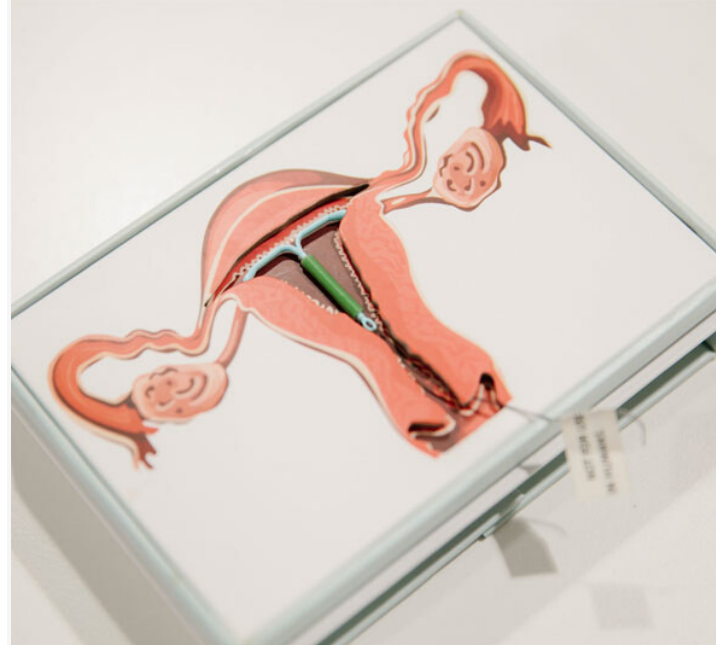


FACT SHEET: HORMONAL IUD MIRENA® & KYLEENA®

What is a Hormonal IUD?

Hormonal Intrauterine Device (IUD or IUS) is a small, flexible plastic T shaped intrauterine device that contains a small dose of a progestogen hormone called Levonorgestrel on the stem. It is placed inside the uterus (womb) and works from the inside to prevent pregnancy.

There are two types of hormonal IUD available in Australia. The 52mg Levonorgestrel IUD (Mirena®) and the 19.5mg Levonorgestrel IUD (Kyleena®).



What is the difference between a Mirena® IUD and a Kyleena® IUD?

Mirena® IUD is licensed for contraceptive use for up to 8 years. Kyleena® IUD is licensed for contraceptive use for up to 5 years.

Mirena® IUD contains 52mg of Levonorgestrel and has three main indications for use: 1) contraception, 2) menstrual control and 3) the progestogen component of Menopausal Hormonal Therapy (Hormone Replacement Therapy). It is particularly suited to those who have heavy periods or menstrual problems and those who may be approaching perimenopause. When Mirena® is used for endometrial protection as part of menopausal hormonal therapy it has enough hormone to last for 5 Years only and should be replaced for endometrial protection at that stage.

Kyleena® IUD is licensed for contraception only and has a smaller frame and insertion cannula compared to Mirena®. This makes it particularly suited to younger clients, those with a small uterus and those who have never had a child. Its lower hormonal dose means that it may not suppress periods as successfully as Mirena® IUD, but patients may also experience less hormonal side effects including less risk of benign ovarian cysts with the lower dose system.

How does the hormonal IUD work?

Levonorgestrel IUD prevents pregnancy by thickening the cervical mucus to prevent sperm from being able to enter the uterus and by suppressing or thinning down the endometrium (uterus lining) to prevent a pregnancy from implanting. Occasionally it will also stop ovulation..

How effective is a hormonal IUD at preventing pregnancy?

Mirena® IUD is 99.9% effective at preventing pregnancy. That means that there is a 0.1% chance that Mirena® IUD user will fall pregnant, i.e. 1 per thousand that have a Mirena® could get pregnant. Kyleena® IUD is almost as effective at 99.7% at preventing pregnancy. These are much more reliable forms of contraceptive than the pill, which is around 92% effective, i.e. 80 per thousand users will become pregnant while using that form of contraception.



Who is Able to Use A Hormonal IUD?

