Indications & Usage

Mirena is a hormone-releasing system placed in your uterus to prevent pregnancy for as long as you want for up to 5 years. Mirena also treats heavy periods in women who choose intrauterine contraception.

Important Safety Information About Mirena

Only you and your healthcare provider can decide if Mirena is right for you. Mirena is recommended for women who have had a child.

- Don’t use Mirena if you have a pelvic infection, get infections easily or have certain cancers. Less than 1% of users get a serious infection called pelvic inflammatory disease. If you have persistent pelvic or abdominal pain, see your healthcare provider.
- Mirena may attach to or go through the wall of the uterus and cause other problems. If Mirena comes out, use back-up birth control and call your healthcare provider.
- Although uncommon, pregnancy while using Mirena can be life threatening and may result in loss of pregnancy or fertility.
- Ovarian cysts may occur and usually disappear.
- Bleeding and spotting may increase in the first few months and continue to be irregular. Periods over time may become shorter, lighter or even stop.

Mirena does not protect against HIV or STDs.

Mirena is available by prescription only.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit www.fda.gov/medwatch, or call 1-800-FDA-1088.

For important risk and use information about Mirena, please see the Full Prescribing Information.
You had Mirena placed—now what?

You’ve joined nearly 2 million other women* in the US who currently use Mirena. So, what comes next—tomorrow, the next day, one month from today? What can you expect as your body adjusts to Mirena?

The information here is arranged for you, whether you’re new to Mirena or considering having Mirena placed again. Either way, use this resource as much as you need. And don’t forget to read the Full Prescribing Information.

Contents:

Day one with Mirena .......................................................... 4
Looking ahead with Mirena .................................................... 6
Mirena “What ifs?” .......................................................... 10
Most common side effects ...................................................... 14
Sign up for more information and support ................................. 15

You can sign up at mirena-us.com to receive additional information about Mirena, sent right to your inbox. And remember, you can always call your best resource—your healthcare provider—with any unanswered questions.

*m2012 data.
Day one with Mirena

Starting something new can be intimidating, but your first day with Mirena doesn’t have to be. We put together the following information so you can get an idea about what this day may be like and learn the basics about Mirena.

What should you expect immediately after placement?
You may experience cramping or pain, bleeding, and/or dizziness during and right after placement of Mirena. To help minimize any cramps, ask your healthcare provider about over-the-counter pain medications that you may use. If these symptoms last for more than 30 minutes, let your healthcare provider know. Mirena may not have been properly placed and your healthcare provider should examine you.

mirena-us.com
How can you be sure Mirena is properly in place?
Once it’s placed, check the threads of Mirena once a month to make sure it’s positioned correctly. Your healthcare provider can show you how. When you’re doing your monthly checks at home, call your healthcare provider if you have trouble finding the threads. And in the meantime, use a back-up form of birth control.

How often should you see your healthcare provider once Mirena is in place?
As a follow-up, you should visit your healthcare provider once in the first 4 to 12 weeks after having Mirena placed. After that, Mirena can be checked by your healthcare provider once a year as part of your routine exam. Call your healthcare provider if you have any questions or concerns.

Please see additional Important Safety Information about Mirena. For important risk and use information, please see the Full Prescribing Information.

Insider Tip:
Think about calling to make your 4-12 week appointment now, while it’s fresh in your mind.
Looking ahead with Mirena

So, what does your future hold? We don’t have all the answers—who does? But, we can tell you about what to expect now that day one with Mirena is a thing of the past and you’re anticipating the days to come.

Please see additional Important Safety Information about Mirena. For important risk and use information, please see the Full Prescribing Information.
Will your periods change now that you have Mirena?
It’s likely that your periods may change over time after Mirena is placed.

For the first 3 to 6 months
- Your monthly period may become irregular and the number of bleeding days may increase. You may also have frequent spotting or light bleeding. A few women have heavy bleeding during this time. Call your healthcare provider if the bleeding remains heavier than usual.

As your body adjusts to Mirena
- The number of bleeding days is likely to decrease, though your period may remain irregular and may even stop altogether for as long as Mirena is in place. Call your healthcare provider if the bleeding becomes heavy after it has been light for a while.

- Approximately 1 in 5 women will have no period at all after 1 year of Mirena use. If it has been 6 weeks or longer since your last period, contact your healthcare provider to rule out the possibility of pregnancy. If pregnancy is ruled out, repeated pregnancy tests are generally not necessary unless other signs of pregnancy or pelvic pain develop. Your periods will return once Mirena is removed.

If you’re using Mirena to also reduce heavy periods
- In some women with heavy bleeding, the total blood loss per cycle progressively decreases with continued use. The number of spotting and bleeding days may initially increase but then typically decreases in the months that follow. In a clinical trial of Mirena in women with heavy periods, the majority had an 80% reduction in bleeding as early as 3 months and a 90% reduction at 6 months.
Will Mirena interfere with intercourse?

Neither you nor your partner should feel Mirena during intercourse, as Mirena is placed in the uterus, not in the vagina. Male partners may sometimes feel the threads.
Can Mirena protect you from HIV or other STDs (sexually transmitted diseases)?
Mirena does not protect against HIV or other STDs. So, if while using Mirena you think you and your partner might be at risk of getting an STD, use a condom and call your healthcare provider.

Can you still use tampons?
Yes. You can still use tampons after Mirena is placed. Just be sure to change each tampon with care so as not to pull the threads of Mirena when removing it.

