

INSERTION TECHNIQUE OF THE "T" DE COBRE 200 IUD COPPER T 380 A IUD

General description

The T Shape intrauterine devices consists of a polyethylene structure, with a copper wire spiral rolled in its vertical axis.

T de Cobre 200 with an active copper surface of 200 mm²

Copper T 380 A with an active copper surface of 380 mm. copper wire an 2 copper cylinders.

In the bottom of this axis, there is a polyethylene thread tied to it.

The assembly is lodged in an insertion canula, on which a movable top slides to show the hysteroscopy. An insertion rod is included.

The sterilization method used by ETO.

Indications

- Intrauterine Contraception.
- 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 an IUD, it is advisable to make smear cytology in order to discard any possible contraindication.

At the moment of the positioning, 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

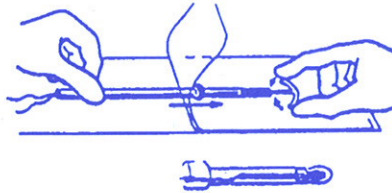


Fig. 1. Introduce the arms of the device in the insertion tube, to a maximum of 6 mm. To make this operation, it is advisable to use the thumb and the index fingers to fold the arms, while pushing the insertion tube with the other hand, with the purpose of maintaining the sterility. This operation can be made with the package partially opened. Do not fold the arms until the moment prior to the insertion.

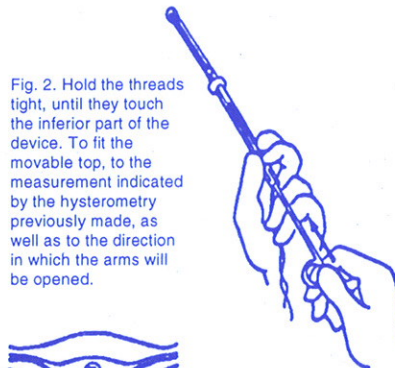


Fig. 2. Hold the threads tight, until they touch the inferior part of the device. To fit the movable top, to the measurement indicated by the hysteroscopy previously made, as well as to the direction in which the arms will be opened.

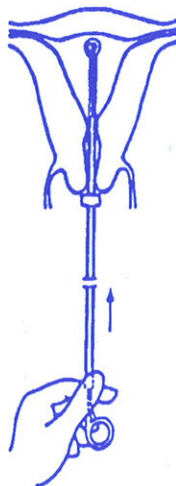


Fig. 3. Introduce insertion tube through the cervical canal, until the movable top gets in contact with the portio.



Fig. 4. Slide downwards the insertion device until the end while keeping the insertion device fixed to liberate the arms.

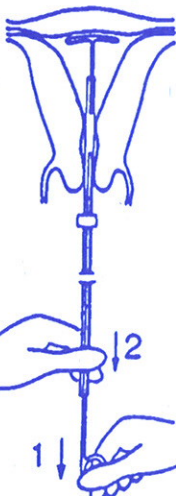


Fig. 5. Withdraw the insertion device first and then the insertion tube, with the purpose of not exerting any traction on the threads, to avoid the displacement of the device.

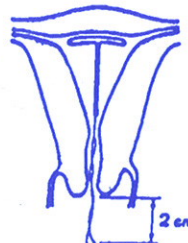


Fig. 6. In order to allow its visibility, as well as their extraction, the threads can be cut at about two centimeters outside the cervix.

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 two years of insertion for T de Cobre 200 and ten years for Copper T 380 A.