All age ranges are ideally suited to use a hormonal IUD. As it is a progesterone-only method, it is suitable for those who cannot use oestrogen containing contraceptives e.g. history of DVT, focal migraine sufferers. The IUD can be used by breastfeeding mothers as the IUD does not affect milk supply and is safe to use in the postnatal period. IUDs do not have interactions with other medications. Mirena® IUD can be particularly useful for menstrual symptom control for those who have endometriosis or adenomyosis.

Who Should Not Use a Hormonal IUD?

There are very few reasons why a hormonal IUD would not be suitable. However, it should not be used in anyone who is pregnant or suspected to be pregnant, those with a known malformation or structural abnormality of their uterus, those with an active pelvic infection, fibroids which distort the uterine cavity and those who suffer with hormonally sensitive cancers.

What Should You Talk to Your Doctor About?

You should talk to your doctor about whether the IUD is suitable for you. You may also ask for advice about which device to choose or options for pain relief for during the insertion. The IUD device can be inserted whilst awake or under IV sedation.

Advantages of hormonal IUD:

- It is a long-acting-reversible or “fit & forget” form of contraception, ideal for busy women.
- Highly effective > 99%
- Cost effective as can be used for up to 5-8 Years
- Lighten periods and it can be common to have no periods with the device (this is safe)
- Reduced period pain
- Rapid return to fertility once removed

Disadvantages of Hormonal IUD:

- It does not protect against STIs. A condom should also be used to protect against sexually transmitted infection transmission
- Some hormonal side effects are possible in a small proportion of users such as: acne, bloating, mood swings, appetite increase and headaches.
- Mirena® IUD can increase the risk of benign ovarian cysts (Kyleena® has less risk of benign ovarian cysts than Mirena®)



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How Do I Get A Hormonal IUD?

- A consultation is performed first to make sure that the Hormonal IUD is the best choice of contraceptive for you and to make sure that there are no medical contraindications. This can be done in person or via Telehealth. You may be asked to have some pre-insertion investigations such as a pelvic ultrasound or a STI check.
- Once the preparation has been done, the actual insertion process only takes a few minutes but you may have to stay at the clinic to be monitored for a short while afterwards. The insertion process requires a vaginal speculum examination and for a vaginal examination so that the size and shape of the uterus can be assessed and measured before the IUD is inserted. Some patients prefer a local anaesthetic to help with the discomfort if they are awake. We always recommend taking pain relief 30 mins before an IUD insertion procedure.

What to expect after insertion:

There may be some minor side effects as your body adjusts. These may include some bleeding, spotting or cramps. Over-the-counter pain relief and heat packs are recommended solutions. It is also recommended to avoid having sex, inserting tampons, going swimming or taking baths for 3 days after the procedure as these can greatly increase the risk of infection. After 3 days, you can resume all normal activities.

It usually takes 7 days for the IUD to be effective, but the inserting clinician will confirm the timing of effectiveness.

A follow-up appointment with your doctor four to six weeks after the device is inserted can be made if you wish, but you should return sooner if you have side effects that you feel are not normal. We generally do not make routine appointments to check the IUD.



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Things to know when you have a hormonal IUD:

Some IUD users check the threads each month to reassure themselves that the device is still there. If you feel the device, or that the threads are longer than usual, you should get checked. The device works if the IUD stays in the right place. Sometimes IUDs can move. If you can't feel the threads, it doesn't mean that you have lost the device, but you may need an ultrasound to check the position.

Keep a record of when you got your IUD (especially if you change doctors) and return to your doctor immediately if you have any sudden or unusual symptoms. These can include deep physical discomfort during sexual activities.

Removal of the Hormonal IUD:

When you are ready to remove the hormonal IUD, it can be removed simply by a doctor with a pair of forceps during a speculum examination. Most GPs are happy to remove an IUD provided that the threads are still visible at the cervix. The procedure is quick and relatively painless. A new IUD can be inserted as a replacement if desired.

More Information:

If you have follow-up questions or a specific query that the information on this page did not cover, we encourage you to make an appointment for a telehealth consultation or come into the clinic for a face to face visit. You can book an appointment at our Chatswood clinic between 8 am and 6 pm, Monday to Saturday.

- <https://www.fpnsw.org.au/factsheets/individuals/contraception/hormonal-iud>
- <https://www.thewomens.org.au/health-information/contraception/intra-uterine-device-iud>