

Emergency Contraception



This information sheet focuses on the two emergency contraceptive pills. For more information about using a copper IUD as emergency contraception, please see the Intrauterine Devices information sheet available on our website.

What is it?

Emergency contraception (EC) is used to reduce the risk of pregnancy when:

- sex has occurred without contraception
- contraception may have failed e.g. missed pill(s) or condom breakage
- sexual assault has occurred.

There are three methods of EC available:

1. The copper intrauterine device (IUD) is the most effective form of EC, preventing more than 99% of expected pregnancies if inserted within 5 days of unprotected sex. Copper IUDs must be inserted by a trained health professional.
2. The most common type of EC is a single dose pill containing the hormone levonorgestrel (LNG). It is available over the counter from pharmacies.
3. The newest type of EC is a single dose pill, containing ulipristal acetate (UPA). It is also available over the counter from pharmacies.

Emergency contraceptive pills (ECPs)

How do they work?

Both types of ECPs work by preventing or delaying ovulation (release of an egg from the ovaries). ECPs do not cause an abortion and current evidence suggests that ECPs do not adversely affect a developing embryo or foetus. There is no evidence to suggest any long term effects from taking the ECP over multiple menstrual cycles.

How effective are they?

The **LNG pill** is best at preventing unplanned pregnancies if taken within the first 3 days (72 hours) of unprotected sex, but can still offer some effectiveness for up to 4 days (96 hours).

After taking the LNG pill, those continuing to use hormonal contraception are advised to use other precautions (i.e. condoms) for 7 days. Discuss this with a doctor or pharmacist.

The **UPA pill** can be taken up to 5 days (120 hours) after unprotected sex. It is considered to be more effective (than the LNG pill) for those who are between 3-5 days after unprotected sex or have a body weight over 70kg.

Hormonal contraception can reduce the effectiveness of the UPA pill, so **should not** be used for 5 days after taking the UPA pill. People are advised to use condoms during this time. Those wishing to continue or commence with a hormonal contraceptive method after the 5 days should continue to use condoms until their contraceptive choice becomes effective. Discuss this further with a doctor.



The different types of ECPs should not be used in the same menstrual cycle as each other. Repeated use of the UPA pill in the same cycle is not recommended, though the LNG pill can be repeated after 12 hours if needed.

Some medications, including certain anti-epileptic medications, can reduce the effectiveness of ECPs, so discuss this with a doctor or pharmacist.

Who can take ECPs?

There is no legal age limit to obtain EC in WA. Almost everyone can take one of the ECPs, but it is important to let a doctor or pharmacist know of any allergies or serious medical conditions.

Those who breastfeed are advised to talk to a doctor or pharmacist.

How to take an ECP

Both ECPs come in a single tablet pack, which should be taken as soon as possible after unprotected sex.

If vomiting occurs less than 2 hours after taking the LNG pill, or less than 3 hours after taking the UPA pill, another dose should be taken. If vomiting occurs after this time, there is no need to take another dose.

Side effects of ECPs

Both ECPs are very safe, with no serious or long-lasting side effects. Possible side effects usually only last 48 hours and generally do not require treatment. These may include breast tenderness, pelvic pain, headaches, nausea, fatigue, dizziness and spot bleeding.

How to know if the ECP has worked for you

Most people have a period at about the expected time, but taking an ECP may result in a period starting earlier or later than expected.

It is **advised** that you do a home pregnancy test 3-4 weeks after taking the LNG pill or UPA pill, even if you have bleeding that seems to be your period.

It is **essential** that you do a pregnancy test if:

- your period is more than 7 days late, or
- your period is different in any way, or
- you have started another form of contraception, or
- you have had a copper IUD inserted as emergency contraception, or
- you have been advised to do so by a doctor or pharmacist.

While most people do not need a follow-up appointment after taking an ECP, contact SHQ or a doctor if:

- you have any other concerns
- you wish to discuss your ongoing contraceptive needs - ECPs do not provide ongoing contraception
- you do a pregnancy test and the result is positive.

Ectopic pregnancy

If the EC method is not successful in preventing a pregnancy and unusual pain or bleeding occurs, it is important to see a doctor to make sure there is no ectopic pregnancy (a pregnancy that develops outside the uterus, usually in a fallopian tube). An ectopic pregnancy requires urgent medical attention at the nearest hospital emergency department.

Where to get ECPs

ECPs are available over the counter at most pharmacies and prices may vary (the cost of the UPA pill is higher than the LNG pill). There are several different brand names for the LNG pill, including Postinor® and Postrelle®, but they are all the same medication. The UPA pill is available under the brand name EllaOne®.

Before you can be given an ECP, you will be asked a few questions to assess your risk of pregnancy and your medical history.

Emergency contraception does not protect against sexually transmissible infections (STIs), so you may want to get tested if you've had unprotected sex.

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