

Clinical reviews

Our panel of GPs review recent research papers in their specialist areas that may influence the way you practise

Reviewers

Addiction

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RCGP regional lead
substance misuse
RCGP/British Liver Trust
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Cardiovascular disease

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Diabetes

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Mental health

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Obstetrics and gynaecology

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Paediatrics

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Sexual health

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Smoking cessation

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Urology

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Obstetrics and gynaecology

Does the choice of forceps during IUD insertion affect pain scores?

Applying either tenaculum or Littlewoods forceps to stabilise the cervix during insertion of an intrauterine contraceptive device (IUD) does not cause significant pain, a UK study has shown.

A hundred women aged 18-50 years who had had at least one vaginal delivery, a negative chlamydia screen (if aged under 35) and regular menstrual cycles were recruited. They were randomly allocated to

either the tenaculum or Littlewoods forceps group. Women were fitted with their chosen IUD or intrauterine system (IUS); frameless devices were not offered.

The study was single blind, the physician found out which forceps were going to be used just before the fitting procedure. There were no significant differences in the baseline characteristics between the two groups.

Mean pain scores using visual analogue scales (VAS) were similar between the groups: at forceps application (the primary outcome), at IUD/IUS insertion and at five minutes post insertion. Although the VAS score was significantly higher for tenaculum forceps ten minutes after IUD/IUS insertion, this is unlikely to be clinically significant as the VAS scores were low (0.6 ten minutes after insertion compared with 1.5 at forceps application, 3.3 during insertion and 0.8 five minutes after insertion), see table 1, below.

There were no differences in pain scores between forceps even after adjusting for: premedication with oral analgesics, history of colposcopic treatment and IUD/IUS removal before insertion of the new device.

There was also no difference in bleeding between the two groups. There were no statistically significant differences in the perceived ease of application of either instrument by

the doctors who fitted the devices.

The study authors conclude: 'Our findings suggest that we can reassure women who have experienced a vaginal delivery that minimal pain is felt during intrauterine contraceptive placement.'

DR RICHARD MA

Speedie JMM, Mansour D, Landy R, Clement KM. A randomised trial comparing pain and ease of use of two different stabilising forceps for insertion of intrauterine contraception. J Fam Plann Reprod Health Care 2016;42:241-46

Table 1

Mean visual analogue scale (VAS) pain scores before, during and after IUD/IUS insertion

Time points	Mean VAS pain scores for tenaculum forceps (SD)	Mean VAS pain scores for Littlewoods forceps (SD)	P
Pain at forceps application	1.5 (1.8)	1.2 (1.6)	0.5173
Pain at IUD/IUS insertion	3.3 (2.1)	2.7 (2.2)	0.1024
Pain after 5 minutes	0.8 (1.1)	0.6 (1.0)	0.3158
Pain after 10 minutes	0.6 (1.2)	0.2 (0.6)	0.0139

IUD = intrauterine device IUS = intrauterine system