

Barrier method	2-18%	Straight away	Straight away
COCP*	0.3-9%	² At 6 months	² At 6 weeks
POP*	0.3-9%	Straight away	Straight away
Implant	0.05%	Straight away	Straight away
Sterilisation	0.5%	Straight away	Straight away
LIUS* coil	0.2%	Check at 6 wks	Check at 6 wks
Copper Coil	0.6-0.8%	Check at 6 wks	Check at 6 wks
Failure rate ¹		Breastfeeding	Breastfeeding X

*LIUS coil – progesterone coil, POP – progesterone only pill, COCP- combined oral contraceptive coil.

¹ Failure rate = perfect use-typical use.

² COCP safe to start at 6 months if breastfeeding, 6 weeks if not breastfeeding.

If you are interested in having a contraceptive coil inserted at caesarean section or would like more information, please speak to an Obstetrician in the antenatal clinic.

Patient advice and liaison service (PALS)

If you have a compliment, complaint or concern please contact our PALS team on 020 7288 5551 or whh-tr.whithealthPALS@nhs.net

If you need a large print, audio or translated copy of this leaflet please contact us on 020 7288 3182. We will try our best to meet your needs.

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Contraceptive coil insertion at caesarean section

A patient's guide



Who is this for?

This is for women planning an elective caesarean section at the Whittington Hospital.

We advise all women to avoid falling pregnant for at least one year after a caesarean section. This allows the scar to heal before your next pregnancy. One option is to have a long-acting contraceptive coil inserted during your caesarean section.



How is it done?

The contraceptive coil is inserted into the womb at caesarean section after the placenta is delivered. This takes a few minutes and you will not feel it being inserted.

Options

There are two different options:

- Option 1 – Copper Coil
 - Non-hormonal contraception.
 - Effective for 10 years.
 - May cause heavier periods.
- Option 2 – Progesterone Coil
 - Hormonal contraception.
 - Effective for 5 years.
 - May cause lighter, irregular periods or no periods at all.

Benefits

- Long-acting contraception.
- Quick and easy to put in & remove.
- Fertility returns to normal once removed.
- Does not affect breastfeeding.

Drawbacks

- 5-10% risk of expulsion.
- Barrier contraception should be used for the first 6 weeks after insertion.
- Coil threads need to be checked at 6 weeks.

Follow up

A vaginal examination is required at 6 weeks to check that the coil threads are visible.

This can be performed by your GP or local family planning or sexual health clinic.

If the threads are not visible, you will be referred to have an ultrasound scan to confirm that the coil is still there.

Why will I need follow up?

There is an increased risk of the coil falling out (5-10%) when it has been inserted postpartum. The follow up is to check that your contraception will be effective.

Other options

1. **Progesterone only pill**
Can start day 1 postpartum
2. **Contraceptive Implant**
Inserted anytime postpartum
3. **Combined contraceptive pill**
Can start 6 weeks postpartum

PLEASE ASK YOUR
OBSTETRICIAN FOR MORE
INFORMATION