



Is an IUD right for me?

Determining if an intrauterine device meets your contraceptive needs



Intrauterine Devices (IUDs)

IUDs are a **safe and effective form of birth control**. Both IUDs with and without hormones are **99.2 – 99.9% effective at preventing pregnancy** and may also help with menstrual management. A single IUD can last anywhere from **3 – 12 years**, depending on the type prescribed. IUDs are available at **no cost** to all active duty members and their dependents. Most locations **do not require a specialist referral** for IUD placement, and many MTFs can complete the procedure **same-day**. For more information, please **contact your primary care provider**.

Busting IUD Myths

MYTH: *I have to have surgery to get an IUD placed.*

FACT: IUD placement is done during an office visit and does not involve surgery. Many women find the procedure similar to that of getting a routine pap smear. You can also return to full duty the same day and do not need to be on light duty.

MYTH: *IUDs are all pain and no gain.*

FACT: Discomfort during placement varies. Some have little to no discomfort, while others may have what feels like severe menstrual cramps. Your provider can work with you to make your IUD placement as comfortable as possible. Ibuprofen is commonly recommended, and discomfort following placement usually subsides after 1–2 days. If you are having side effects from your IUD, speak with your provider. While side effects usually improve over time, your provider can offer solutions to manage them.

MYTH: *IUDs can cause an abortion.*

FACT: This is not true. IUDs work by preventing the sperm from fertilizing the egg. Additionally, the copper-T IUD can be used as emergency contraception up to 5 days after unprotected intercourse and is nearly 100% effective at preventing unintended pregnancy. It can be kept in for 12 years after insertion.

MYTH: *IUDs have to be kept for years.*

FACT: You can have your IUD removed at any time. IUDs stop being effective immediately after removal, meaning you can get pregnant immediately, based on your cycle and fertility.

MYTH: *I need a pap smear prior to getting an IUD.*

FACT: This is not true. But if you are due for your routine cervical cancer screening, the day of your IUD placement is a great time to get it done.

MYTH: *IUDs can cause infection and infertility.*

FACT: This has been disproven by studies in thousands of women. If you have an active infection upon exam, an IUD cannot be inserted that day. However, IUDs do *not* protect against sexually transmitted infections (STIs), some of which can lead to infertility if left untreated. A provider can remove your IUD at any point if you wish to change methods or become pregnant. The IUD has no impairment on fertility after it has been removed.

MYTH: *I can only get an IUD after I've had a baby.*

FACT: IUDs can be used by women who have and have not had children.

MYTH: *IUDs may stop your period, which is unsafe.*

FACT: Depending on the type of IUD, women using IUDs may or may not experience a regular period. There are no safety concerns with not experiencing a regular period if you are using a hormonal IUD. In fact, not having a regular period may be beneficial while deployed.

MYTH: *IUDs are dangerous; they move and fall out.*

FACT: IUDs are a safe form of birth control. The chance of an IUD moving or migrating is less than 1%. If you ever can't feel your IUD strings or have increased pelvic pain, follow up with your provider. IUDs have a 5 - 8% chance of being expelled; this risk is higher when you are newly postpartum, but the risk is still very low.