Menopause & PMS

This leaflet has been written by staff working in the Menopause & PMS service at Chelsea and Westminster Hospital for clinics at Chelsea and Westminster Hospital and West Middlesex Hospital.

Take home messages
• Mirena is licenced for hormone replacement, heavy menstrual bleeding and contraception
• Jaydess may only be used off-label with hormone replacement when recommended from a specialist clinic
• Side effects are common after insertion but subside after a few or months
• Any nuisance bleeding or PMS type symptoms usually subside within a few months
• An alternative progestogen must be prescribed with hormone replacement if the IUS is removed
• In women with estrogen implants, the IUS should not be removed until a post menopause serum estradiol is obtained

I have read and understand the verbal and written information given to me. I consent to have a Levonorgestrel IUS

PID:
Name:
Signature:
Date:
Clinician
Name:
Signature:
Date:

Further advice and support
www.the-bms.org (British Menopause Society)
www.fpa.org.uk (Family planning association)
www.fsrh.org (Faculty of Sexual and Reproductive Health)

Patient Advice & Liaison Service (PALS)
If you require information, support or advice about our services, you can contact the PALS office on the Ground Floor of the hospital just behind the main reception. Alternatively, you can feedback your comments or suggestions on one of our comment cards, available at the PALS office, or on a feedback form on our website www.chelwest.nhs.uk/pals. We value your opinion and invite you to provide us with feedback.

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Speak to your clinician

Levonorgestrel intrauterine system (IUS) with estrogen hormone replacement
What is the licensed use of the Levonorgestrel intrauterine system (IUS)?
The Mirena IUS is licenced for contraception, menorrhagia (heavy periods) and as part of hormone replacement therapy (HRT). It protects against endometrial cancer when combined with HRT. It may be used for 4-5 years.

The Jaydess IUS is licensed only for contraception. It is physically smaller than Mirena with a lower dose of the dose. It may be used for up to 3 years.

I still have periods, will my periods stop?
The Mirena is the only recognised IUS likely to stop bleeding (amenorrhoea). This may take up to six months and a small number of women continue bleeding beyond this.

Women frequently experience regular bleeding with the Jaydess, but this may be lighter than before.

Is Jaydess licenced for use in hormone replacement?
No. However, in cases of severe progesterone intolerance, the specialist in the menopause and PMS clinic may recommend off-label use. One to two yearly vaginal ultrasound scans are performed to assess the endometrium thickness.

If you experience irregular or unexpected bleeding, contact your GP or the menopause clinic.

Why is a hormone IUS recommended for progesterone intolerance?
Both systems deliver the lowest systemic dose of progesterone compared to any other product. Many women experience few or no side effects.

What side effects may be experienced?
With a new IUS progestogen side-effects may occur: bloating, fluid retention and PMS-type symptoms. These symptoms generally settle within the first few months. In severe progesterone intolerance, if the PMS-type symptoms do not settle the IUS may need to be removed.

I am on hormone replacement. Who can change my IUS?
If you only require contraception, your GP or local family planning clinic can change the IUS.

If you have the Mirena as part of your HRT, you may need to have the IUS replaced at Chelsea and Westminster hospital.

If you have the Jaydess as part of your HRT, you will have it replaced at Chelsea and Westminster hospital.

What should I know about the procedure?
It is not safe to insert an IUD/IUS if there is a risk of pregnancy. Ensure you have:
- Used an alternative method of contraception reliably since your last period
- Not had vaginal sex since the beginning of your last period
- Not had vaginal sex for at least 3 weeks

Take simple pain killers one hour before the procedure. A local anaesthetic gel or cervical block may be used during the procedure. It is recommended not to go straight back to work.

What are the risk of the procedure?
Abdominal pain like a period is commonly experienced with insertion of an IUS. Continue simple pain killers for at least 24-48 hours.

Bleeding is commonly experienced after insertion. This may stop immediately or persist as spotting or irregular bleeding up to 6 months.

A 1 in a 1000 risk of perforation of the womb at the time of insertion. If you experience ongoing abdominal pain, a scan will be requested and the IUS may need to be removed. Rarely this requires a general anaesthetic.

A less than 1 in 100 chance of infection after the procedure. If you develop a temperature, abdominal pain or offensive discharge, your GP can treat this with antibiotics.

A 1 in 20 chances of the IUS being expelled. A six-week thread check is recommended. If the threads cannot be felt or seen a scan can verify if the coil is in place.

I am on HRT but want the IUS removed
Discuss your options with your GP or specialist, including contraceptive needs.

If you continue with estrogen replacement, a suitable alternative progestogen or progesterone must be prescribed immediately.

If you have estrogen implants you must have a progestogen or progesterone for at least 2 years or until a postmenopausal serum estradiol result is obtained.