IUD after medical abortion: should it remain underused?

Pascale Roblin, MD
Marseille France
N = 300

IUD = 104 (34.6%)
• Mean age: 31

• 27 patients (26%) were nulliparous

• 38 patients (37%) had repeat abortions
• None of the patients had LARC

• 5 (1.6%) had used emergency contraception
<table>
<thead>
<tr>
<th>Pain</th>
<th>2/10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean duration bleeding</td>
<td>6.5 days</td>
</tr>
</tbody>
</table>
• No expulsions

• No perforations

• No infectious complications
<table>
<thead>
<tr>
<th>Reason</th>
<th>N</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>IUD removal</td>
<td>9</td>
<td>8.7%</td>
</tr>
<tr>
<td>Pelvic pain</td>
<td>3</td>
<td>2.9%</td>
</tr>
<tr>
<td>Excessive bleeding</td>
<td>3</td>
<td>2.9%</td>
</tr>
<tr>
<td>Desire of pregnancy</td>
<td>3</td>
<td>2.9%</td>
</tr>
</tbody>
</table>
Safety and acceptability of post abortal IUD
El-Tagy Contraception 2003

• 183 immediate vs 117 delayed IUD

• Bleeding, expulsion, pain (NS)

• No perforations

• No PID
Impact of immediate postabortal IUD on repeat abortion

Goodman Contraception 2008

- 673 IUD vs 1346 controls

- Repeat abortions HR: 0.38 (0.27-0.53)
• IUD after medical abortion: a safe option

• May help reduce repeat abortions