

Editorial

Emergency Contraception Editorial Commentary

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Emergency contraception is method of contraception that helps to prevent unintended and unplanned pregnancies after unprotected sex and before the implantation. This contraceptive method includes either the use of Emergency Contraceptive Pills (ECPs) levonogestrel in a single dose 1.5mg, ulipristal acetate in a single pill containing 30mg or Copper-containing IUDs [1,2]. The recommendation timeframe to use the emergency postcoital contraception is as following: levonogestrel pills should be taken within 72 hours, ulipristal acetate pills are indicated up to 120 hours and Copper-containing IUDs may be insert intrauterine up to 5-7 days after unprotected intercourse respectively [1,2]. The exact mechanism of action of EC is not yet clear, but theoretically it can affect follicle maturation, ovulation process, quality of cervical mucus, fertilization, zygote development and transport. Also, the mechanism of action varies depending on the formulation, but also for the same formulation depends on the time of receipt in relation to sexual contact and ovulation. Time

range the effectiveness of emergency contraception decreases as long as the time elapses from sexual intercourse to the start of treatment. A sexual contact is considered unprotected when one of the following occurs: Failure to use a contraceptive method, Condom breaking or leakage, Displacement of contraceptive diaphragm or cervical cap, Do not intake a contraceptive pill on the 1st week, Do not intake 3 or more contraceptive pills on the 2nd or 3rd week, Do not intake a progestogen pill, Detachment of a contraceptive patch, Delay of Depo-Provera injection over 2 weeks, Ejaculation in the external genitalia, Sexual abuse of a woman who does not use a reliable contraceptive method. Contraindications There are no absolute contraindications to EC, except for pregnancy, and this is because it is effective. Recent studies have shown no teratogenic effects on the neonate or adverse outcome of pregnancy, and therefore it is not advisable to stop a possible pregnancy. Monitoring A pregnancy test should be recommended in women with no menstrual bleeding 21 days after taking EC. At the same time, a follow-up consultation may be provided for contraceptive methods and prophylactic screening for sexually transmitted diseases [3].

References

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