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IUD Insertion after Uterine Aspiration

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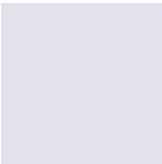
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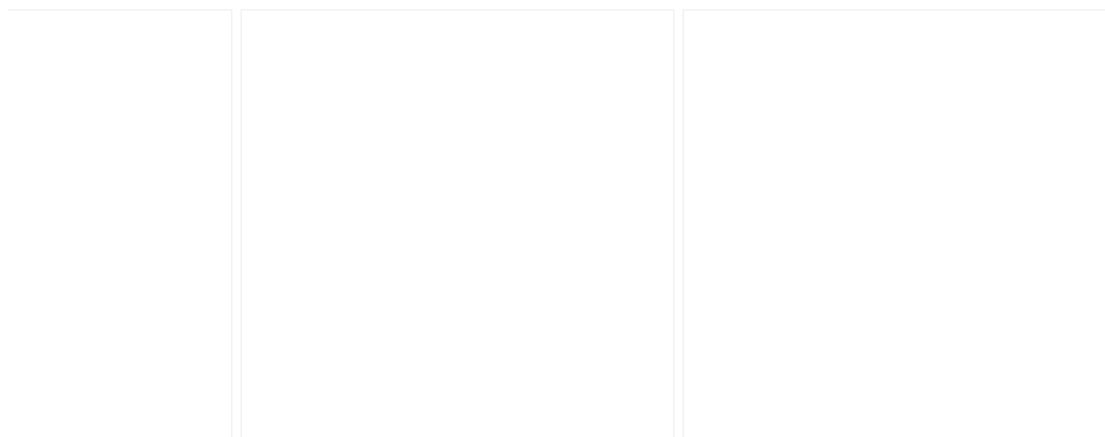
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ine devices (IUDs) provide highly effective, reversible, long-term contraception that is appropriate for many women
rine aspiration. However, the effects of immediate versus delayed IUD insertion after uterine aspiration on rates of
D use are uncertain. Methods: We performed a randomized noninferiority trial involving women undergoing uterine
or spontaneous abortion at 5 to 12 weeks of gestation who desired an IUD. Subjects were randomly assigned (in
ertion immediately after the procedure or 2 to 6 weeks afterward (delayed insertion). The primary outcome was the
6 months after IUD insertion; an expulsion rate 8 percentage points higher in the immediate-insertion group was
sults: Among 575 women who underwent randomization, an IUD was inserted in 100% (258 of 258) of the women
rtion group and in 71.3% (226 of 317) of those in the delayed-insertion group (difference, 28.7 percentage points;
rel [CI], 23.7 to 33.7). The 6-month expulsion risk was 5.0% (13 of 258 women) after immediate insertion and 2.7%
d insertion (difference, 2.3 percentage points; 95% CI, -1.0 to 5.8), which was consistent with the predefined
rity. Six-month rates of IUD use were higher in the immediate-insertion group (92.3%, vs. 76.6% after delayed
dverse events were rare and did not differ significantly between groups. No pregnancies occurred in the
roup; five occurred in the delayed-insertion group (P=0.07), all in women who never received an IUD.
onth rate of expulsion of an IUD after immediate insertion was higher than but not inferior to that after delayed
nsertion resulted in higher rates of IUD use at 6 months, without an increased risk of complications. (Funded by
Buffett Foundation; ClinicalTrials.gov number, NCT00562276.).

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. Outcomes of Immediate versus Delayed IUD Insertion after Uterine Aspiration.*

Kaplan-Meier Analysis of Time to IUD Expulsion. Tick marks in the inset indicat...

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The NEW ENGLAND JOURNAL *of* MEDICINE

ORIGINAL ARTICLE

Immediate versus Delayed IUD Insertion after Uterine Aspiration

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Matthew F. Reeves, M.D., M.P.H., Carrie Cwiak, M.D., M.P.H.,
Eve Espey, M.D., M.P.H., and Jeffrey T. Jensen, M.D., M.P.H.,
for the Post-Aspiration IUD Randomization (PAIR) Study Trial Group

ABSTRACT

BACKGROUND

Intrauterine devices (IUDs) provide highly effective, reversible, long-term contraception that is appropriate for many women after first-trimester uterine aspiration. However, the effects of immediate versus delayed IUD insertion after uterine aspiration on rates of complications and IUD use are uncertain.

