

 **Paragard**<sup>®</sup> T380A

intrauterine copper contraceptive

simple, honest  
pregnancy prevention™



避孕方法

绝对  
有效  
100%  
不含  
激素



Paragard 是一种不含激素的 IUD (宫内节育器), 其避孕有效率超过 99%。其工作原理不同, 它使用一种简单的活性成分 - 铜 (而不是激素)。


如果您有盆腔感染或某些癌症, 请勿使用 Paragard。不到 1% 的用户会患上严重的盆腔炎 (PID)。

请参阅本手册中的其他重要安全信息以及完整处方信息。

# 什么是 Paragard?

Paragard 是一种小型、100% 无激素 IUD (宫内节育器), 仅使用 1 种简单的活性成分, 避孕有效率超过 99%。

它由医疗保健提供者在常规诊所就诊过程中于几分钟内放置在您的子宫中。一旦放入到位, 它可以根据您的需要提供长达 10 年的连续妊娠预防。



Paragard 由柔软的柔韧塑料制成, 包裹着一层薄薄的铜。放入之后, 您根本感觉不到它的存在。

# 为何选择 Paragard?

-  绝对有效, **100% 不含激素**
-  **有效率超过 99%**—比任何其他无激素的避孕方法\*和大多数激素方法更有效
-  工作原理不同, 仅使用 **1 种简单的活性成分**—铜
-  无激素, **无激素相关副作用**
-  **无麻烦且低维护**—无需每日服用药丸或每月补充药物
-  **持续长达 10 年**, 但可以随时提前取出 - 如果您决定要怀孕†
-  **快速非手术放置**- 在常规诊所就诊过程中于几分钟内完成放置
-  唯一由 **FDA 批准超过 30 年**的 IUD
-  大多数保险计划**可能要求支付 \$0 ‡**

\*不包括绝育。  
†必须由医疗保健提供者取出。  
‡请咨询您的保险公司, 以确认与您的个人计划相关的承保范围。可能需要支付 Paragard 放置程序的费用。

**重要安全信息**

- 如果您没有来月经, 有持续的腹痛或 Paragard 从体内出来, 请告诉您的医疗保健提供者 (HCP)。如果它从体内出来, 请使用备选避孕措施。

请参阅本手册中的其他重要安全信息以及完整处方信息。



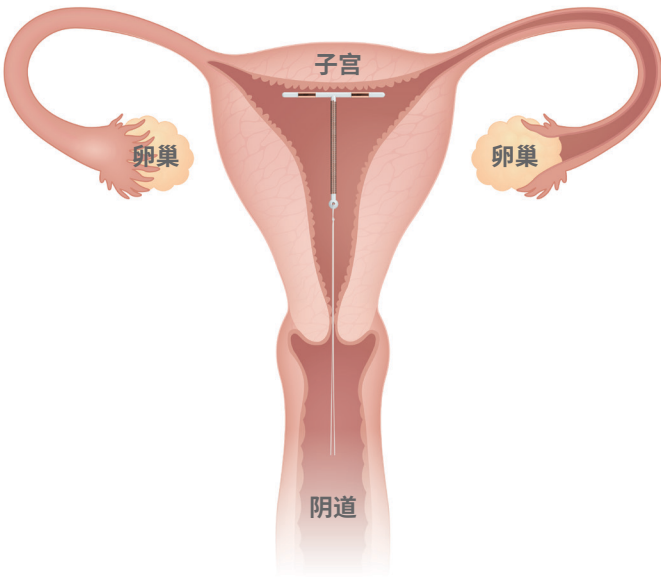
# Paragard 的工作原理

T 放置后, Paragard 便立即开始工作

Cu Paragard 中的铜可以防止精子到达卵子并使其受精, 也可以防止植入

由于 Paragard 是 100% 不含激素的, 不会干扰你的身体的自然周期, 或组织您每月排卵

排卵带来各种健康和美容益处 - 影响你的心情、皮肤、骨骼、心脏健康, 甚至你的性欲



## 您是否知道?

Paragard 中的铜已由 FDA 批准超过 30 年, 并且经过临床验证是安全和有效的。

### 重要安全信息

- 在极少数情况下, Paragard 可能会附着或经过子宫并引起其他问题。带着 Paragard 怀孕并不常见, 但可能危及生命, 可能导致不孕或流产。

请参阅本手册中的其他重要安全信息以及完整处方信息。

 **Paragard<sup>®</sup>**  
intrauterine copper contraceptive  
simple, honest pregnancy prevention™



# 使用 Paragard 会出现什么情况

有了 Paragard, ...

