices. However, they were removed from the market and replaced by low-risk and highly effective IUDs (more on those in a bit!). Due to the complications with the earlier generations, many remain skeptical of IUDs. As a result, they're not as common of a contraceptive method in the U.S. as they are in many countries in Europe, although they're becoming more popular.

The two types of IUDs available in the U.S. market are non-hormonal (copper) and hormonal IUDs. **Non-hormonal IUDs** prevent pregnancy by releasing copper into the uterus, which helps to immobilize sperm, prevent fertilization, and possibly prevent a fertilized egg from implanting in the uterine wall. They're effective for up to ten years and can be used by those who don't typically respond well to or are unable to use hormonal contraception. Additionally, they **may be used as emergency contraception**. Alternately, **hormonal IUDs** prevent pregnancy by releasing progesterin, a hormone which thickens the cervical mucus to prevent sperm from entering the uterus and can prevent ovulation. They can last three to five years, depending on the kind you get. Of the two types of IUDs, these may reduce menstrual cramps and make the flow lighter, or sometimes stop periods altogether. Contrary to previous recommendations, **both types of IUDs are safe for those without children**.

As with any method of birth control, the IUD has its advantages and disadvantages.
Advantages of the IUD include:

- **A high-level of protection:** Both hormonal and non-hormonal types are over 99 percent effective.
- **Cost effectiveness:** Depending on the health insurance plan, the upfront cost of getting an IUD may be high. However, as an IUD is paid for once, rather than paying for other contraceptive methods each month, less money may be spent on pregnancy prevention over time.
- **Allowing for spontaneity:** Once it’s in place, it provides continual protection, unlike daily forms of birth control that rely on memory and using them correctly (ranging from the pill [6] to condoms [7]) for adequate protection, and the device is usually not felt by partners during sex.
- **Being reversible:** Fertility resumes quickly after the removal of the device (assuming that there were no serious complications – more on that in a bit), which can be done at any time by a health care provider.
- **Immediate effectiveness:** The only exception is if the hormonal IUD is inserted at a time other than the first seven days of the menstrual period. In that case, using another form of birth control (such as internal [8] or external [9] condoms) for the first seven days following insertion is suggested.

It’s also good to be aware of the possible disadvantages of IUDs, including:

- **Visits to a medical provider:** Getting an IUD requires medical visits for insertion, follow-up exams (including any pap smears [10] as part of a regular gynecological exam), and removal.
- **Lack of sexually transmission infection (STI) protection:** While effective against pregnancy, they provide no protection against sexually transmitted infections (STIs).
- **Side effects:** Cramping, dizziness, backache, changes in menstrual flow [11], and spotting between periods, which can occur during and after insertion.
- **Expulsion:** Sometimes, although very rare, an IUD can slip out of place, either moving slightly or coming out completely. If this happens, pregnancy is much more likely.
Generally, the **insertion and removal of an IUD** are quick and simple procedures. A trained health care provider will use a speculum to open the vagina and use a special inserter to place the IUD through the cervix and into the uterus. This usually takes a few minutes and may be followed by brief cramping or mild pain. Providers clip the IUD’s strings, to approximately one to two inches, allowing for people to check their strings (and IUD placement) at home and to facilitate future removal. While this process can take place during any time of the month, some providers will schedule an insertion to occur while a person is actively menstruating. During this time, the cervix (the opening to the uterus) is dilated and softened, allowing for a smoother insertion. It’s also likely to indicate that the person is not pregnant. After insertion, many people may feel fine, while others may experience backaches, cramping, and discomfort sufficient to warrant a day of rest. However, over-the-counter pain medications, heating pads, or warm baths can often ease the pain. During any time after insertion (including before an IUD expires), a person can have their IUD removed during a five minute procedure with their provider. During this time, a provider will use a speculum to open the vagina and gently pull on the IUD string until the IUDs arms (horizontal part of the ?T?) fold upwards and slip out. Infrequently, special instruments may be used to facilitate removal, and in very rare circumstances where removal is difficult, surgery may be required to take out the IUD.

Though rare, there are a few potentially severe complications associated with IUDs. There is a risk of infection and uterine perforation (when the IUD pushes through the wall of the uterus). Additionally, though the risk of pregnancy is very low and rare, if it does occur, it can result in infection, miscarriage, **ectopic pregnancy** [12], or early labor and delivery. If a person experiences pain, or suspects an infection or pregnancy at any time while using an IUD, seeking immediate medical attention is advised. For more information, check out [IUD Birth Control](#) from Planned Parenthood.

Ultimately, there can be a lot to think about when it comes to IUDs ? whether they’re right for you, which kind is most appropriate for you, and what you can expect before, during, and after insertion. If you’re considering an IUD or you’re simply curious about them, it may be worthwhile to meet with a health care provider who can walk you through any questions and concerns you may have. You can also learn more about contraception in general in the [Contraception](#) category of the Go Ask Alice! Sexual and Reproductive Health [15] archives.

Cheers to learning about this method contraception!

**Alice!**

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