METHODS

We performed a randomized noninferiority trial involving women undergoing uterine aspiration for induced or spontaneous abortion at 5 to 12 weeks of gestation who desired an IUD. Subjects were randomly assigned (in a 5:6 ratio) to IUD insertion

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immediately after the procedure or 2 to 6 weeks afterward (delayed insertion). The primary outcome was the rate of IUD expulsion 6 months after IUD insertion; an expulsion rate 8 percentage points higher in the immediate-insertion group was defined as inferior.

RESULTS

Among 575 women who underwent randomization, an IUD was inserted in 100% (258 of 258) of the women in the immediate-insertion group and in 71.3% (226 of 317) of those in the delayed-insertion group (difference, 28.7 percentage points; 95% confidence interval [CI], 23.7 to 33.7). The 6-month expulsion risk was 5.0% (13 of 258 women) after immediate insertion and 2.7% (6 of 226) after delayed insertion (difference, 2.3 percentage points; 95% CI, -1.0 to 5.8), which was consistent with the predefined criterion for noninferiority. Six-month rates of IUD use were higher in the immediate-insertion group (92.3%, vs. 76.6% after delayed insertion; $P < 0.001$). Adverse events were rare and did not differ significantly between groups. No pregnancies occurred in the immediate-insertion group; five occurred in the delayed-insertion group ($P = 0.07$), all in women who never received an IUD.

CONCLUSIONS

The 6-month rate of expulsion of an IUD after immediate insertion was higher than but not inferior to that after delayed insertion. Immediate insertion resulted in higher rates of IUD use at 6 months, without an increased risk of complications. (Funded by the Susan Thompson Buffett Foundation; ClinicalTrials.gov number, NCT00562276.)

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ethods are long-acting contraceptives, including intrauterine devices (IUDs) [7]. The use of IUDs after an abortion rease the number of subsequent unintended pregnancies and the attendant risks of induced abortions [9] [10] [11].

owing evidence that when contraceptives are offered for free, women who have recently had an abortion [9] [10] with a history of an induced abortion, will be more likely to choose IUD placement compared to women without such a established finding that use of effective contraceptives, such as an IUD, have the potential to prevent unintended s suggest that providing free contraceptives to women with low incomes, such as the unemployed, is an effective tended pregnancies. ...

ologist interaction may be particularly important in how a contraceptive method is chosen [9], but discussing the of women requesting contraceptive counseling appears to be challenging [8]. Third, the cross-sectional nature of not allow conclusions to be made regarding decreases in unintended pregnancies and a reduced number of previous studies [10, 11]. Fourth, ...

use of free-of-charge intrauterine devices and a history of induced abortion: a retrospective study

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gelika Beyer · Ulrich John

who have an abortion will not start or will discontinue short-acting methods, such as oral contraceptives, within the their procedure [59]. The risk of subsequent unintended pregnancy with immediate postabortion initiation of IUDs than with interval initiation (GRADE 1A) [60] [61][62][63] or with postabortion initiation of less-effective methods 6]. In a large retrospective cohort study, 673 women who received an IUD immediately after surgical abortion were ite-matched controls who also had a surgical abortion but initiated another form of contraception (not including the subsequent abortion over a 3-year follow-up period was more than twice as high in the control group as in the study pb.001) [64]. ...

after postabortion placement is not common, the overall rate may be higher than that after interval insertion omized controlled trial by Bednarek and colleagues [60], 575 women seeking first-trimester aspiration for ige were randomized to immediate or delayed (2-6 weeks postprocedure) insertion of the IUD of their choice: LNG-months, the expulsion rate was 5.0% in the immediate group and 2.7% in the delayed group (p=. ...

expulsion after first-trimester surgical abortion remains low. From a public health standpoint, regardless of the xement at time of surgical abortion ultimately results in a significantly higher rate of IUD initiation for those who a significantly lower risk of subsequent unintended pregnancy [60] [61][62][63]. ...

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red outcome. [18] Variables predicting PD in male and female groups separately were also identified using the Cary, NC, USA). ...

