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Implementation of Intra Uterine Device and Implant Family Planning in Batang Gadis Village Jae Sub-District Panyabungan Barat District Mandailing Natal

Helmi Wardah Nasution 1, Ferika Desi 2, Risma 3, Samsidah 4, Mariani Riska 5

1, 2, 3, 4, 5 Madina Husada Academy of Minwife Panyabungan

ABSTRACT

Contraceptives are very useful in family planning programs, but it should be noted that not all contraceptives are suitable for everyone's condition. For this reason, each individual must be able to choose a contraceptive that is suitable for himself. Most family planning acceptors choose and pay for the various contraceptive methods available. Other factors that influence the choice of contraceptive type include partner factors (age, lifestyle, desired family size, experience with past contraceptive methods), health factors (health status, menstrual history, family history, physical examination, pelvic examination), factors contraceptive method (effectiveness, side effects, cost), education level, knowledge, family welfare, religion, and support from husband/wife. These factors will also affect the success of the family planning program. This is because each method or contraceptive chosen has different effectiveness. Therefore, the authors are interested in compiling a paper on Intra Uterine Device (IUD) and Implant contraception.

Keywords: Intra Uterine Device, Implant, Family Planning

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¹Corresponding Author: Helmi Wardah Nasution, *Madina Husada Academy of Minwife Panyabungan*; Parbangunan, Kec. Panyabungan, Kabupaten Mandailing Natal, North Sumatera 22952; Email: helmi.wardah@gmail.com

INTRODUCTION

Indonesia is a country that is seen from its population in the fourth position in the world, with a relatively high growth rate. The essence of the task of the Family Planning (KB) program in this case is clear, namely reducing fertility in order to reduce the burden of development for the realization of happiness and prosperity for the people and nation of Indonesia. As stated in Law No. 10 of 1992 concerning Population Development and Development of Prosperous Families, the definition of family planning is an effort to increase awareness and community participation through maturing the age of marriage, birth control, fostering family resilience, and increasing family welfare in order to create a small, happy family, and prosperous.

Contraceptives are very useful in family planning programs, but it should be noted that not all contraceptives are suitable for everyone's condition. For this reason, each individual must be able to choose a contraceptive that is suitable for himself. Contraceptive services (PK) is one type of family planning services available. Most family planning acceptors choose and pay for the various contraceptive methods available.

Other factors that influence the choice of contraceptive type include partner factors (age, lifestyle, desired family size, experience with past contraceptive methods), health factors (health status, menstrual history, family history, physical examination, pelvic examination), factors contraceptive method (effectiveness, side effects, cost), education level, knowledge, family welfare, religion, and support from husband/wife. These factors will also affect the success of the family planning program. This is because each method or contraceptive chosen has different effectiveness. Therefore, the authors are interested in compiling a paper on Intra Uterine Device (IUD) and Implant contraception.

Problem Formulation

- 1. What is Intra Auterine Urine (IUD) and Implant?
- 2. How do IUDs and Implants work?
- 3. Explain its effectiveness?
- 4. What are the Advantages and Disadvantages of Using IUDs and Implants?
- 5. How is the expulsion of the IUD and Implant contraception?
- 6. Explain IUD and Implant Management by Health Workers?

Purpose

- 1. Knowing the Definition of Intra Auterine Urine (IUD) and Implants
- 2. Knowing the Working Mechanism
- 3. Knowing the Effectiveness of IUDs and Implants
- 4. Knowing the Benefits of Using IUDs and Implants
- 5. Knowing Expulsion in IUD and Implant contraceptives
- 6. Knowing Management by Health Workers regarding IUDs and Implant

Activity Benefits

With the knowledge that has been given, women of childbearing age can choose the type of contraception wisely.

Solution to problem

With Health promotion using the extension method will be able to increase knowledge and information regarding the Family Planning Program for Women of Childbearing Age.

METODE

Community Service Activities about The implementation of Counseling on Intra Uterine Device and Implant Family Planning in Batang Gadis Jae Village, was held on July 20, 2020 at the Posyandu. This activity was attended by 23 mothers of women of childbearing age.

