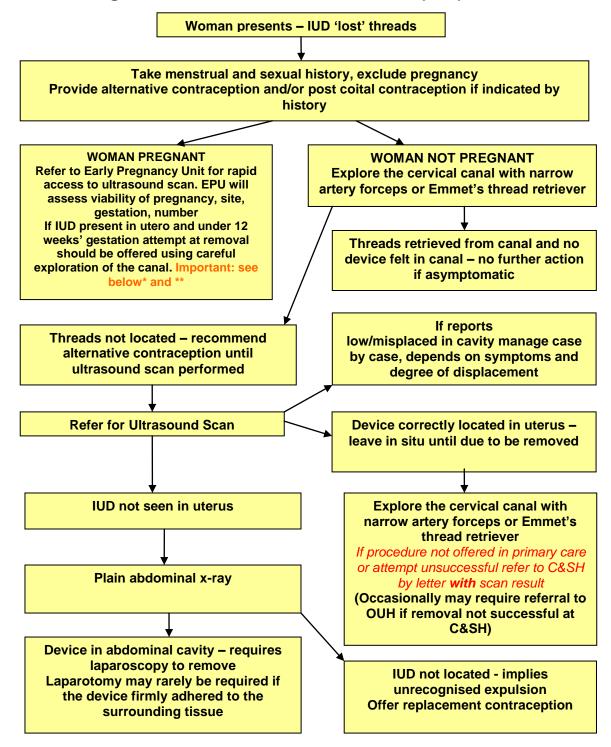




Management of lost intra-uterine device (IUD) threads



*From FSRH Clinical Effectiveness Unit Guidance November 2007

Women who become pregnant with an intrauterine contraception *in situ* should be informed of the increased risks of second-trimester miscarriage, preterm delivery and infection if the intrauterine method is left *in situ*. Removal would reduce adverse outcomes but is associated with a small risk of miscarriage

If the threads are visible, or can easily be retrieved from the endocervical canal, the intrauterine contraceptive should be removed up to 12 weeks' gestation.

**If IUD is NOT removed in first trimester flag in notes/to woman's health carers for delivery/to woman herself that IF the IUD is not positively identified at delivery (ie is not expelled and seen) then a plain abdominal Xray should be performed post partum.