An IUS is a small T-shaped plastic device that is put into your uterus (womb) and releases a progestogen hormone. This is similar to the natural progesterone that women produce in their ovaries.

The IUS has two threads at one end which hang through the opening at the entrance of your uterus – (the cervix) into the top of your vagina.

There are two types of IUS – Jaydess and Mirena. In this booklet, the two different types are named where relevant. The general term IUS is used to refer to both types. Jaydess is smaller than Mirena and has a lower dose of progestogen. It works for up to three years. Mirena works for up to five years. If you are aged 45 or older when Mirena is fitted, it can be left in until the menopause.

How effective is an IUS?

How effective any contraceptive method depends on how old you are, how often you have sex and whether you follow the instructions.

If 100 sexually active women don’t use contraception, 80–90 will become pregnant in a year.

The IUS is over 99 per cent effective. Less than one woman in every 100 women who use the IUS will get pregnant in a year. The IUS is a method of long-acting reversible contraception (LARC). All LARC is very effective because while it is being used you do not have to remember to take or use contraception.

When will an IUS start to work?

The IUS can be fitted any time in your menstrual cycle if it is certain that you are not pregnant. If it is fitted in the first seven days of your menstrual cycle you will be immediately protected against pregnancy. If it is fitted at any other time, you will need to use additional contraception for the first seven days. If you have a short menstrual cycle with your period coming every 23 days or less, starting the IUS as late as the seventh day of your cycle may not provide you with immediate contraceptive protection. This is because you may release an egg (ovulation) early in your menstrual cycle. You may wish to talk to your doctor or nurse about this and whether you need to use additional contraception for the first seven days.

How does an IUS work?

• It makes the lining of your uterus thinner so it is less likely to accept a fertilised egg.
• It also thickens the mucus in your cervix. This makes it difficult for sperm to move through it and reach an egg.

• In some women it stops the ovaries releasing an egg (ovulation), but most women who use an IUS continue to ovulate.
• An IUS does not cause an abortion.

Other Headings in Leaflet

What are the advantages?

Are there any risks?

Can anyone use an IUS?

I’ve just had a baby. Can I use an IUS?

Can I use an IUS after a miscarriage or abortion?

Where can I get an IUS?

How is an IUS put in?

What if I feel unwell after the IUS is put in?

How will I know it is still in place?

Is it safe to use tampons if I have an IUS fitted?

When can the IUS be removed?

Will an IUS affect my periods?

For further information see:

www.fpa.org.uk