RESULTS AND DISCUSSION

Definition of Intra Auterine Urine (IUD) and Implants

Implant is a contraceptive device in the form of an empty silastic capsule (silicone rubber) which is filled with hormones and the ends of the capsule are closed with a silastic adhesive. (Hanafi Family Planning , 2004:179), while the IUD is one of the most popular contraceptive methods used worldwide, the most common type is the Copper IUD.

Mechanism of Action

1. IUD Mechanism

The exact mechanism of action of the IUD is not known. There are some IUD mechanism of action that has been recommended:

- ✓ The emergence of a non-specific local inflammatory reaction in the uterine cavity so that the implantation of the fertilized egg is disrupted. In addition, the emergence of PMN leukocytes, macrophages, foreign body giant cells, mononuclear cells and plasma cells can result in the lysis of spermatozoa/ova and blastocysts.
- ✓ Increased local production of prostaglandins, which causes inhibition of implantation.
- ✓ Disruption or detachment of a blastocyst that has implanted in the endometrium.
- ✓ Accelerated movement of the ovum in the fallopian tube.
- ✓ Immobilization of spermatozoa as they pass through the uterine cavity.
- ✓ Inhibits the ability of sperm to enter the fallopian tube.
- ✓ Affects fertilization before the ovum reaches the uterine cavity.
- ✓ The IUD works primarily to prevent sperm and ovum from meeting, although the IUD makes it difficult for sperm to enter the female reproductive tract and reduces the sperm's ability to fertilize. ü Allows to prevent implantation of eggs in the uterus.
- From recent studies, it is thought that the IUD also prevents spermatozoa from fertilizing the egg (prevents fertilization). This is evident from a study in Chile, taken ovum from 14 women using IUD and 20 women without using contraception. All women have had intercourse around the time of ovulation. It turns out that the ova from the IUD acceptor woman none showed signs of fertilization or normal embryonic development, while half of the ovum of women who did not use

contraception showed signs of fertilization and normal embryonic development. This study shows that the IUD works by preventing fertilization, among other things.

2. Implant Mechanism of Action

- ✓ Cervical mucus becomes thick
- ✓ Disrupts the process of endometrial formation so that implantation is difficult
- ✓ Reduce sperm transport
- ✓ Suppress ovulation

Effectiveness

1. IUD

The effectiveness of the IUD is expressed in terms of the continuity rate, which is how long the IUD remains in utero without:

- a. Spontaneous expulsion.
- b. Occurrence of pregnancy.
- c. Appointment or discharge for medical or personal reasons.

2. Implant

Norplant failure rate < 1 per 100 women per year in the first 5 years, the effectiveness of Norplant decreases slightly after 5 years, and at the 6th year approximately 2.5 - 3% of acceptors become pregnant, and Norplant - 2 is as effective as norplant, for the first 3 years.

Screening

- 1. Ask if the client has been counseled about the implant procedure.
- 2. Ask about any allergic reactions to drugs (local anesthetics or certain types of antiseptics) .
- 3. Rule out the possibility of pregnancy.
- 4. Check the client's health conditions that can cause problems.
- 5. Perform a follow-up physical examination if there are indications and reexamine the medical record .

Advantages and Disadvantages of Using IUDs and Implants

1. IUD

Profit

- Very effective in preventing pregnancy, once used and continues to function until opened.
- Prevention of pregnancy for the long term up to 5-10 years
- Relatively inexpensive.
- Comfortable (no need to remember like when taking pills).
- Can be opened at any time (by a doctor).
- Immediately working.
- Low side effects.
- Can breastfeed safely.
- Not felt by the user or partner.

Deficiency

• IUDs do not protect against sexually transmitted diseases.

- The IUD should not be used if you are pregnant, have abnormal uterine bleeding and have cervical cancer.
- If you are allergic to copper then you should not use the IUD copper.

