
MIRENA INFORMATION LEAFLET

What Is Mirena?

This small intrauterine system (IUS) sits in your womb and may have been prescribed to you for the following conditions:

- For a period of up to eight years to prevent pregnancy.
- Treatment of heavy menstrual bleeding for up to five years.
- For use up to 4 years as part of hormone replacement therapy (HRT).

As long as symptoms do not return after 5 years of use, Mirena may be considered for continued use for up to 8 years for HMB.

Mirena is an intrauterine system (IUS), a small plastic t-shaped device that is placed in your uterus (womb). It may have been prescribed to you for one or more of the following;

Hormone Replacement therapy

In conjunction with an oestrogen, Mirena can protect your womb's lining for up to four years during hormone replacement therapy (HRT).

Contraception

It is a long-term and reversible method of contraception often referred to as LARC (long-acting reversible contraception) that works for up to eight years.

HMB (Heavy Menstrual Bleeding)

Treatment for up to five years

Mirena can be continued for up to 8 years if symptoms do not return after 5 years.

Facts about Mirena

- Mirena is a small, flexible, plastic T-shape with a small amount of hormone.
- Mirena is placed in the uterus by a healthcare professional, once fitted you shouldn't even know it's there.
- Mirena contains 52mg of a single hormone called levonorgestrel, a type of progestin, that is often used in birth control pills. The Mirena slowly releases low doses of

levonorgestrel into your uterus, so only small amounts of hormone enter your bloodstream.

Oestrogen is not present in Mirena, so it does not interfere with the normal function of your ovaries.

You can remove it at any time if you change your mind.

Levonorgestrel is a type of progesterone that is slowly released into your uterus by Mirena. Mirena works right where it is needed, and only small amounts of hormones enter your bloodstream. When Mirena is used, ovulation (the release of an egg from the ovaries) usually continues.

How Does Mirena Prevent Pregnancy?

The hormone released into your uterus by Mirena prevents pregnancy by:

- Thickening cervical mucus, preventing sperm from entering the uterus.
- Inhibiting sperm movement so it's more difficult to reach and fertilize an egg.
- Thinning the lining of your uterus, making it less likely for an egg to attach to the uterus.

How Effective Is Mirena As A Contraceptive?

Mirena is over 99% effective, the possibility of becoming pregnant is approximately 2 in 1,000 in the first year. The failure rate may increase in case of Mirena coming out by itself.

Mirena provides effective, reversible contraception for 8 years, but you can have it removed sooner if you wish.

Will I Be Protected Immediately?

If Mirena is fitted within 7 days from the start of your period, you will be protected straight away.

- If you cannot have Mirena inserted 7 days from the start of your period or if your period comes at unpredictable times, then Mirena can be inserted on any other day. In this case, you must not have had sexual intercourse without contraception since your last period, and you should have a negative pregnancy test. Also, Mirena may not work right away. If you have sexual intercourse during the first 7 days after Mirena is inserted, use a barrier contraceptive (such as condoms).



- Mirena is not suitable for use as an emergency contraceptive (postcoital contraceptive).
- Mirena can be fitted immediately after an abortion if the pregnancy was less than 3 months along, provided that you have no genital infections. Mirena will then work right away.

How Does Mirena Treat HMB?

The hormone released into your uterus by Mirena makes the lining of the womb thin, which reduces blood loss during menstruation when the womb lining sheds.

After six menstrual cycles, Mirena reduces blood loss by 96%.

Heavy Menstrual Bleeding (HMB) - What Is It?

Heavy bleeding refers to periods that interfere with your physical, social, and/or emotional well-being. It is also a sign of HMB to change sanitary wear more than once every two hours, or to use double protection.

Mirena For HMB

By preventing thickening of the womb lining, Mirena reduces blood loss during menstruation when the lining is shed. In general, Mirena is an effective treatment for HMB and should result in lighter bleeding after 3-6 months. It is possible to continue using Mirena for up to 8 years if symptoms do not return after 5 years of use. If you wish, you can also have it removed sooner.

What Does Mirena Do In HRT?

Mirena can be used in conjunction with oestrogen as part of a hormone replacement therapy (HRT) regimen.

Mirena provides protection to the lining of your womb (endometrium) during HRT. You may hear your healthcare professional refer to this as endometrial protection.

The hormone released into your uterus by Mirena provides endometrial protection by: Thinning the lining of your womb, also known as the endometrium.

Mirena as part of Hormone replacement therapy (HRT).

Menopause often causes distressing symptoms, due to the gradual loss of the female sex hormones - oestrogen and progesterone - produced by the ovaries. HRT is designed to reduce those symptoms by raising levels of these hormones.

Oestrogen can be used to relieve menopausal symptoms, however, taking oestrogens alone increase the risk of abnormal growth or cancer of the lining of the womb. Therefore, most women who still have a uterus will need to take a progestogen along with oestrogen to reduce the risk of cancer of the womb.

Mirena For Endometrial Protection

Taking progestogen, such as the hormone in Mirena, as part of a HRT regimen lowers the risk of abnormal growth by protecting the lining of the womb. It does this by thinning the lining of your womb. Mirena can be used for 4 years when used for HRT but you can have it removed sooner if you wish.

Is Mirena Suitable For Me?

Women of all reproductive ages, including women going through menopause, may benefit from Mirena, regardless of whether or not they have had children.

IMPORTANT SAFETY INFORMATION

- If you have a pelvic or genital infection, get infections easily, or have certain cancers, don't use Mirena. Less than 1% of users get a serious pelvic infection called pelvic inflammatory disease (PID).
- If you have persistent pelvic or stomach pain, or excessive bleeding after placement, let us know. If Mirena comes out, call us and avoid intercourse or use non-hormonal back-up birth control (such as condoms or spermicide). Mirena may go into or through the wall of the uterus and cause other problems.
- Pregnancy while using Mirena is uncommon but can be life threatening and may result in loss of pregnancy or fertility.
- Ovarian cysts may occur but usually disappear.
- Bleeding and spotting may increase in the first 3 to 6 months and remain irregular. Periods over time usually become shorter, lighter, or may stop.

Mirena does not protect against HIV or STIs.

Only you and your health care providers can decide if Mirena is right for you. Mirena is available by prescription only.



Mr. Farshad Tahmasebi

Consultant Obstetrician & Gynaecologist

Women's Health Centre
One-Stop Gynaecology Clinic
London W1G 9QP
(020) 3368 8379