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Albert C. Yang · Cheng-Che Shen

variate model included control variables such as age; sex; common comorbidities, including hypertension, diabetes xoronary artery disease, congestive heart failure, hyperthyroidism, hypothyroidism, and cerebrovascular disease; hly income. Factors that demonstrated a moderately significant statistical relationship in the univariate analysis ($P <$ ward selection in a multivariate Cox proportional-hazards regression model (32). ...

ders Following Myasthenia Gravis: A Nationwide Population-Based Retrospective Cohort Study

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devices causes atrophy of the uterine lining, impairs the motility of the cilia in the fallopian tubes, and make the neable for the sperms. These effects may be primary or secondary however the modern devices act through l effects live inhibiting ovulation or by reducing the chance of the sperm to fertilize the ovum [1] [2] [3]. ...

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Ayad Ahmad Mohammed

abortion emergency care are particularly in need of contraceptive services: These clients are sexually active and at gnancy, not currently pregnant, and often highly desirous of avoiding childbearing. They are in contact with the n disinclined to return to the facility for a follow-up visit [5] [6] [7], and, according to global recommendations, are sequent pregnancy for at least six months, for optimal health of the woman and her future newborn [8,9]. ...

omen use after experiencing complications from abortion? an analysis of cohort records of 18,688 in Tanzania

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ately after an abortion lower the rate of repeat abortions from 34.6 per 1000 woman-years to 91.3 per 1000 woman- nmediate postabortal IUDs are safe and efective, although they have a slightly higher expulsion, ranging from 3 to n abortion compared with 0-2.7% in interval groups [48] . However, at 6 months postabortion, IUD use is higher ertion compared to delayed insertion [49]. ...

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ie Device Insertion Versus Delayed Intrauterine Device Insertion: An Observational Study

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Insertion of copper-7-IUDs in connection with induced abortions during the first trimester

August 1975 · Contraception

Bertil Larsson · Lars Hamberger

A copper-7-IUD (GravigardR) was inserted at the end of the operation in 43 cases of Karman catheter abortions without cervical dilatation up to the 8th week after the last menstrual period (LMP) and in 551 women with vacuumcurettage with cervical dilatation up to the end of the 12th week after LMP. In comparison to corresponding control groups, no increase in complications were observed and the ... [\[Show full abstract\]](#)

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Barriers associated with the failure to return for intrauterine device insertion following first-tri...

April 2009 · Contraception

Ann M Stanek ·  Paula H Bednarek · Mark D Nichols · [...] ·  Alison Edelman

The aim of the study was to identify barriers associated with the failure to return for delayed intrauterine device (IUD) insertion postabortion. This study had two components: (a) a retrospective cohort study of women who chose an IUD as their postabortion contraceptive method to compare characteristics of those who did and did not receive a device within 6 months of the procedure and (b) a ... [\[Show full abstract\]](#)

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Intrauterine contraceptive insertion postabortion: A systematic review

November 2011 · Contraception

 Nathalie Kapp ·  Maria W Steenland · Naomi K. Tepper · Kathryn M Curtis

This review was conducted to evaluate the evidence regarding the safety and effectiveness of intrauterine device (IUD) insertion immediately following spontaneous or induced abortion. We searched MEDLINE databases for all articles (in all languages) published in peer-reviewed journals from January 1966 through March 2010 for evidence comparing immediate postabortion IUD insertion with either no ... [\[Show full abstract\]](#)

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Intrauterine device insertion after medical abortion

June 2011 · Contraception

Sarah J Betstadt · David K. Turok ·  Nathalie Kapp · [...] ·  Lynn Borgatta

Studies comparing immediate intrauterine device (IUD) insertion after first-trimester surgical abortion with interval insertion show similar efficacy and expulsion rates. However, women randomized to interval insertion of an IUD are less likely to return for device placement. An ideal time to insert intrauterine contraception may be the day a woman presents for verification of a completed medical ... [\[Show full abstract\]](#)

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Immediate placement of intrauterine devices after first and second trimester pregnancy termination

January 2011 · Contraception

 M. Fox · Julia Oat-Judge · Kathryn Severson · [...] · Anne E Burke

We reviewed our experience with intrauterine device (IUD) placement after surgical abortion up to 20 weeks' gestation. Women presenting for elective abortion between January 2004 and March 2009 who requested an IUD were included in this retrospective review. Of 308 women requesting postabortion IUD placement, 221 (72%) planned insertion at the time of abortion (immediate group) and 87 (28%) ... [\[Show full abstract\]](#)

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