26 Dennis J, Webb A, Kishen M. Expulsions following 1000 GyneFix insertions. *J Fam Plann Reprod Health Care* 2001; **27:** 135–138.
27 Wildemeersch D, Batar I, Webb A, et al. GyneFIX. The frameless intrauterine contraceptive implant – an update. *Br J Fam Plann* 1999: **24:** 149–159.
28 Population Reports. *IUDs – An update*. Series B, Number 6. Geneva: World Health Organization, December 1995.
29 Sivin I, Stern J. Health during prolonged use of levonorgestrel 20 mcg/d and the Copper TCu 380Ag intrauterine contraceptive devices: a multicenter study. *Fertil Steril* 1994; **61:** 70–77.
30 Sivin I, Stern J, Coutinho E, et al. Prolonged intrauterine contraception – a 7 year study of levonorgestrel IUCD 20 µg/day and the Copper T 380 Ag. *Contraception* 1991; **44:** 473–480.
31 Andersson K, Rybo G. Levonorgestrel-releasing intrauterine device in the treatment of menorrhagia. *Br J Obstet Gynaecol* 1990; **97:** 690–694.
32 Rybo G. Treatment of menorrhagia in Chinese women: efficacy versus acceptability. *Contraception* 1995; **51:** 231–235.
33 Milsom I, Andersson K, Andersch B, et al. A comparison of flurbiprofen, tranexamic acid and a levonorgestrel-releasing intra-uterine contraceptive device in the treatment of idiopathic menorrhagia. *Am J Obstet Gynecol* 1991; **164:** 879–883.
34 Irvine GA, Campbell Brown MB, Lumsden MA, et al. Randomized comparative trial of the levonorgestrel intrauterine system and norethisterone for treatment of idiopathic menorrhagia. *Br J Obstet Gynecol* 1998; **105:** 592–598.
35 Sivin I, El-Mahgoub S, McCarthy T, et al. Long-term contraception with the levonorgestrel 20 mcg/day (LNg 20) and the Copper TCu380Ag intrauterine devices; a five year-randomised study. *Contraception* 1990; **42:** 361–376.
36 Andersson K, Mattsson L-O, Rybo G, et al. Intrauterine release of levonorgestrel – a new way of adding progestogen in hormone replacement therapy. *Obstet Gynecol* 1992; **79:** 963–967.
37 Suhonen S, Allonen H, Lahteenmaki P. Sustained-release oestradiol implants and a levonorgestrel-releasing intrauterine device in hormone replacement therapy. *Am J Obstet Gynecol* 1995; **172:** 562–567.
38 Suhonen S, Holmstrom T, Lahteenmaki P. Three-year follow-up of the use of a levonorgestrel-releasing intrauterine system in hormone replacement therapy. *Acta Obstet Gynecol Scand* 1997; **76:** 145–150.
39 French RS, Cowan FM, Mansour D, et al. Levonorgestrel-releasing (20 mcg/day) intrauterine systems (Mirena) compared with other methods of reversible contraceptives. *Br J Obstet Gynaecol* 2000; **107:** 1218–1225.
40 Backman T, Huhtala S, Blom T, et al. Length of use and symptoms associated with premature removal of the levonorgestrel intrauterine system: nation-wide study of 17,360 users. *Br J Obstet Gynaecol* 2000; **107:** 335–339.
41 Farley T, Rosenberg M, Rowe P, et al. Intrauterine devices and pelvic inflammatory disease: an international perspective. *Lancet* 1992; **339:** 785–788.
42 Grimes D. Intrauterine device and upper-genital-tract infection. *Lancet* 2000; **356:** 1013–1019.
43 Doll H, Vessey M, Painter R. Return of fertility in nulliparous women after discontinuation of the intrauterine device: comparison with women discontinuing other methods of contraception. *Br J Obstet Gynaecol* 2001; **108:** 304–314.
44 Grimes D. Intrauterine devices and infertility: sifting through the evidence. *Lancet* 2001; **358:** 6–7.
45 Sivin I. Dose and age-dependent ectopic pregnancy risks with intrauterine contraception. *Obstet Gynecol* 1991; **78:** 291–298.
46 Smith PR. Copper IUDs in nulliparous women. In: *Medicated intrauterine devices*, Hafez ESE, Van Os WAA (eds). Martinus Nijhoff, 1980; 119–126.
47 Petersen KR, Brooks L, Jacobsen B, et al. Intrauterine devices in nulliparous women. *Adv Contracept* 1991; **7:** 333–338.
48 Lete I, Morales P, de Pablo J. Use of intrauterine contraceptive devices in nulliparous women: personal experience over a 12-year period. *Eur J Contracept Reprod Health Care* 1998; **3:** 190–193.
49 Duenas J, Albert A, Carrasco F. Intrauterine contraception in nulligravid vs. parous women. *Contraception* 1996; **53:** 23–24.
50 Trussell J, Ellerton C. Efficacy of emergency contraception. *Fertil Control Rev* 1995; **4:** 8–11.

Discussion points

1. What evidence is there that increasing the amount of copper increases the efficacy of the IUD?
2. Which device has the lowest expulsion rate?
3. Which device should be chosen for a nulliparous woman requesting emergency contraception?
4. Can intrauterine contraception be used for a woman with a history of ectopic pregnancy? Which device should be chosen?
5. How can PID be avoided in IUD users?

F A C T **Faculty Aid to CPD Topics**

A **CPD** Self-Assessment Test

QUESTION SHEET

Review No. 2002/02

To be reviewed not later than 30th June 2007

IUDs: Which device?

Indicate your answer by ticking the appropriate box for each question

	True	***False***
1. The T380A has been shown to be significantly more effective in preventing pregnancy than most other devices available in the UK.	☐	☐
2. High-dose copper IUDs act mainly by preventing fertilisation.	☐	☐
3. The Multiload devices have lower expulsion rates than other framed devices due to their unique shape.	☐	☐
4. The Nova T380® has been shown in trials to be as effective as the T380A in preventing pregnancy.	☐	☐
5. The GyneFix® has been shown to cause fewer bleeding problems than framed IUDs in nulliparous women.	☐	☐
6. Low-dose copper IUDs should be avoided due to their lower contraceptive efficacy compared to high-dose devices.	☐	☐
7. Nulliparity is an independent risk factor for developing PID leading to tubal infertility in IUD users.	☐	☐
8. The LNG IUS has been shown to be superior to the CuT380A in women with a history of ectopic pregnancy.	☐	☐
9. The LNG IUS is suitable treatment for idiopathic menorrhagia.	☐	☐
10. The LNG IUS may be offered to women with heavy periods who request emergency contraception.	☐	☐

Turn to page 000 for answers