

FIGURE 1. The main messages of key articles that dispel common myths about IUDs, 1987–2001

Citation	Main message
World Health Organization, 1987	The IUD is an important method of fertility regulation with high continuation rates and important advantages in convenience of use.
Wilcox et al., 1987	The IUD effectively interrupts the reproductive process before implantation.
Alvarez et al., 1988	The IUD prevents most fertilizations from occurring, but if it fails to do so, the IUD prevents fertilized ova from entering the uterus.
Wilson, 1989	Fertility is not impaired among women who have IUDs removed because of complications.
Sivin et al., 1991	Copper IUDs are as safe as levonorgestrel IUDs.
Farley, 1992	PID is an infrequent event after the first 20 days following IUD insertion.
Andersson, Odland and Rybo, 1994	A five-year study showed that the LNG-IUS is a safe and effective contraceptive.
UNDP et al., 1997	A 12-year follow-up study confirmed the safety and efficacy of copper IUDs.
Sinei et al., 1998	IUDs are a safe form of contraception for HIV-positive women.
Walsh et al., 1998	Careful screening practices can eliminate insertion-related PID.
Hubacher et al., 2001	Copper IUDs do not increase the risk of tubal infertility, whereas exposure to <i>Chlamydia trachomatis</i> does.
Kadanali et al., 2001	The IUD interferes with sperm transport in the female reproductive tract.
Meirik, Farley and Sivin, 2001	Copper IUDs are safe and effective in relation to other methods.
Shelton, 2001	Even in settings with a high prevalence of sexually transmitted diseases, the theoretical risk of PID attributable to an IUD insertion is very low.

Source: reference 18.