Please see additional Important Safety Information about Mirena. For important risk and use information, please see the Full Prescribing Information.
Mirena “What ifs?”

Your healthcare provider is the best source for information about Mirena and birth control in general. But, this section can help answer some of the most common questions women have about Mirena.

What if you want to try to get pregnant?
Mirena can be removed by your healthcare provider at any time during an office visit, and you can try to become pregnant immediately. So, if you decide you want to try to have another child, simply make an appointment with your healthcare provider to have Mirena removed. Within a year of having Mirena removed, about 8 out of 10 women succeed at becoming pregnant.

What if you need birth control for more than 5 years?
Mirena must be removed after 5 years. If you want to continue using Mirena after those 5 years, you can talk with your healthcare provider about having another one placed.

Insider Tip:
Talk with your healthcare provider about replacing your Mirena before your scheduled appointment to have your current Mirena removed. He or she can then place your new Mirena during the same office visit.

Please see additional Important Safety Information about Mirena. For important risk and use information, please see the Full Prescribing Information.
Models used for illustrative purposes only.
Mirena®
(levonorgestrel-releasing intrauterine system) 20 mg per day
Keep life simple.

mirena-us.com

Model used for illustrative purposes only.
What if you become pregnant while using Mirena?
Unfortunately, no birth control method, including Mirena or tubal ligation (getting your tubes tied), is 100% perfect. If you do get pregnant while using a birth control method, there may be risks to you and your baby. Here we talk about the risks of getting pregnant while Mirena is still in place.

Over the course of 5 years, fewer than 8 in 1,000 women become pregnant while using Mirena. One risk of getting pregnant while using Mirena is called ectopic pregnancy, when the pregnancy is not in the uterus. It may occur in the fallopian tubes. Signs of ectopic pregnancy may include unusual bleeding or abdominal pain. Ectopic pregnancy is an emergency that requires immediate medical attention and often surgery. Ectopic pregnancy can cause internal bleeding, infertility and even death. Call your healthcare provider right away if you think you’re pregnant.

There are also risks if you get pregnant while using Mirena and the pregnancy is in the uterus. Severe infection, miscarriage, premature delivery and even death can occur with pregnancies that continue with an intrauterine device (IUD). Because of this, your healthcare provider may try to remove Mirena, even though removing it may cause a miscarriage. If Mirena cannot be removed, talk with your healthcare provider about the benefits and risks of continuing the pregnancy.

Please see additional Important Safety Information about Mirena. For important risk and use information, please see the Full Prescribing Information.
Most common side effects

*Discomfort during placement.* Dizziness, bleeding or cramping may occur during placement. This is common. Let your healthcare provider know if the cramping is severe.

*Expulsion.* Mirena may come out by itself and no longer prevent pregnancy. Symptoms of partial or complete expulsion may include bleeding, pain and an increase in menstrual flow. If this occurs, Mirena may be replaced within 7 days of a menstrual period after pregnancy has been ruled out. If you notice Mirena has come out, use a back-up form of birth control like condoms and call your healthcare provider.

**More than 10% of Mirena users may experience:**

- **Missed menstrual periods.** About 2 out of 10 women stop having periods after 1 year of Mirena use. Your periods come back when Mirena is removed. If you do not have a period for 6 weeks during Mirena use, contact your healthcare provider to rule out pregnancy.

- **Changes in bleeding.** Your period may become irregular and you may have bleeding and spotting between menstrual periods, especially during the first 3 to 6 months. A few women have heavy bleeding during this time. After your body adjusts, periods usually get lighter and the number of bleeding days is likely to decrease, but may remain irregular. Or you may even find that your periods stop altogether—in which case, you should contact your healthcare provider to rule out pregnancy.

  Call your healthcare provider if the bleeding remains heavier than usual or if the bleeding becomes heavy after it has been light for a while.

- **Pelvic and/or abdominal pain may occur.** Talk to your healthcare provider if pain is persistent.

- **Cyst on the ovary.** These cysts may develop as long as Mirena is in place. They are generally harmless and usually disappear on their own in a month or two. However, cysts can cause pain and may sometimes require surgery.
Sign up for more information and support

Things change. Questions can pop up. Sometimes you just want to know that other women have had the same experience. No matter how long you plan on using Mirena, it’s good to know that resources are there for you. By signing up at mirena-us.com, you’ll receive helpful, timely information and support. All just for signing up to learn more about your birth control.

Visit mirena-us.com today to sign up.

Please see additional Important Safety Information about Mirena. For important risk and use information, please see the Full Prescribing Information.
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A simple way to keep track

You probably keep track of dinner plans, birthdays, and many other things. Now that you’ve had Mirena placed, you may want to consider keeping track of your periods for a time, too. As your body adjusts to your new birth control, you may experience some changes. And monitoring those changes (or non-changes) and keeping a record of them will help you and your healthcare provider track your experience with Mirena.

See the Mirena diary. An easy way to track your periods.

Insider Tip:

Use the diary to keep track of your periods for 3 to 6 months so you can become familiar with your new rhythm. Also, remember to print and take your diary with you to your next healthcare provider appointment.
Sign up at **mirena-us.com** today

Get additional information about Mirena, sent right to your inbox.

Please see additional **Important Safety Information** about Mirena. For important risk and use information, please see the **Full Prescribing Information**.

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