

## Gynaecological Conditions Patient information Leaflet

### Alternatives To Female Sterilisation

#### Summary

- Why is sterilisation not offered straight away?
- What are the alternatives to female sterilisation?
- What is the hormone containing coil (or intrauterine system, IUS) and what are the advantages and disadvantages of using it?
- When and how can the hormone containing coil (or intrauterine system, IUS) be fitted?
- How is vasectomy performed and what are its advantages and disadvantages?
- What long-term contraceptive implants and injections are available, and what are the advantages and disadvantages of using them?

#### Q: Why is sterilisation not offered straight away?

Standard methods of female sterilisation involve an operation which can be avoided by using the alternatives listed below. Sterilisation is a permanent step and couples may regret their decision later on. Factors which may increase sadness and regret include: Changed circumstances e.g. divorce, 2nd marriage or career change, Sterilisation at a young age, Sterilisation too soon after having a baby or an abortion, The unexpected death of a child.

Sterilisation fails in 1 in 200 cases for a variety of reasons, and in addition the operation itself carries additional risks, which although rare can be serious. Sterilisation can be difficult to reverse and this reversal is not available through the NHS. Also a proportion of women who undergo sterilisation may need further help with their periods. A number of the alternatives to sterilisation can help with periods as well as providing contraception that is as reliable and sometimes more reliable than sterilisation.

#### Q: What are the alternatives to female sterilisation?

Many couples who have completed their family will think about changing the contraception they use and perhaps consider being sterilised. But there are alternatives to having surgery. In addition to the standard contraceptive options, there are some alternatives that can provide excellent long term contraception whilst avoiding surgery. These are:

- a hormone containing coil
- a vasectomy for your partner
- long-term hormone implants or injection

**Q: What is the hormone containing coil (or intrauterine system, IUS, Mirena®) and what are the advantages and disadvantages of using it?**

The intrauterine system (Mirena®) is a small T-shaped plastic device which is inserted into the womb. It contains a hormone sleeve which gradually releases a very low level of the hormone progestogen (one of the hormones contained in 'the Pill') into the womb. The hormone prevents pregnancy in several ways including: Keeping the womb lining thin, thickening mucus in the neck of the womb so the sperm can't fertilise the egg, and in some women preventing ovulation (the release of eggs). It is important to note that the IUS is not the same as the 'coil' or IUD (intrauterine device) which contains copper, and does not contain a hormone.

**The advantages of the IUS are:**

*Highly effective contraception.* The IUS can be used as an alternative to sterilisation and can be kept in place for up to 5 years, when it may be replaced by a new IUS. If 1000 women used the IUS for one year, no more than 2 would become pregnant, compared to 5 undergoing sterilisation.

*Reversible.* The IUS can be easily removed at any time by your doctor or nurse. If you do decide

to have another child, fertility is restored almost immediately on removal.

*Doesn't interfere with sex*

*Effect on periods.* After using the IUS for about 3 months or so, your periods will normally get much lighter and shorter. Some women find that their periods stop altogether. This decrease

in the heaviness of periods is due to the effect of the IUS on the womb lining and does not mean that there is any change in the way that your body is functioning.

**Disadvantages of the IUS:**

*Irregular bleeding.* Some women initially experience more spotting (a small amount of blood loss) and longer or heavier periods than normal during the first few months of using an IUS. However, by the end of the third month most women will have shorter and lighter periods.

*Temporary side effects.* As the body gets used to the IUS, side effects such as tender breasts, headaches or acne might occur. These are unusual and normally disappear after the first few months of use.

**Q: When and how can the hormone containing coil (or intrauterine system, IUS) be fitted?**

Preparation for fitting takes about 5 minutes but actual fitting of the system only takes a few seconds. The IUS is fitted into the womb through the neck of the womb (cervix), using a specially designed inserter, by a trained doctor or nurse. Most women find that fitting causes only a little discomfort. can be used if you are breastfeeding.

The IUS is usually fitted either during your period or within 7 days of the beginning of your period. After having a baby the IUS can be fitted from 6 weeks after delivery and can be used if you are breastfeeding. The IUS is usually checked 6 weeks after it is fitted and again at 12 months. It then needs to be checked once a year until it is removed. It can stay in place for 5 years.

**Q: How is vasectomy performed and what are its advantages and disadvantages?**

Vasectomy is normally performed under local anaesthetic, hence avoiding a general anaesthetic. It has very few complications and has a low failure rate (1 in 2000 cases). More detailed information is available from the leaflet 'about vasectomy'.

**Q: What long-term contraceptive implants and injections are available, and what are the advantages and disadvantages of using them?**

A contraceptive implant (e.g. Implanon®) is a small flexible tube which is inserted, using a local anaesthetic, just under the skin of the inner upper arm. The implant gradually releases a progestogen hormone into the bloodstream and is effective for 3 years. A contraceptive injection (e.g. Depo-provera®) releases a progestogen hormone very slowly into the body over 2 or 3 months, depending on which type is given.

**The advantages of injections or implants are:**

reliable form of contraception. With an implant you don't have to think about contraception and it does not interfere with sex. Fertility is restored on removal.

**The disadvantages of injections or implants are:**

Irregular bleeding can be a problem and this can persist for upto the first year with the implants, however periods normally stop altogether; other side effects include headaches, acne, putting on weight, tender breasts and bloating. Removal of the implant is sometimes difficult and injections are not easily reversed, regular periods and fertility may take up to a year to return after stopping the injections. With the injection you will need to visit your health centre or family planning clinic 4 or 6 times a year to be injected.