

Anticipated Pain During Intrauterine Device Insertion

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STUDY OBJECTIVE: To identify predictors of anticipated pain with intrauterine device (IUD) insertion in adolescents and young women. **DESIGN:** We performed linear regression to identify demographic, sexual/gynecologic history, and mood covariates associated with anticipated pain using visual analog pain scores (VAS) collected as part of a single-blind randomized trial of women receiving a 13.5 mg levonorgestrel IUD. **SETTING:** Three academic family planning clinics in Philadelphia PA. **PARTICIPANTS:** Ninety-three adolescents and young adult women age 14-22. **INTERVENTION:** Participants received either a 1% lidocaine or sham paracervical block. **MAIN OUTCOME MEASURES:** Anticipated pain measured using a Visual Analog Scores (VAS) before and perceived pain at 6 time points during the IUD insertion procedure. **RESULTS:** Black or African-American participants had a median anticipated pain score of 68 (IQR 52, 83), White participants had a median anticipated pain of 51 (IQR 35, 68), while participants of other races had a median anticipated pain score of 64 (IQR 36, 73); $p=0.012$. In multivariate analysis, race was the only covariate that significantly predicted anticipated pain at IUD insertion. Women with anticipated pain scores above the median had significantly higher perceived pain during all timepoints of the IUD insertion procedure. **CONCLUSIONS:** Increased anticipated pain is associated with increased perceived pain with IUD insertion. Black adolescent women experience greater anticipated pain with IUD insertion. This population may benefit from counseling and clinical measures to reduce this barrier to IUD use.

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