

IUD In First-Trimester Abortion: A Short Review Focusing on Immediate Insertion of IUD *Versus* Delayed Insertion of IUD After the Next Menstruation

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Introduction

After an induced abortion woman's motivation for contraception is usually high. Although there are a wide variety of contraceptive methods, the number of unwanted pregnancies is still high [1]. It is of great importance to use suitable contraceptive methods for fertility regulation to avoid unintended pregnancies and their threatened consequences. Intrauterine devices are widely used as a contraceptive method. The IUD (intrauterine device) insertion either immediately or delayed in post-abortion period is an important contraception possibility. IUD is a reliable, safe choice of contraception and can be initiated immediately post-abortion or inserted after the next menstrual cycle [2]. This study took place on Democritus University of Thrace where 142 women were studied that aged 19-44 and underwent uterine aspiration for induced or spontaneous abortion at 6-12 weeks of gestation. They were randomized into two groups. Group A was including 73 women that assigned for immediate post-abortion insertion of IUD and group B with 69 participants that delayed the insertion of IUD for their next menstrual cycle. All women of this study used copper IUD. No significant differences noticed between the group A compared to the late insertion of IUD group B, complications and serious adverse reactions were infrequent and extremely rare in both groups [2]. The results of the above mentioned study are in consistence to current literature, which confirm same expulsion, complication and continuation rate compared the immediate post-abortion insertion of IUD. As far as concern the post-abortion period, the IUD insertion is practical cost-effective, making it the most common method of reversible contraception used worldwide after spontaneous and induced abortion in first trimester regardless the time of insertion immediately after the abortion or delayed during the next menstrual cycle. Based on no referred differences between the time of the insertion (post-abortion or delayed following the next period) either with respect to the security of the supplied contraceptive methods or to the development of side effects, could be useful in countries where hormonal contraception is not wide available due to ethical, cultural or other reasons and other contraception methods are needed [1,2]. The above mentioned contraception method is reliable, by both surgical method or medical abortion and could be recommended also in cases with emergency contraception associated with pearl-index less than 1% and pregnancy rate by 0% (95% CI 0.0-0.15%) [3,4]. Although an insertion of IUD is offered from the family planning centers and the clinical experiences from the early IUD insertion are favorable, the post-abortion insertion is not widely accepted. The majority of the women especially adolescents leave the gynecology department without patience to receive accurate contraceptive information [5,6]. Modifications of IUD size and shapes

like frameless IUDs, smaller devices appropriate for nulliparous or atrophic uterus medicated with cooper, silver, metal combinations, levonogestrel, steroid receptor modulator have reliable effects on the endometrium and offer a high promise for contraception in the future [7-10].

Conclusion

The expanded use of IUD either post-abortion of first trimester immediately or after the subsequent occurrence of the first menstruation bleeding is an important factor to regulate successfully the fertility and to reduce the unintended pregnancy and abortion rate.

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