0

**不用每日  
服用避孕药,**  
免除了补充药物  
的烦恼



1

**每月  
丝线  
检查**  
由您  
自己执行



2

**预约**

- 一次是为了放置
- 一次是在大约一个月之后, 以确保 Paragard 置于正确的位置\*



## 重要安全信息

- Paragard 不可预防 HIV 或 STD。

请参阅本手册中的其他重要安全信息以及完整处方信息。

## 放置 Paragard

Paragard 是通过非手术方式放置的, 由医疗保健提供者在常规诊所诊疗过程中于几分钟内放置。有些女性在放置 Paragard 期间和之后可能会出现抽筋、疼痛和/或头晕。为了最大限度地缓解抽筋, 请向您的医疗保健提供者咨询非处方止痛药。

## 放置后

放入之后, 您根本感觉不到 Paragard 的存在。您可以继续使用卫生棉条, 您或您的伴侣在性行为期间不会感觉到它的存在。

出血和斑点可能在头 2-3 个月增加, 但通常会随着时间的推移而减少。如果副作用仍然存在, 请联系您的医疗保健提供者。

## 复诊

在放置一个月后, 请造访您的医疗保健提供者进行检查, 以确保 Paragard 位于正确的位置。\*

通过每月自行检查丝线来检查 Paragard 是否在子宫内是个良好的习惯。做法: 用干净的手指伸到阴道顶部, 触及丝线, 确保不要拉它们。如果您无法找到或感觉触及的不仅仅是丝线, 请立即致电您的医疗保健提供者并使用备用避孕措施。

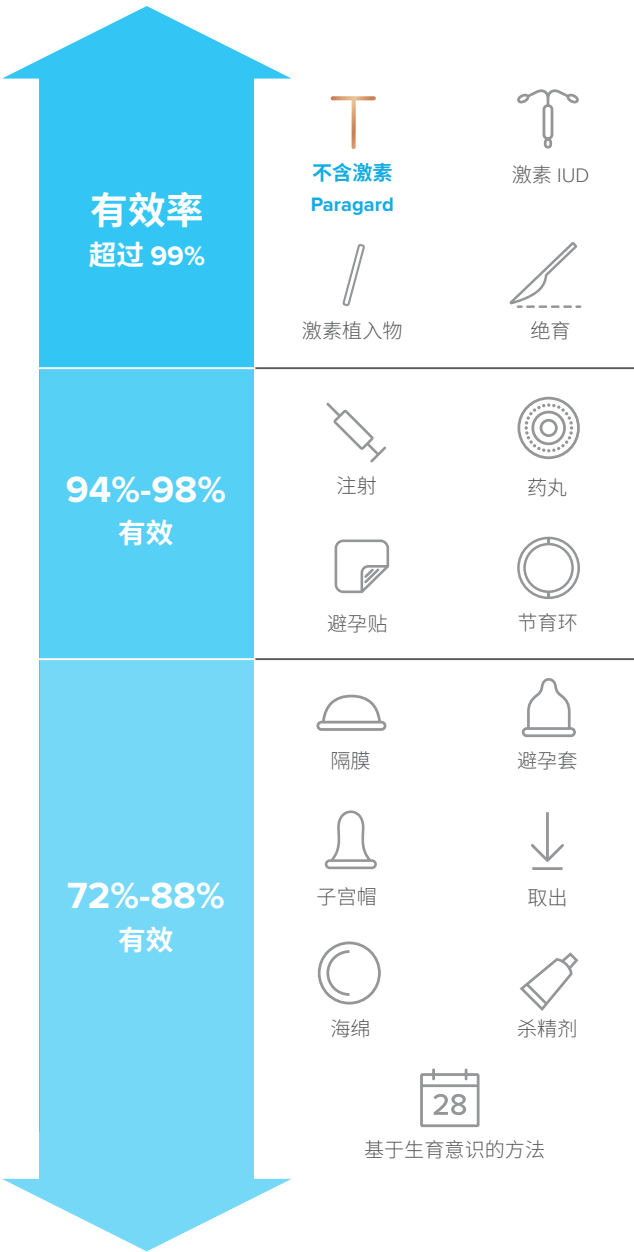
\*根据您的经验, 可能需要额外的预约以确保 Paragard 处于正确的位置。

