

INSERTION TECHNIQUE OF THE "ANCORA" IUD'S

Types of IUD's

- **ANCORA DE COBRE 250**
- **ANCORA DE COBRE 250 MINI**
- **ANCORA DE COBRE 375**
- **ANCORA DE PLATA**

General characteristics

The intrauterine device "ANCORA" consists of a polyethylene structure, with a copper or copper and silver wire rolled in its vertical axis. In the inferior end of this axis, there is a polyethylene thread tied to it. The assembly is lodged in an inserting canula on which a movable top slides to display the uterine measure. It is advisable to extract it after three years of its insertion. The sterilization method used is ETO gas.

Indications

- Intrauterine contraception.
- Uterine Sinechya.

Moment of insertion

The IUD can be inserted at any time of the menstrual cycle, but the insertion is preferable during or immediately after the menstruation.

Insertion technique

Before placing the IUD, it is advisable to perform a cytology in order to discard any possible contraindication.

At the moment of the insertion, the following points will be considered:

- 1.- Perform a vaginal tact to evaluate the size and the situation of the uterus.
- 2.- Place a speculum to view the uterine neck.
- 3.- Disinfect the cervix by using of a gauze soaked with some antiseptic solution.
- 4.- Clip the previous lip of the uterine neck with a Pozzi tenaculum forcep or similar in order to hold it.
- 5.- Sound the uterus to evaluate the depth and direction of the cervical canal.

Next steps will be followed

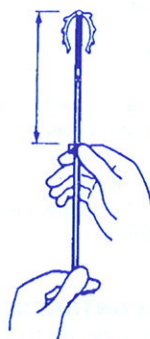


Fig. 1
Adjust the movable top to the measurement indicated when sounding the uterus.

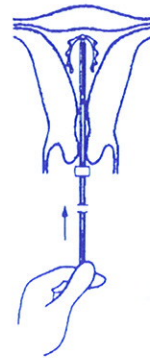


Fig. 2
Introduce the insertion tube through the cervical canal, until the movable top contacts with the portio.

Fig. 3
Withdraw the insertion tube smoothly with a rotatory movement.

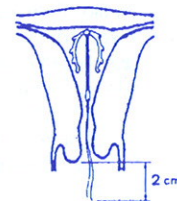
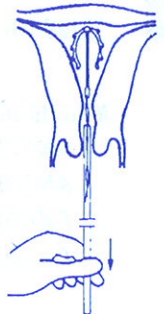


Fig. 4
In order to allow its visibility, as well as its extraction, the threads must be cut two centimetres outside the cervix.

IMPORTANT !

If you suspect that the device is not in the correct position, draw it and insert a new one. Use a new sterile device for the new insertion.

Controls

The doctor will make a first control after the first menstruation after the insertion. Later on, new exams will be performed every six or twelve months.

Extraction

It is more advantageous to do it during the menstrual period, because the cervix is slightly expanded. After placing the speculum to view the uterine neck and by using a clamp, perform a smooth and continued traction of the thread, until the total extraction of the IUD.

CONTRAINDICATIONS

Absolute

- Pregnancy
- Pelvic Inflammatory Disease (PID)
- Acute Cervicitis
- Post partum endometritis or abortion
- Abnormal genital hemorrhage
- Gynecological malignant pathology
- Congenital anomalies of the uterus
- Uterine Leiomyomatosis
- Allergy to copper
- Wilson's disease

Relative

- Severe Dysmenorrhea
- Disorders of blood coagulation
- Vascular cardiac disease

SECONDARY EFFECTS

- Pregnancy (around 2 %)
- Spotting between menses
- Possible menstrual hemorrhages, more intense and/or prolonged
- Possible abdominal pain
- Partial or total expulsion
- Pelvic inflammatory disease (PID)
- Uterine puncture

CONTRACEPTIVE LIFE

International bibliography recommends not to surpass five years of insertion in the active copper IUD's.