What is the Mirena intrauterine system?
The Mirena intrauterine system (IUS) is a small plastic T-shaped device containing the progesterone hormone levonorgestrel. It is fitted into the womb where it releases the hormone slowly and steadily.

The IUS can be used as a form of contraception, a treatment for heavy periods and can also provide the progestogen part of hormone replacement therapy (HRT).

The Mirena intrauterine system can be used for up to 5 years and must then be removed and may be replaced with a new device.

What are the benefits of the Mirena IUS?

Heavy periods
The Mirena IUS can significantly reduce the amount of bleeding and the number of days of bleeding during a period. It works because the hormone in the IUS makes the lining of the womb very thin, meaning that there is very little to come away at period time. Some women find their periods stop altogether and this is more likely to happen in women approaching the menopause.

Contraception
1 woman out of 100 using the Mirena IUS each year will become pregnant. The Mirena prevents pregnancy by thickening the mucus in your cervix so that it is difficult for sperm to get through to reach the egg. In some women it stops the ovaries from releasing an egg. After the Mirena has been removed fertility returns to normal within 8 weeks.

Hormone Replacement Therapy
The Mirena IUS can provide the progestogen part of hormone replacement therapy, needed by women who have not had their womb removed (hysterectomy). Oestrogen is the main hormone used in HRT and this makes the lining of the womb thicker and can increase the risk of cancer in the lining of the womb. A progestogen is needed to stop this from happening and Mirena does this very effectively. The oestrogen can be taken separately.

Other benefits:
- Period pain is often reduced.
- In some women the IUS will help reduce symptoms of PMS.
- The IUS may shrink some fibroids.
- If the IUS is removed, your periods will return to their previous pattern unless you have become menopausal.
What are the risks of having the Mirena IUS?

- Your womb could be damaged when the Mirena is being fitted, which can cause severe pain and/or bleeding. This occurs in less than 1 in 1000 patients.
- If you have a vaginal infection at the time the IUS is fitted this could lead to a pelvic infection which could cause severe tummy pain.
- The IUS can be rejected by the womb in 1 out of 20 women. This can cause pain and bleeding.
- 1 in 100 women become pregnant while using the Mirena IUS. 1 in 20 of these women may experience an ectopic pregnancy.
- You may experience some of the following possible side effects of the Mirena IUS: slight weight gain, greasy skin, mood changes, back pain, swelling in your feet and ankles and/or headaches. Excessive hair growth, hair loss and itching are rare side effects which can occur.

Are there any alternative treatments?

Alternatives to using the IUS to control heavy periods include:

- Medicines that act on hormones, such as the combined oral contraceptive pill.
- Surgical treatments – such as hysterectomy (an operation to remove the womb) and endometrial ablation (using laser to remove the womb lining).

Further information leaflets about these treatments are available; please ask if you would like one.

For information about alternative methods of contraception please visit www.nhs.uk/conditions/contraception or speak to your doctor.

For information about alternative progestogens for HRT please see the leaflet ‘Hormone replacement therapy’, which is also available on our website www.swbh.nhs.uk.

Having the Mirena IUS fitted

There is nothing you need to do to prepare to have the Mirena fitted. The Mirena IUS is usually inserted in the outpatients department or at a clinic by a doctor or nurse. The procedure takes less than 10 minutes. In women of fertile age the Mirena is inserted within 7 days of the start of a period.

Some women may find the fitting uncomfortable, and if necessary a local anaesthetic can be used to numb the area to minimise this. In most cases a general anaesthetic (where you are asleep) or a stay in hospital is not needed for this procedure.
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This is what happens:

1. The doctor/nurse will examine you vaginally using an instrument called a speculum (like when you have a smear test).
2. Your cervix and vagina will then be cleaned using an antiseptic solution.
3. If needed, your cervix (neck of the womb) will be gently held in position by holding forceps.
4. An instrument carrying the IUS will be carefully moved through your cervix and into your womb, where the IUS is released into position.

After it has been fitted

After the IUS has been fitted you may have period-type crampy pain which can be relieved by taking simple painkillers such as paracetamol. You will be able to go home and return to your normal activities (including driving) soon after the procedure as long as you feel well.

It is usual to have irregular bleeding, spotting and longer, lighter periods during the first 3 months after having the Mirena fitted, but this should settle down after 6 months. You may also have some red or brown spotting – this is normal and nothing to worry about.

Some women experience breast tenderness after the Mirena IUS is fitted, which will resolve in time.

Follow-up

You should arrange to see your GP practice nurse 6 weeks after the IUS has been fitted for a vaginal examination to check the coil threads can be seen and all is well. You should then visit your practice nurse once a year to check these.

Removing or changing the Mirena IUS

Your doctor or nurse can easily remove the Mirena IUS during a vaginal examination by gently pulling the threads. Each Mirena IUS should not be used for more than 5 years.

Symptoms to report

Please contact your GP if you experience the following symptoms whilst you have the Mirena IUS in place:

- excessive increase in period blood flow
- a temperature of 38°C or above
- lower abdominal (tummy) pain

If these symptoms are severe please go to your local A&E department.
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Further information
For more information about heavy periods, contraception and the menopause:

NHS Choices
www.nhs.uk

For more information about contraception:

Family Planning Association (FPA)
www.fpa.org.uk
Helpline: 0845 122 8690
Monday – Friday, 9am – 6pm

For more information about our hospitals and services please see our websites
www.swbh.nhs.uk and www.swbhengage.com, or follow us on Twitter @SWBHnhs and Facebook www.facebook.com/SWBHnhs.

Sources used for the information in this leaflet
• National Collaborating Centre for Women’s and Children’s Health, ‘Long-acting reversible contraception’, October 2005
• National Collaborating Centre for Women’s and Children’s Health, ‘Heavy menstrual bleeding’, January 2007
• NHS Evidence Clinical Knowledge Summaries, ‘Menorrhagia (heavy menstrual bleeding) – Prescribing information’, October 2010
• British National Formulary, section 7.3.2.3 ‘Intra-uterine progestogen-only system’, December 2012

If you would like to suggest any amendments or improvements to this leaflet please contact the communications department on 0121 507 5420 or email: swb-tr.swbh-gm-patient-information@nhs.net