

Mirena – good for....

- Long term reversible reliable contraception
- Abnormal menstrual bleeding
- Endometrial protection – endometrial hyperplasia
- HRT



Mirena – not good for.....

4.3 Contraindications

Known or suspected pregnancy

Current or recurrent pelvic inflammatory disease

Lower genital tract infection

Postpartum endometritis

Infected abortion during the past three months

Cervicitis

Cervical dysplasia

Uterine or cervical malignancy

Confirmed or suspected hormone dependent tumours including breast cancer

Undiagnosed abnormal uterine bleeding

Congenital or acquired uterine anomaly, including fibroids if they distort the uterine cavity

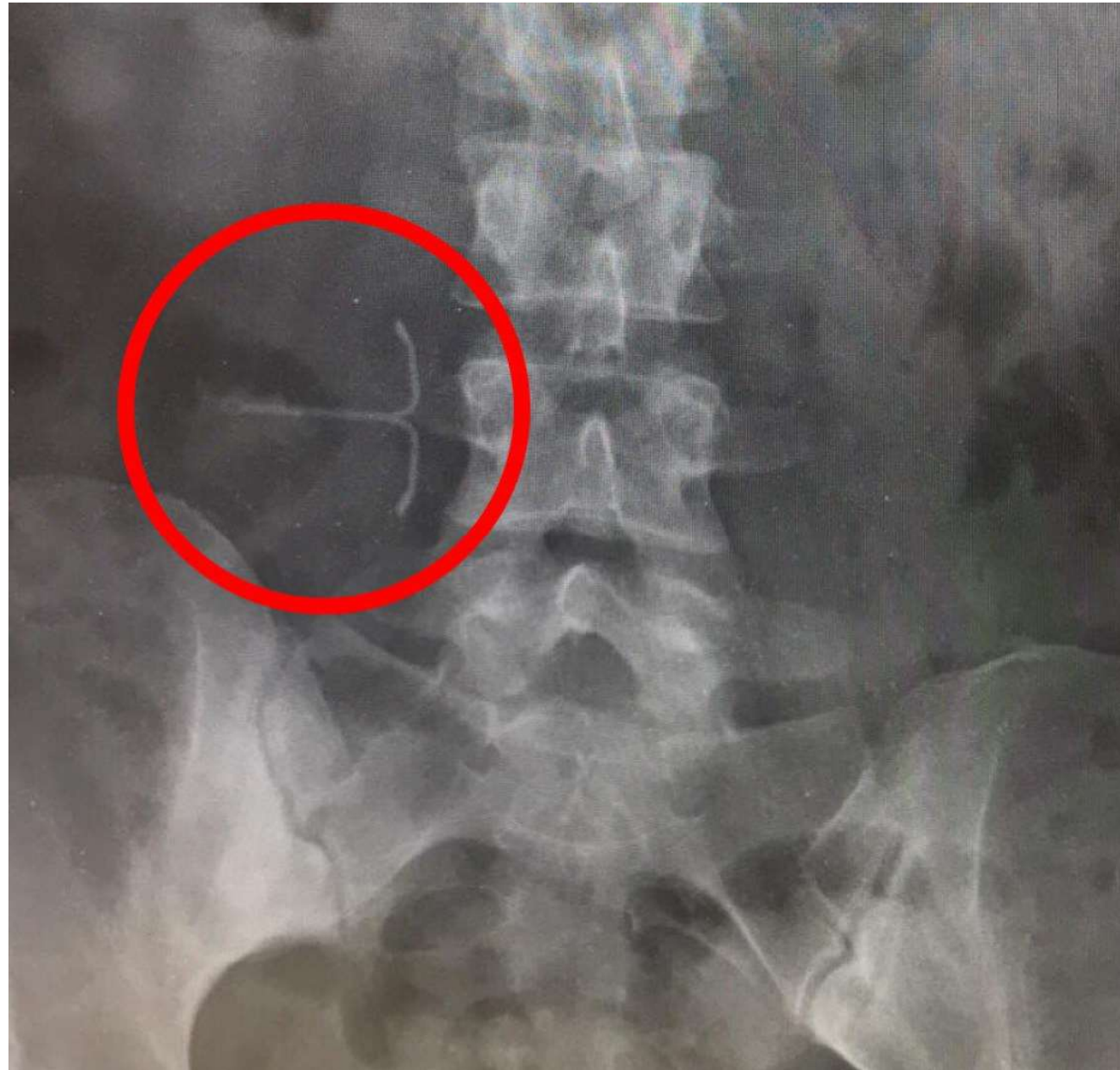
Conditions associated with increased susceptibility to infections

Acute liver disease or liver tumour

Hypersensitivity to the active substance or to any of the excipients

Mirena - risks

- Infection – usually at the time of insertion (up to 1 month)
- Pregnancy – ectopic pregnancy
- Expulsion
- Malposition
- Perforation







