

Complications of use of intrauterine devices among HIV-1-infected women

Abstract:

Background A WHO expert group and the International Planned Parenthood Federation recommend against use of intrauterine devices (IUDs) in HIV-1-infected women based on theoretical concerns about pelvic infection and increased blood loss. We investigated whether the risk of complications after IUD insertion is higher in HIV-1-infected women than in non-infected women. **Methods** 649 (156 HIV-1 infected 493 non-infected) women in Nairobi, Kenya, who requested and met local eligibility criteria for insertion of an IUD were enrolled. We gathered information on IUD-related complications, including pelvic inflammatory disease, removals due to infection, pain, or bleeding, expulsions, and pregnancies at 1 and 4 months after insertion. Patients' HIV-1 status was masked from physicians. **Findings** Complications were identified in 48 of 615 women (11 [7.6%] HIV-1-infected women, 37 [7.9%] non-infected). Incident pelvic inflammatory disease (two [1.4%] HIV-1 infected, one [0.2%] non-infected) and infection-related complications (any tenderness, removal of IUD for infection or pain; ten [6.9%] HIV-1 infected, 27 [5.7%] non-infected) were also rare and similar in the two groups. Complication rates were similar by CD4 (immune) status. Multivariate analyses suggested no association between HIV-1 infection and increased risks for overall complications (odds ratio 0.8 [95% CI 0.4–1.7]) or infection-related complications (1.0 [0.5–2.3]), adjusted for marital status, study site, previous IUD use, ethnic origin, and frequency of sexual intercourse, but a slight increase cannot be ruled out. **Interpretation** Our data suggest that IUDs may be a safe contraceptive method for appropriately selected HIV-1- infected women with continuing access to medical services. *Lancet* 1998; 351: 1238–41