IS AN IUD or IMPLANT RIGHT FOR YOU?

Benefits:

- + Available to most people with a uterus of reproductive age, with or without children, single or in a relationship
- + Highly effective (>99%)
- Requires very little effort. Get it and forget it.
- Long lasting effectiveness (3-12 years depending on device). All devices can be removed by a medical professional any time during the lifespan of the device to switch methods or restore fertility.
- + Provides quick restoration of fertility after removal by a medical professional.

Cost:

Professional insertion and removal fees plus the cost of the device may seem high, but these charges are more cost-effective over time than other contraceptive options such as the pill, patch or ring. Many insurance companies will pay a significant portion of the cost for the contraceptive device and insertion/removal fees. Use the IUD/Implant Insurance Worksheet found on our website to learn what your insurance plan covers. Long acting reversible contraception options are generally covered by UNC sponsored health insurance plans.

FOR MORE INFORMATION, CONTACT:

- Campus Health Gynecology 919.966.3650
- Campus Health Pharmacy 919.966.6554 or Student Stores Pharmacy 919.966.8166
- SHARE (Student Wellness) 919.962.WELL

FOR FURTHER READING: CAMPUSHEALTH.UNC.EDU/IUD

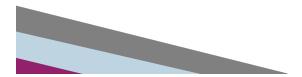
- use the related links in the sidebar or visit <u>bedsider.org</u>

campushealth.unc.edu | 919.966.2281 James A. Taylor Building University of North Carolina at Chapel Hill Student Affairs

Updated September 2021

IUD (INTRAUTERINE DEVICE) & IMPLANT





OPTIONS FOR LONG ACTING REVERSIBLE CONTRACEPTION

NON-HORMONAL COPPER INTRA-UTERINE DEVICE (IUD)

Paragard[®] **Effective for up to:** 10 (to 12) years **Effectiveness:** >99% Pros: No hormones. Highly effective. Longest lasting contraceptive option available. Reduced risk of endometrial cancer. Can be inserted within up to 5 days after unprotected penile-vaginal sex and acts as

penile-vaginal sex and acts as the most effective emergency contraception available. Cons: Stronger cramps with your period, longer periods are possible. Some risk of the uterus expelling the device, which would result in fertility restoration. Rarely perforation of the uterus could occur at the time of placement. **How it works:** The IUD's precise mechanism

is not known; several factors are likely involved. Pregnancy appears to be prevented by the changes in the uterine environment as a result of the introduction of a foreign body (the IUD) and copper that impairs sperm and ova function as well as prevents fertilization.

HORMONAL IUD

Liletta[°], Mirena[°], Kyleena[°], Skyla[°] **Effective for up to:** 7 years Mirena[°] and Liletta[°]

5 years Kyleena® 3 years Skyla®

Effectiveness: >99%

Pros: Highly effective. Lighter and less painful periods or no periods. Reduced anemia. Reduced symptoms of endometriosis. Lower risk of endometrial cancer. Lower levels of hormones. Progestin-only method of contraception. Can be inserted within up to 5 days after unprotected penile-vaginal sex and acts as the most effective emergency contraception available.

Cons: Cramping and irregular bleeding for the first few months. Lighter periods or no bleeding at all. Less common side effects include hair & skin changes, bloating, headache, breast pain, mood changes, nausea and ovarian cysts. There is some risk of uterus expelling the device, which would result in fertility restoration. Rarely perforation of the uterus could occur at the time of placement. How it works: The IUD's precise mechanism is not known; several factors are likely involved. The main mechanism is the local effects of the hormone progestin including thickening cervical mucus. Mirena® and Liletta® have the highest amount of hormone followed by Kyleena® then Skyla®.

IMPLANT

Nexplanon[®] **Effective for up to:**

3 (to 4) years Effectiveness: >99%

Pros: Highly effective. Reduced or no periods over time. Reduced anemia. Reduced symptoms of endometriosis. Progestin only method of contraception.

Cons: Possible irregular bleeding and sometimes no bleeding after one year of use. Possible decreased effectiveness with certain medications such as St. John's Wort, phenytoin, carbamazepine, topiramate, oxcarbazepine, primidone, barbituates, and rifampin. Less common side effects include hair & skin changes, bloating, headache, breast pain, mood changes, and nausea.

How it works: The implant is inserted under the skin in the upper arm, where it releases the hormone progestin. The progestin prevents ovulation, thickens cervical mucus, and prevents thickening of the endometrial lining.