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pregnancy prevention™



# Paragard 与竞品比较如何?

Paragard 的有效率超过 99%—可用的最有效的避孕方法之一。



### 重要安全信息

• 出血和斑点可能在头 2-3 个月增加,但通常会随着时间的推移而减少。

请参阅本手册中的其他重要安全信息以及完整处方信息。

# Paragard 是否适合您?

如果您对这些陈述中任何陈述的回答是“同意”,请咨询您的医疗保健提供者,了解 Paragard 是否适合您。

1.我对 100% 不含激素的避孕方法感兴趣

☐ 同意 ☐ 不同意

2.我想要一种高度有效的避孕方法

☐ 同意 ☐ 不同意

3.我过去使用激素避孕方法发生了不良副作用

☐ 同意 ☐ 不同意

4.我想中止使用激素避孕方法,因为我已使用它多年

☐ 同意 ☐ 不同意

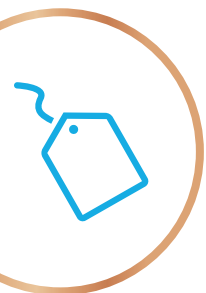
5.我想要一种低维护且不需要每日执行例程的避孕方法

☐ 同意 ☐ 不同意

6.我想要一种最持久的但可逆的(当我改变主意时可以弃用)避孕方法

☐ 同意 ☐ 不同意

# 费用和保险承保范围



## 大多数享有保险的女性支付 \$0

大多数保险计划全额承保 Paragard IUD 的费用—这意味着没有共付额、扣除额或自付费用。\*

您可以通过以下 2 条途径  
检查您的保险承保 Paragard 的情况：

### 1 请求免费 Paragard 福利验证<sup>SM</sup> 报告

打电话：

1. 致电 **1-877-PARAGARD**
2. 我们的福利验证专家将帮助您确认与您的个人计划相关的承保范围

在线：

1. 访问 **Paragardbvsp.com**
2. 填写并提交电子《患者授权表》
3. 请求您的医疗保健提供者提交一份《患者转介表》
  - 一旦收到两份表格，您将收到一份详细的、显示您的保险承保 Paragard 的情况的报告
  - 如果您有任何疑问或需要帮助执行此流程，请致电 **1-877-PARAGARD**

或

### 2 直接联系您的保险公司

1. 致电您的保险卡背面的客户服务号码
2. 告诉他们 Paragard 是由一家保健服务提供商管理的避孕方法
3. 请他们检查 Paragard 是否受《平价医疗法案》保护
4. 向他们提供 Paragard 的 J 代码：**J7300**
5. 询问您是否有任何自付费用，或者您的计划是否部分承保 Paragard



\*请咨询您的保险公司，以确认与您的个人计划相关的承保范围。可能需要支付 Paragard 放置程序的费用。

请参阅本手册中的其他重要安全信息以及完整处方信息。

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想要不含激素的避孕措施？

坚持使用 Paragard。

**100%**  
**不含激素**

**有效率**  
**超过 99%**

**1** **种简单的**  
**活性成分**

访问 [Paragard.com](http://Paragard.com)  
或致电 1-877-PARAGARD。



只有您和您的 HCP 可以确定 Paragard 是否适合您。  
只可凭处方购买。

我们建议您访问 [www.fda.gov/medwatch](http://www.fda.gov/medwatch) 或致电 1-800-FDA-1088, 报告处方药的不良反应。

Paragard 是 CooperSurgical, Inc 的注册商标。

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## Patient Package

Este panfleto también lo hay en español

## INFORMATION FOR PATIENTS

### Paragard® T 380A

#### Intrauterine Copper Contraceptive

**Paragard® T 380A Intrauterine Copper Contraceptive is used to prevent pregnancy. It does not protect against HIV infection (AIDS) and other sexually transmitted diseases.**

It is important for you to understand this brochure and discuss it with your healthcare provider before choosing Paragard® T 380A Intrauterine Copper Contraceptive (Paragard®). You should also learn about other birth control methods that may be an option for you.

#### What is Paragard®?

Paragard® is a copper-releasing device that is placed in your uterus to prevent pregnancy for up to 10 years.

