

**Patient
Information**

Mirena[®] intrauterine system

Introduction

This leaflet gives you information about the hormone coil recommended by your doctor.

What is a Mirena[®] intrauterine system?

This system is like many other types of coil. Mirena[®] will be fitted by a doctor and stay in the womb for a fixed period of time. It is much more effective than usual coils and has fewer side effects, making periods lighter.

Mirena[®] is made of a plastic, T-shaped frame which contains a low dose of hormone, also used in contraceptive pills but contains no oestrogen.

How effective is this contraception?

Mirena[®] is very effective compared to other forms of contraception. It acts in 2 ways; preventing sperm from getting through thicker mucus and making the lining of the womb extremely thin, stopping implantation.

In some women it can prevent egg release or ovulation.

If Mirena[®] does happen to fail, there is a higher risk of ectopic pregnancy. This is a pregnancy found outside the womb.

If you feel at any time that you may be pregnant, it is important to see your doctor to discuss your coil.

Fitting the Mirena[®]

The doctor will perform an internal examination to make sure there is nothing unusual before fitting the Mirena[®]. The coil is inserted either within a week of beginning your period, immediately after a termination or 6 weeks after having a baby.

Fitting the Mirena[®] is similar to having a smear test. A local anaesthetic may be used if needed. You will not be able to feel the Mirena[®] once fitted.

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Department

Gynaecology

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You will receive a follow appointment for about 6 weeks after the Mirena[®] is fitted.

Your partner should not be aware of the Mirena[®] during intercourse.

Removing or changing the Mirena[®]

Mirena[®] will last 5 years and if needed, a new one can be inserted at the same time the old one is removed. Removing the coil is only uncomfortable for a short time.

After the removal of the Mirena[®] your periods and fertility will return within a month.

Side effects

In the first months of use, there is a very small chance that the Mirena[®] may dislodge and come out. There may be bleeding, sometimes with pain.

There is a slight increase in progesterone levels which can cause headaches, water retention, breast tenderness or acne. This can also increase the chance of ovarian cysts.

After having the Mirena[®] fitted it can take from 3 to 6 months for the bleeding to settle down.

Contact information

If you have any questions, please contact your own consultant's secretary.

Gloucestershire Domestic Abuse Support Service (GDASS)

This is a county-wide service offering a variety of support programmes for women and men over 16 years old who are experiencing domestic abuse.

Tel: 01452 726 570

Monday to Friday, 9:00am to 5:00pm

Domestic Violence Helpline

Tel: 0808 2000 247 (24 hours)

Email: support@gdass.org.uk

Website: www.gdass.org.uk

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Further information

For further information, please visit Mirena® IUS:

Website: www.womens-health.co.uk

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Making a choice

Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.



Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you are asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?

These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation

* Ask 3 Questions is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial. Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>