Is this going to hurt? An Investigation Into Managing Pain For The Insertion Of Intrauterine **Contraceptives For Women In The UK**

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INTRODUCTION

Intrauterine contraceptive insertion (IUC-I) can be a painful and invasive procedure, in the UK currently there is no universal recommendation for analgesia.

Pain experience can be a barrier to uptake, particularly in young women¹.

The FSRH indicate anxiety, nulliparity, and length since period/pregnancy as predictors of pain, but do not suggest further pain relief in these groups².

Research Questions

1. Is IUC-I painful?

2. Are patients provided with adequate analgesia for this procedure?

MATERIALS & METHODS

- A 10-question survey was shared on social media addressing the RQs and collecting anonymised, demographic information on participants.
- Questions collected data on pain experience, relevant pain modulators, type of device inserted, and a pain rating from 0-10 on the Universal Pain Assessment Tool (see figure).
- Pain scores analysed on Excel and stratified by time since insertion, type of device and parity.

REFERENCES

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RESULTS



 34% experienced nausea or vomiting • 34% experienced dizziness or fainting O 47% felt pain was worse than expected o 60% were encouraged to take basic pain relief prior to IUC-I 46% participants experienced severe pain (>7) • Topical and injected lidocaine was offered to 16% participants

- Time since insertion and device type did not affect pain scores





SUMMARY / CONCLUSION

 \circ Mode pain score was 8 suggesting IUC-I is severely painful and analgesia is indicated.

○ 7% surveyed rated pain as 0-1 - not all women need pain relief.

 Pain scores 39% higher in nulliparous than parous women – consider offering analgesia.

 Additional considerations should be made for women who are likely to experience greater pain during this procedure (nulliparous women, or those with anxiety regarding the procedure).

 Since this procedure is severely painful for many women, further research is required into pain modulation techniques for IUC-I.

 Future research could consider review of experimental literature into pain relief healthcare options, and surveying professional perceptions of pain experience.

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