

Gynaecology

Mirena Coil (IUS)

What is a Mirena Coil?

A Mirena Coil is an Intrauterine system (IUS) and is a small plastic T-shaped device containing the progesterone hormone levonorgestrel.

What is it used for?

The IUS is used:

- As a method of contraception
- For the treatment of heavy periods
- To protect the lining of the womb during the menopause

How does it work?

It is inserted into the womb where it releases the hormone steadily over a five year period or until it is removed.

Mirena - As treatment for heavy periods

The Mirena controls the monthly development of the lining of the womb, making it thinner so there is less bleeding every month.

- Long term, most women notice a marked reduction in their menstrual flow, and some women find their periods stop completely
- Two out of three women will avoid surgery such as hysterectomy
- Period pains are often reduced
- The IUS often helps with symptoms of pre menstrual syndrome
- Fibroids can occasionally shrink



Patient Information

Mirena – As contraception

- If inserted within seven days of the start of your period the Mirena coil gives you immediate protection against pregnancy. If inserted **after** this time another contraceptive method is needed until the next period occurs.
- It works by thickening the cervical mucus so that it is difficult for sperm to get through to the egg
- In some women it stops the ovaries from releasing an egg
- It keeps the lining of the womb too thin for implantation of a pregnancy
- The IUS is more than 99% effective for five years. After this time a replacement Mirena coil will need to be inserted to maintain its contraceptive effect
- Fertility returns to normal almost immediately after removal
- You can use it if breast feeding

Mirena - As Hormone Replacement Therapy (HRT)

- The Mirena replaces progesterone, the hormone no longer produced by your body at the time of menopause
- The Mirena protects the lining of the womb from abnormal thickening which may rarely lead to cancer
- Your specialist may suggest you take estrogen (another hormone) in addition to the Mirena coil if you have ongoing menopausal symptoms

What are the common side effects?

- Erratic bleeding for the first three to six months, this includes spotting and prolonged lighter periods. After this time periods may stop totally
- Spotting may occur
- Occasionally breast tenderness can occur. Taking evening primrose oil may help
- Weight gain, headaches, nausea, acne and mood changes. Although these are common with all progesterone based treatments, the Mirena has a systemic effect and therefore they are less likely to occur

Patient Information

Less common side effects

- Ovarian cysts
- Abdominal pain
- Bloating or swelling of legs or ankles
- Depression or nervousness or mood changes
- Abnormal vaginal discharge

How is it inserted?

The IUS will be inserted by your specialist. This will involve using the same instrument used when having a smear. It is likely that you will experience some cramp like discomfort during the insertion, however this usually settles after the procedure. Very occasionally some local anaesthetic can be used if insertion turns out to be difficult.

The position of the coil may then be checked with an internal scan to confirm correct placement

Risks of Insertion and immediately following

- Bleeding: some bleeding is common after the Mirena is inserted.
- Infection: the specialist will take swabs at the time of insertion and you will receive a letter approximately three weeks after your initial appointment with the results. If you suffer with an offensive discharge after insertion please make an appointment to see your GP
- Perforation: damage to uterus, this is extremely rare and your specialist will perform an ultrasound scan after insertion to ensure the Mirena is in the correct place. If you experience excessive pain it is very important to inform a doctor or report to Ward 23 Emergency Gynaecology Unit

How long does it last?

The IUS is licensed for five years. Your specialist may suggest you require removal of the existing coil and a replacement coil inserted, if your initial symptoms reoccur or if you are using the coil as a contraceptive.

How do I know it has not fallen out?

You can check your coil yourself by feeling for the threads with your finger through the vagina. It is advised that you check on a monthly basis, this is particularly important after any heavy bleeding.

Patient Information

You will be advised to see your own GP about six weeks after insertion, alternatively you may be asked to attend for a scan to check the coil is still correctly positioned.

How is it removed?

It can be removed quickly and easily by your GP or specialist.

Is the Mirena Coil Suitable for me?

Your specialist will ask you specific questions to assess this. It is very important that you inform them about any:

- Medication you may be taking
- Illnesses
- Operations you have had

If you feel at all unwell after the insertion of the IUS please contact your GP or Ward 23 Emergency Gynae Unit

If you have any further questions please contact:

Gynaecology Outpatients Department:	024 7696 7351 or 7350
Gynaecology suites	024 7696 7222
Emergency Gynaecology Unit	024 7696 7000

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 7222 and we will do our best to meet your needs.

The Trust operates a smoke free policy

Document History

Department:	Gynaecology
Contact:	27222
Updated:	February 2020
Review:	February 2022
Version:	3.2
Reference:	HIC/LFT/1078/10