Paragard® is made of white plastic in the shape of a "T." Copper is wrapped around the stem and arms of the "T". Two white threads are attached to the stem of the "T". The threads are the only part of Paragard® that you can feel when Paragard® is in your uterus. Paragard® and its components do not contain latex.



#### How long can I keep Paragard® in place?

You can keep Paragard® in your uterus for up to 10 years. After 10 years, you should have Paragard® removed by your healthcare provider. If you wish and if it is still right for you, you may get a new Paragard® during the same visit.

#### What if I change my mind and want to become pregnant?

Your healthcare provider can remove Paragard® at any time. After discontinuation of Paragard®, its contraceptive effect is reversed.

#### How does Paragard® work?

Ideas about how Paragard® works include preventing sperm from reaching the egg, preventing sperm from fertilizing the egg, and possibly preventing the egg from attaching (implanting) in the uterus. Paragard® does not stop your ovaries from making an egg (ovulating) each month.

#### How well does Paragard® work?

Fewer than 1 in 100 women become pregnant each year while using Paragard®.

The table below shows the chance of getting pregnant using different types of birth control. The numbers show *typical* use, which includes people who don't always use birth control correctly.

## Number of women out of 100 women who are likely to get pregnant over one year

Method of birth control	Pregnancies per 100 women over one year
No Method	85
Spermicides	26
Periodic abstinence	25
Cap with Spermicides	20
Vaginal Sponge	20 to 40
Diaphragm with Spermicides	20
Withdrawal	19
Condom without spermicides (female)	21
Condom without spermicides (male)	14
Oral Contraceptives	5
IUDs, Depo-Provera, implants, sterilization	less than 1

#### Who might use Paragard®?

You might choose Paragard® if you

- need birth control that is very effective
- need birth control that stops working when you stop using it
- need birth control that is easy to use

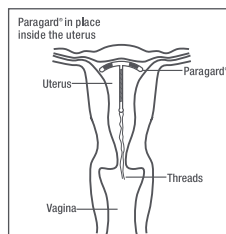
#### Who should not use Paragard®?

You should not use Paragard® if you

- Might be pregnant
- Have a uterus that is abnormally shaped inside
- Have a pelvic infection called pelvic inflammatory disease (PID) or have current behavior that puts you at high risk of PID (for example, because you are having sex with several men, or your partner is having sex with other women)
- Have had an infection in your uterus after a pregnancy or abortion in the past 3 months
- Have cancer of the uterus or cervix
- Have unexplained bleeding from your vagina
- Have an infection in your cervix
- Have Wilson's disease (a disorder in how the body handles copper)
- Are allergic to anything in Paragard®
- Already have an intrauterine contraceptive in your uterus

#### How is Paragard® placed in the uterus?

Paragard® is placed in your uterus during an office visit. Your healthcare provider first examines you to find the position of your uterus. Next, he or she will cleanse your vagina and cervix, measure your uterus, and then slide a plastic tube containing Paragard® into your uterus. The tube is removed, leaving Paragard® inside your uterus. Two white threads extend into your vagina. The threads are trimmed so they are just long enough for you to feel with your fingers when doing a self-check. As Paragard® goes in, you may feel cramping or pinching. Some women feel faint, nauseated or dizzy for a few minutes afterwards. Your healthcare provider may ask you to lie down for a while and to get up slowly.



#### How do I check that Paragard® is in my uterus?

Visit your healthcare provider for a check-up about one month after placement to make sure Paragard® is still in your uterus.

You can also check to make sure that Paragard® is still in your uterus by reaching up to the top of your vagina with clean fingers to feel the two threads. Do not pull on the threads.

If you cannot feel the threads, ask your healthcare provider to check if Paragard® is in the right place. If you can feel more of Paragard® than

just the threads, Paragard® is *not* in the right place. If you can't see your healthcare provider right away, use an additional birth control method. If Paragard® is in the wrong place, your chances of getting pregnant are increased. It is a good habit for you to check that Paragard® is in place once a month.

You may use tampons when you are using Paragard®.

### What if I become pregnant while using Paragard®?

If you think you are pregnant, contact your healthcare professional *right away*. If you are pregnant and Paragard® is in your uterus, you may get a severe infection or shock, have a miscarriage or premature labor and delivery, or even die. Because of these risks, your healthcare provider will recommend that you have Paragard® removed, even though removal may cause miscarriage.