2. Implants

Profit

- High usability
- Long term protection (3 years for Jadena)
- Fast return of fertility rate after depilation
- Does not require internal inspection
- Free from the influence of estrogen
- Does not interfere with sexual activity
- Does not interfere with breast milk
- Clients only need to return to the clinic if there are complaints
- Can be revoked at any time as needed

Deficiency

- Does not protect against sexually transmitted diseases.
- May cause weight gain in some women.
- Insertion and removal must be done by experts
- More expensive
- Medical personnel should require training and practice for implant insertion and removal

Expulsion of IUD and Implant contraception

Expulsion is the expulsion of the contraceptive device itself from the place of insertion. Which is caused by :

1. IUD expulsion

Often found in the first 3 months after insertion, after one year the expulsion rate will decrease.

- ✓ Age and parity
 - Age: The older the age, the lower the pregnancy rate, expulsion and removal / removal of the IUD.
 - Parity: The younger the age, especially in nulligravid, the higher the rate of expulsion and removal / removal of the IUD.
- ✓ Usage time

Depending on the effectiveness of the IUD usage period, if the use of the IUD has crossed the limit of the 10 year IUD usage period, expulsion is likely to occur.

✓ Previous Expulsion

Has the patient previously experienced expulsion on the contraceptive device, or was it caused by an improper insertion of the IUD.

✓ Type and size

The size, shape and type of the IUD containing Cu or Progesterone will determine the occurrence of expulsion. Because the larger the IUD, the more difficult it is to insert, the lower the expulsion, and vice versa.

✓ Psychological factors

That is where an acceptor experiences psychological disorders such as stress.

✓ Time or time of insertion

a. Insertion interval

The old policy: IUD insertion is carried out during or immediately after menstruation, because the uterine ostium is open, the cervical canal is soft, the woman is definitely not pregnant. But in the end this policy was abandoned because infection and expulsion were higher if the insertion was done during menstruation.

b. Post partum insertion

IUD insertion is safe within a few days postpartum, only the biggest disadvantage is the very high rate of expulsion. According to research in Singapore, the best time is 8 weeks postpartum because the danger of perforation is low.

c. Post abortion insertion

First semester abortion: expulsion, infection, perforation, etc. is the same as at interval insertion.

Second semester abortion: expulsion 5-10 times greater than after the first trimester abortion .

From the description above, the effectiveness of the use of the IUD depends on administrative, patient and medical variables, including ease of insertion, experience of the installer, the possibility of expulsion on the part of the acceptor, the ability of the acceptor to detect the occurrence of expulsion and the ease with which the acceptor can get medical help.

2. Implant Expulsion

The implant will not move from the place of insertion, and will remain in its location until it is removed and the installation procedure is always accompanied by local anesthesia so there will be no severe pain.

Management by Health Workers

- 1. In the case of expulsion IUD
 - ✓ Pay attention to the general condition of the client
 - ✓ Perform a physical examination of the client (head to toe) and inspect the IUD insertion site
 - ✓ Check for signs of infection on the genitals
 - ✓ Is there any bleeding due to the expulsion?
 - ✓ Check to see if there are any IUD threads or contraceptives left in the uterus
 - ✓ Check if there is a perforation on the client for further treatment (whether referral is needed)
 - ✓ Explain the incident to the client and if it requires further treatment (referral) prepare informed consent and informed consent to the client.

2. In case of implant expulsion

- ✓ Pay attention to the client's condition
- \checkmark Explain to the client what happened and what procedure the client will perform .
- ✓ Remove the expulsion capsule
- ✓ Check if the other capsules are still in place
- ✓ Check for signs of infection
 - If there is no infection and the other capsules are still in place, put 1 new capsule in a different insertion site
 - If there is an infection remove the entire existing capsule and put a new capsule on the other arm
 - ✓ Instruct the client to use another contraceptive method, or provide counseling to the client about other contraceptive methods.

CONCLUSION

Mother's knowledge increased after being given counseling about Family Planning, especially about IUD and Implant KB. Understand in terms of understanding the meaning of IUD and Implant KB and understand the disadvantages and advantages of IUD and Implant KB.

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