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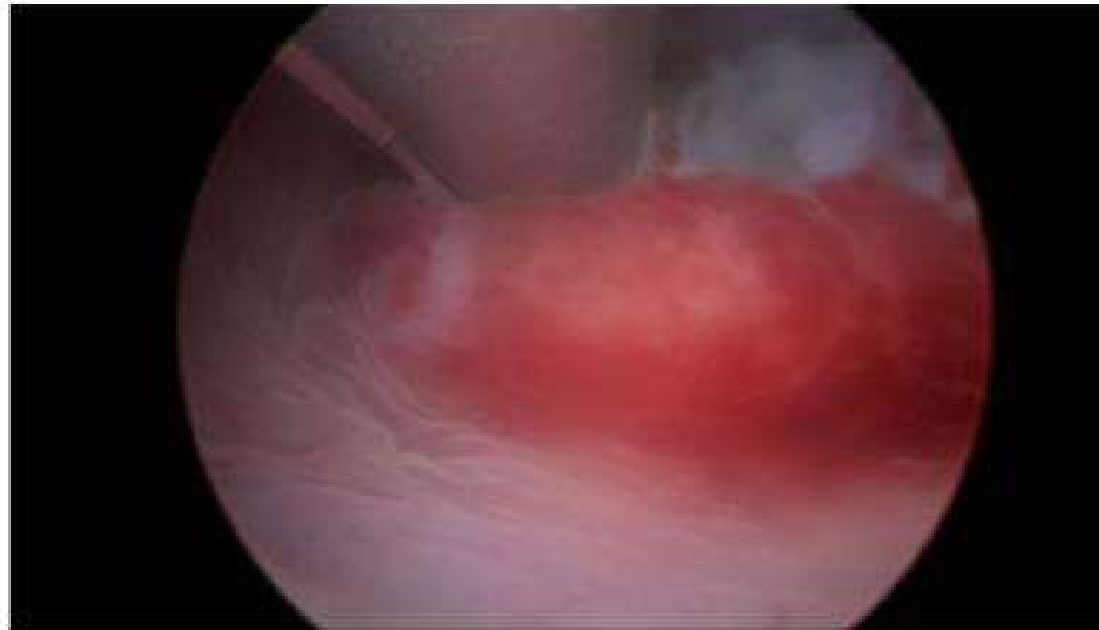
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Case 1

- 46 years old with IMB and HMB
- USS show suspicious of intramural or submucosal fibroid.
- Hysteroscopy – submucosal fibroid

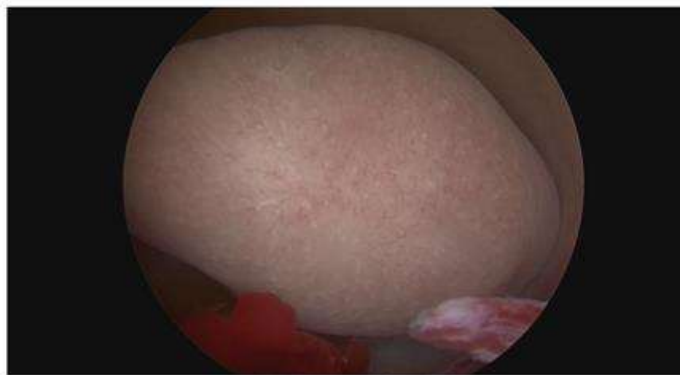


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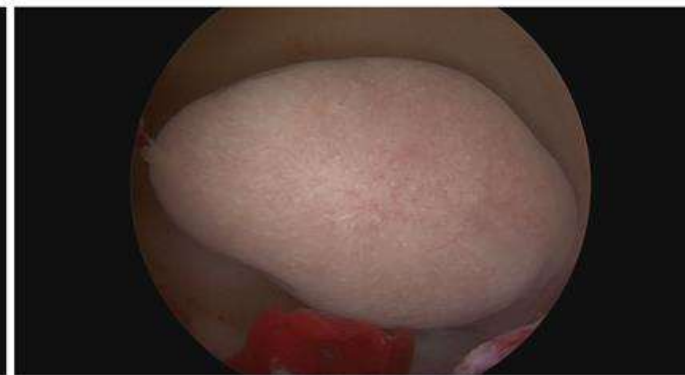


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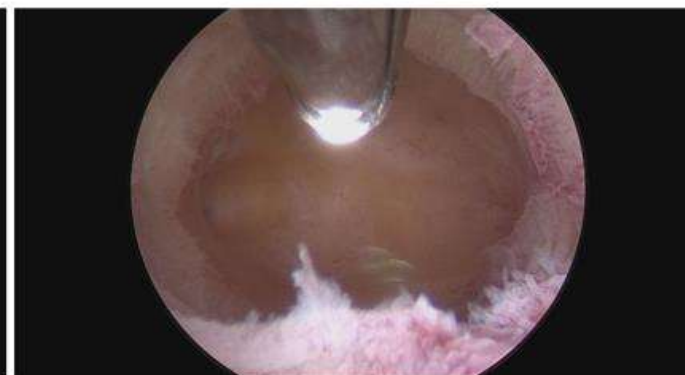
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Case 2 - WM

- 34 years old
- Nulliparity
- Elevated BMI – approx. 28
- Abdominal distension and thought she put on weight
- Seen GP – pelvic USS show large fibroid
- Subtotal hysterectomy
- Histology – benign fibroids.