Skyla
Levonorgestrel-releasing Intrauterine System (IUS)/Device (IUD)/Contraceptive (IUC)

Patient Information

What is Skyla?

Skyla is a hormone-releasing IUD (intrauterine device) that is over 99% effective and continuously prevents pregnancy for up to 3 years (compared to the Mirena IUD, it has less hormone, is slightly smaller in size and approved for use 2 years less).

- No daily pills or trips to the pharmacy for refills
- Made of soft, flexible plastic
- Placed in your uterus by your healthcare provider during a routine office visit
- Completely reversible and can be removed at any time if you change your mind, so you can try to get pregnant right away

Skyla is FDA-approved and can be used whether or not you have had a child. It is available by prescription only. You should make sure that Skyla is in place with an easy monthly check. Your healthcare provider can show you how.

How does Skyla work?

Skyla thickens your cervical mucus, inhibits sperm movement, reduces sperm survival and thins the lining of your uterus. These actions work together to prevent pregnancy.

Because Skyla is in your uterus not your vagina:

- You can still use tampons
- You shouldn’t be able to feel it
- You and your partner should not feel it during sex. If you do, your healthcare provider may be able to help
- You should make sure Skyla is in place with a simple monthly check. Your healthcare provider can show you how

Some common side effects include:

- Bleeding and spotting may increase in the first 3 to 6 months and remain irregular. Periods over time usually become shorter, lighter, or may stop
- Skyla may come out by itself. This occurs in about 3% of women, and you may become pregnant if this happens. If you think that Skyla may have come out use a back-up birth control method (such as condoms and spermicide)
- Ovarian cysts: About 14% of women using Skyla develop a cyst on the ovary. These cysts usually disappear on their own in a month or two, but can cause pain and at times require surgery

How effective is Skyla?

Skyla is one of the most effective methods of birth control-over 99%

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For an appointment: www.uhs.berkeley.edu or call 510-642-2000 For Advice: call Clinic Nurse 510-643-7197

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Generally the less you have to do, the more effective the birth control method tends to be.

Some serious risk considerations about Skyla

- Although pregnancy while using Skyla is uncommon (less than 1 in 100), it can be serious. If you think you may be pregnant, call your healthcare provider right away as it could be an ectopic pregnancy (a pregnancy not in the uterus). Unusual vaginal bleeding or stomach pain may be a sign of this condition, which can be life threatening, may result in loss of pregnancy or fertility, and can cause internal bleeding. There can also be similar complications if a pregnancy occurs inside the uterus with an IUD in place, and it is important to talk with your healthcare provider to understand your options and risks in this situation. Severe infection, premature delivery, and even death can occur with pregnancies that continue with an IUD.
- Sepsis (a rare, but life-threatening infection) can occur within the first few days after Skyla is placed. Call your healthcare provider immediately if you develop severe pain or fever shortly after getting Skyla.
- Less than 1% of users get a serious pelvic infection called PID. More serious cases of PID may require surgery. A hysterectomy (removal of the uterus) is sometimes needed. In rare cases, infections that start as PID can even cause death.
- Less than 1% of users experienced perforation (goes through the uterine wall) in clinical trials. If perforation occurs, Skyla may move outside the uterus and can cause internal scarring, infection, or damage to other organs, and you may need surgery to have Skyla removed.

**Indication**

Skyla (levonorgestrel-releasing intrauterine system) is a hormone-releasing IUD that prevents pregnancy for up to 3 years.

**Important Safety Information**

- Pain, bleeding or dizziness: These symptoms may occur during and after placement. If they do not stop within 30 minutes, Skyla may not have been placed correctly.
- If you have a pelvic infection, get infections easily, or have certain cancers, don’t use Skyla. Less than 1% of users get a serious pelvic infection called PID.
- If you have persistent pelvic or stomach pain or if Skyla comes out, tell your doctor. If Skyla comes out, use back-up birth control. Skyla may attach to or go through the uterus and cause problems.
- Pregnancy while using Skyla is uncommon but can be life threatening and may result in loss of pregnancy or fertility. Ovarian cysts may occur but usually disappear.

**Skyla does not protect against HIV or STDs**

Only you and your healthcare provider can decide if Skyla is right for you. Skyla is available by prescription only.