Responses to Questions raised under Item 13 Any Other Urgent Business at the meeting on 6<sup>th</sup> July 2021

• Do we have the information on the % of IUD procedures that are performed with a Local Anaesthetic?

This data that is not routinely collected by our services but is reviewed as part of clinical audit. Some Fitters offer local anaesthetic routinely while some do not. The Faculty guideline (attached) does not support routine use of local anaesthetic for intra-uterine insertion procedure.

o Dr Louise Massey of the Faculty of Sexual and Reproductive Health Care of the Royal College of Obstetricians and Gynaecologists said on the BBC last week:

'the procedure can always be stopped if there is too much pain, discomfort or distress. It is always an option to abandon it; it can even be done under General anaesthetic if necessary and appropriate'

• Do we offer and what % of IUD are fitted with a General anaesthetic across the Trust?

The Integrated Sexual Health Service do not offer IUC fitting under general anaesthetic (GA). However, patients who choose for whatever reason to have fitting under GA would be asked to contact their GPs to refer them to Gynaecology dept.

- What % of procedures are unsuccessful and are stopped from completion in Leicester, Leicestershire and Rutland?
- What % of IUD's need removing due to complications post procedure? We collect data routinely on the reasons for the removal of an IUD/S and the number of patients unable to cope with procedure due to pain or anxiety. The latest data we have available from the LARC audits from primary care providers in Leicestershire and Rutland relates to 2019/20. It reports the following findings:
  - The audits reported a total of 2279 devices fitted were in 2019/20, (1877 intrauterine systems and 402 intrauterine devices) in GP practices in Leicestershire and Rutland (as reported by practitioners).
  - Practitioners reported 22 occasions of patients not able to cope with procedure due to pain or anxiety in 2019/20. For all instances the procedure was abandoned, and the following action was taken (breakdown can't be provided due to small numbers):
    - they were offered pain relief and was successful
    - procedure tried two weeks later and was successful.
    - referred to gynae/family planning service/GP
    - o patient took up an alternative form of contraception
    - data not provided
  - The audit returns report a total of 1021 removals in 2019/20 for a variety of reasons, the most common being the device expired & needed a refit (56%), followed by no longer required (16%) and bleeding problems

(9%). Pain accounted for 3% of all reasons for removal, affecting 38 individuals.

Regarding the change in policy question, all the practitioners who provide the service in GPs are linked to the LLR Fitters Forum and so will be provided with the expertise from Mr Oloto and Mr Kumar in this area. We cannot provide answers to "% of IUD procedures that are performed with a Local Anaesthetic?" and "Do we offer and what % of IUD are fitted with a General anaesthetic across the Trust?" as local anaesthetic is not provided in GP practices to undertake this procedure.

Liz Rodrigo may be able to help with City figures if needed.

- If the data is not collected routinely is there any expected change in policy in light of the spotlight that has been placed on the procedure?
  We would always ensure our services follow the latest clinical guidelines and evidence base.
  - The anecdotal evidence that has been collected and published so far, has indicated that the procedure is far from routine for some. I note that the guidance on the procedure was recently updated on the national NHS website, but has there been any recent policy updates provided for those that fit IUD's in LLR? Particularly on pain management or device fitting triggering past trauma. If not, when will this be provided?

'Reducing pain at IUC insertion' was extensively discussed in the last LLR IUC Fitters forum in October 2020, which was well evaluated (feedback attached). In the light of the recent spotlight, the Faculty issued a statement on the 30<sup>th</sup> June 2021 (attached), which was circulated to the IUC Fitters and other members of the sexual health team. Therefore, all provider are fully aware of the Faculty guidelines and how best to respond to patients who may have concern about pain relief. Local anaesthetic (topical or injectable) is readily available in the integrated sexual health service and all Fitters would be encouraged to discuss the pros and cons with the patients as part of the counselling. A further 'Fitters forum' for the wider LLR Fitters can be considered if necessary.