Immediate Postabortion IUD Not Problematic

VITALS

Major Finding: Immediate IUD placement after first-trimester abortion did not differ significantly from delayed placement in most complications.

Data Source: A multicenter randomized trial in 575 women.

Disclosures: The study was supported by an anonymous foundation. Dr. Bednarek disclosed having served on an advisory board for Bayer, maker of Mirena.

BY PATRICE WENDLING

ATLANTA — Immediate IUD placement following first-trimester abortion did not increase complications, and led to higher IUD utilization and lower repeat unintended pregnancy rates in a multicenter randomized trial in 575 women.

Patient-reported bleeding was increased in the first 14 days among 199 women who had the levonorgestrel intrauterine system (LNG-IUS) (Mirena) inserted 15 minutes after suction aspiration, compared with 178 women who underwent insertion 2-6 weeks after aspiration.

The bleeding pattern, however, crossed over at days 14-21, when the majority of women in the delayed arm had their IUD placed, said Dr. Paula Bednarek, an ob.gyn. at the Oregon Health and Science University in Portland.

During the first month after aspiration, the median number of bleeding days was 9 in the immediate group and 6.5 in the delayed group, which was statistically significant ($P = .0008$), but spotting was similar at a median of 8 days in both groups. There were no significant differences in either bleeding or spotting at 3 and 6 months' follow-up, Dr. Bednarek said at the annual meeting of the American Society for Reproductive Medicine.

Bleeding and spotting followed a similar pattern among an additional 107 women who chose a copper T380A IUD and were randomized to either immediate or delayed insertion, she said.

In all, 91 women randomized to delayed insertion did not receive an IUD.

When the investigators compared outcomes based on IUD type, the median number of bleeding days was similar during the first month, but greater with the copper IUD at 3 and 6 months' follow-up.

No significant differences were found in either bleeding or spotting at 3 and 6 months' follow-up after first-trimester abortion in the immediate and delayed-placement groups.

Spotting, however, was significantly more common with the LNG-IUS vs. the copper IUD at 1 month in both immediate-insertion (8 vs. 5 days; $P = .002$) and delayed-insertion patients (8 vs. 4 days; $P = .0008$). There was no significant difference in spotting at 3 months, and a slight increase with the LNG-IUS vs. the copper IUD at 6 months in the immediate (5 vs. 4 days; $P = .04$), but not the delayed group (5. vs. 5.5 days), Dr. Bednarek reported.

The study was powered to detect a 15% difference in bleeding or spotting between groups.

Overall, IUD expulsions were increased 2.3% among women with immediate vs. delayed IUD insertion (5% vs. 2.7%), but the difference was not statistically significant. IUD removals were similar at 6.2% and 4.9%.

However, IUD utilization at 6 months was significantly higher in the immediate group versus the delayed group (90% vs. 77%, $P = .0004$). During the 6 months of follow-up, there were no pregnancies in the immediate group and five in the delayed group, all among women who had never received an IUD, she said.

Rates of a positive chlamydia screen were similar at 3.5% in the immediate group and 3.1% in the delayed group, as were infections at 1.6% and 1.7%. There were no IUD uterine perforations in the study, Dr. Bednarek said.

At baseline, patient demographics and aspiration indication (elective or spontaneous abortion) did not differ between groups. ■