If you continue a pregnancy with Paragard® in place, see your healthcare provider regularly. Contact your healthcare provider right away if you get fever, chills, cramping, pain, bleeding, flu-like symptoms, or an unusual, bad smelling vaginal discharge.

A pregnancy with Paragard® in place has a greater than usual chance of being ectopic (outside your uterus). Ectopic pregnancy is an emergency that may require surgery. An ectopic pregnancy can cause internal bleeding, infertility, and death. Unusual vaginal bleeding or abdominal pain may be signs of an ectopic pregnancy.

Copper in Paragard® does not seem to cause birth defects.

### What side effects can I expect with Paragard®?

The most common side effects of Paragard® are heavier, longer periods and spotting between periods; most of these side effects diminish after 2-3 months. However, if your menstrual flow continues to be heavy or long, or spotting continues, contact your healthcare provider.

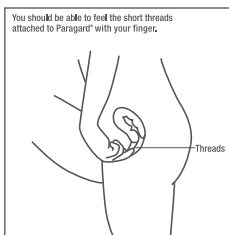
Infrequently, serious side effects may occur:

- Pelvic inflammatory disease (PID): Uncommonly, Paragard® and other IUDs are associated with PID. PID is an infection of the uterus, tubes, and nearby organs. PID is most likely to occur in the first 20 days after placement. You have a higher chance of getting PID if you or your partner have sex with more than one person. PID is treated with antibiotics. However, PID can cause serious problems such as infertility, ectopic pregnancy, and chronic pelvic pain. Rarely, PID may even cause death. More serious cases of PID require surgery or a hysterectomy (removal of the uterus). Contact your healthcare provider right away if you have any of the signs of PID: abdominal or pelvic pain, painful sex, unusual or bad smelling vaginal discharge, chills, heavy bleeding, or fever.
- Difficult removals: Occasionally Paragard® may be hard to remove because it is stuck in the uterus. Surgery may sometimes be needed to remove Paragard®.
- Perforation: Rarely, Paragard® goes through the wall of the uterus, especially during placement. This is called perforation. If Paragard® perforates the uterus, it should be removed. Surgery may be needed. Perforation can cause infection, scarring, or damage to other organs. If Paragard® perforates the uterus, you are not protected from pregnancy.
- Expulsion: Paragard® may partially or completely fall out of the uterus. This is called expulsion. Women who have never been pregnant may be more likely to expel Paragard® than women who have been pregnant before. If you think that Paragard® has partly or completely fallen out, use an additional birth control method, such as a condom and call your healthcare provider.

You may have other side effects with Paragard®. For example, you may have anemia (low blood count), backache, pain during sex, menstrual cramps, allergic reaction, vaginal infection, vaginal discharge, faintness, or pain. This is not a complete list of possible side effects. If you have questions about a side effect, check with your healthcare provider.

### When should I call my healthcare provider?

Call your healthcare provider if you have any concerns about Paragard®. Be sure to call if you



- Think you are pregnant
- Have pelvic pain or pain during sex
- Have unusual vaginal discharge or genital sores
- Have unexplained fever
- Might be exposed to sexually transmitted diseases (STDs)
- Cannot feel Paragard®'s threads or can feel the threads are much longer
- Can feel any other part of the Paragard® besides the threads
- Become HIV positive or your partner becomes HIV positive
- Have severe or prolonged vaginal bleeding
- Miss a menstrual period

### General advice about prescription medicines

This brochure summarizes the most important information about Paragard®. If you would like more information, talk with your healthcare provider. You can ask your healthcare provider for information about Paragard® that is written for healthcare professionals.

### Checklist

This checklist will help you and your healthcare provider discuss the pros and cons of Paragard® for you. Do you have any of the following conditions?

	Yes	No	Don't know
Abnormal Pap smear	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Abnormalities of the uterus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Allergy to copper	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anemia or blood clotting problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bleeding between periods	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cancer of the uterus or cervix	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fainting attacks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Genital sores	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heavy menstrual flow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV or AIDS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Infection of the uterus or cervix	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
IUD in place now or in the past	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
More than one sexual partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pelvic infection (PID)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Possible pregnancy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Repeated episodes of pelvic infection (PID)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Serious infection following a pregnancy or abortion in the past 3 months	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Severe menstrual cramps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexual partner who has more than one sexual partner	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sexually transmitted disease (STD) such as gonorrhea or chlamydia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wilson's disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Cooper Surgical**

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