



GEDEON RICHTER

EMERGENCY CONTRACEPTION



- If **restarting regular hormonal contraception** immediately after emergency contraception, patients should use a **barrier method** (condoms) or avoidance of sex should be advised.
- The **length of time a barrier method is required** for protection **depends on the method** of emergency contraception used.

Warnings & Precautions for use of Emergency Contraception^{1,2}

- If vomiting occurs **within 3 hours** of taking an Emergency Contraceptive tablet, another tablet should be taken immediately
- Emergency contraception is an **occasional method**. It should in no instance replace a regular contraceptive method
- Concomitant use of **UPA** or **LNG** in one menstrual cycle is not recommended
- Emergency contraception **does not prevent a pregnancy in every instance**
- Women who present for **repeated courses of emergency contraception** should be advised to consider long-term methods of contraception
- Use of emergency contraception **does not replace the necessary precautions against sexually transmitted diseases**

Levonorgestrel LNG (Prevenelle®)¹

- **Levonorgestrel LNG** (Prevenelle®) prevents ovulation and fertilisation if intercourse has taken place in the preovulatory phase, when the likelihood of fertilisation is the highest
- LNG **does not contraindicate** the continuation of **regular hormonal contraception**
- After taking Prevenelle® it is recommended to **use barrier methods** or abstain from sex until the next menstrual period starts

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Ulipristal acetate UPA (ellaOne®)

- **Ulipristal acetate (UPA)** (ellaOne®) is a selective progesterone-receptor modulator. Its mechanism of action is to delay ovulation until sperm from unprotected sex are no longer viable³
- Unlike Levonorgestrel (LNG) UPA **binds to progesterone receptors** & may **reduce the efficacy of progestogen-containing contraceptives**⁴
- After taking UPA, a patient **should not start a hormonal contraceptive method for at least 5 days** & should use barrier methods or abstain from sex until effective hormonal contraceptive cover has been achieved³ – **see guidance below:**

	Methods	Requirement for additional contraceptive cover
UPA then wait at least 5 days	Combined oral contraceptive pill (except Qlaira®)	7 Days
	Qlaira® Combined oral contraceptive pill	9 Days
	Combined vaginal ring/ transdermal patch	7 days
	Progestogen-only pill (traditional/ desogestrel)	2 Days
	Progestogen-only implant or injectable	7 Days

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