



Emergency Contraception Pills

PATIENT EDUCATION SERIES

What are Emergency Contraception Pills?

Emergency Contraceptive pills (ECPs) contain hormones which may inhibit or delay ovulation, or alter the lining of the uterus to prevent implantation. The effectiveness of ECPs in preventing pregnancy is over 90%. Studies have shown that ECPs can be effective up to 5 days (120 hours) following intercourse, although for maximum effectiveness they should be taken as soon as possible. This is usually the next day if intercourse is in the evening/night. There are several different brands available; levonorgestrel (Plan B), is available without a prescription to persons 17 years and older and by prescription to women under 17. At Health Services we generally recommend/prescribe Plan B, which contains only progestin and is less likely to cause the nausea and cardiovascular side effects which are sometimes associated with the “combination” emergency contraceptive pills (which contain both progestin and estrogen). If you are using a different brand, your provider will discuss dosing and possible side effects.

The staff at Health Services believes that all sexually active persons deserve to have safe birth control methods available to them. We believe that emergency contraception should not be used as routine method of birth control but should be available in the event of method failure, sexual assault, or failure to use contraception.

Side Effects of ECPs

Plan B is generally well tolerated. Side effects are not common, but nausea, abdominal pain, fatigue, mild headache, dizziness, diarrhea, and vomiting have been reported. In the unlikely event that vomiting occurs within one hour of taking the ECP, call Health Services as you may need to take additional pills to make up for those lost to vomiting. Call Health Services if you are experiencing any severe side effects.

After You Take ECPs

Your next menstrual period should begin sometime within 2 to 3 weeks after taking ECPs. It may be earlier or later than usual and the flow may be heavier, lighter, or more spotty than usual. If your period doesn't start within 3 weeks, see your medical provider to rule out pregnancy. Although use of ECPs reduces the risk of pregnancy substantially, it is still less effective than consistent use of other contraceptive methods and is intended specifically for emergency use. After you have taken ECPs, get started on an ongoing method of birth control. In addition, consider being evaluated for sexually transmitted diseases, if there is a possibility that unprotected sex puts you at risk. ECPs do not prevent sexually transmitted diseases.

Although no birth defects have been reported in cases where emergency contraceptives have failed and the pregnancy was continued to term, there have not been enough births to permit any definitive conclusions. Abortion remains an option if pregnancy occurs.

ECPs do not prevent ectopic pregnancies (implantation outside the uterus). This is a medical emergency. Seek medical attention immediately if you have severe pain on one or both sides of the lower abdomen, often associated with feeling faint.

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