Intracervical local anaesthesia for IUD fitting

I am grateful for the endorsement in respect of intracervical local anaesthesia (LA) for intrauterine device (IUD) fitting that has been offered by both medical and nursing colleagues. Intracervical LA is easy to do, easy to teach and can make a very significant difference to both the procedure and the patient experience. While it may not be necessary for all, my contention is that it is a technique that should be both available and offered to all women contemplating an IUD fitting. I would agree with Ann Eady that this can be available to nurse fitters just as to doctors.

I remain uncomfortable with the ethics of not being prepared or able to offer an option that will reduce pain if this can
be anticipated. I propose that LA should become an integral element to the practical aspect of training. I do however feel that the e-SRH module 18 pertaining to this needs some modification and would ask that this be considered.

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Competing interests None

REFERENCES