

ECEC european consortium for emergency contraception **Repeated use of emergency contraceptive pills** Summary of current recommendations

January 2025

Key messages

- Repeated use of emergency contraceptive (EC) pills is safe and effective, and women^A should not be denied access to them.
- EC pills are always safer than pregnancy and using them is more effective than not using any contraceptive method at all.
- There are special considerations for repeated use of EC pills in the same menstrual cycle.
- After taking EC pills, condoms should be used until the next period, or sex should be avoided; but if unprotected sex happens again, another dose of EC pills can be taken.
- EC pills are less effective than using a regular contraceptive method. Women should be counselled to understand this and be offered a choice of contraceptive options for ongoing protection against unplanned pregnancy. However, EC pills may be the only available or affordable option for some women, or the method they have chosen.

Introduction

Emergency contraception (EC) refers to methods of contraception that can be used after unprotected sex. The most common forms are EC pills (also known as *the morning after* pill) containing 30 mg of ulipristal acetate (UPA) or 1,5 mg of levonorgestrel (LNG). EC pills with a low dose of mifepristone (10 to 25 mg) are also available in a few countries. EC pills with LNG are registered and/or available in an estimated 147 countries, and EC pills with UPA are available or registered in an estimated 76 countries.¹

Sales and use of EC pills have grown in most parts of the world in the past decade.² Recent research findings^{3,4} as well as population surveys⁵ and anecdotal data,⁶ suggest that EC pills are used on multiple occasions by the same individuals. This has raised concerns about the safety, efficacy and long-term effects of such repeated use of a contraceptive that was initially developed and is indicated for occasional use.

This document provides a summary of what is known about repeated use of LNG and UPA EC pills. The summary is based on evidence-based recommendations detailed in publications of leading organizations in the field of global health and contraception:

- 1) World Health Organization (WHO), Medical eligibility criteria for contraceptive use (2015)⁷
- 2) WHO, Selected practice recommendations for contraceptive use (2016)⁸ and
- The Faculty of Sexual and Reproductive Healthcare (FSRH), Clinical guideline: emergency contraception (2023)⁹

A. In this document the word 'woman' (and associated pronouns she/her) is used to describe all people who can get pregnant.

WHO is updating the *Medical eligibility criteria for contraceptive use* and the *Selected practice recommendations for contraceptive use* in 2025. Any change in EC recommendations will be updated in this factsheet once these updated editions are released.

This document is aimed at EC pill users, advocates, the general public, pharmacists, and policy makers, as well as journalists and social network content developers, who play an increasingly critical role in informing the general population. Understanding how EC pills work, including how they work when used repeatedly, is important to avoid overestimating their effectiveness¹⁰ and to advise women on how to best use them.

EC pills are sold under many different brands. ECEC recommends identifying in the EC package or patient leaflet what the active ingredient in the pill they are using is (levonorgestrel or ulipristal acetate), as this has implications for the recommendations for repeated use.

Repeated use of emergency contraceptive pills

Currently there is no formal or standardized definition of 'repeated use' of EC pills. This generally refers to a person taking an EC pill more than once and can include multiple situations, such as:

- Taking an EC pill on two or more occasions in one's lifetime
- Taking an EC pill on two or more occasions within the same menstrual cycle
- Taking EC pills as 'on-demand' contraception, for example at each time of having unprotected sexual intercourse

According to WHO, there are no medical reasons to avoid repeated use of EC pills,¹¹ although no distinction is made between different types of repeated use. Limited evidence suggests that EC pills do not become less effective when used repeatedly. Although EC pills are labelled for single use, taking them more than once does not pose any known health risks, even if it is within the same menstrual cycle.

Special considerations for repeated use within the same menstrual cycle

EC pills work by delaying or preventing ovulation; therefore, a woman is highly likely to ovulate a few days after taking an EC pill, and she could get pregnant if she has unprotected sex again.¹² Using condoms or avoiding sex after EC pills is strongly recommended; but if unprotected sex happens again, the woman is at risk for pregnancy and another dose of EC pills can be taken. In this case, following these recommendations is advised:

- If a woman has unprotected sex within 24 hours of taking an LNG or UPA EC pill, she does not need to take an EC pill again. This is because LNG and UPA remain active in the body during this time.^{13,14}
- After 24 hours, and within the same cycle, she can take a repeated dose as follows:
 - If a woman has already taken a UPA EC pill, she can take another UPA EC pill.¹⁵
 - If a woman has already taken an LNG EC pill, she can take another LNG-EC pill.¹⁶

In the first 5 to 7 days after taking EC pills, she should not combine types of EC pills because the LNG could interfere with the UPA's action to delay ovulation.¹⁷

The effectiveness of EC pills depends on the timing of a woman's ovulation in relation to when she had unprotected sex. Depending on the time in her cycle EC pills are taken, these may postpone (delay) ovulation or may inhibit it (suspend till the next cycle). For the user of EC pills, it is not possible to know if ovulation was postponed or inhibited, and therefore, using EC pills again is recommended if unprotected sex happens again within the same menstrual cycle.

Other recommendations and facts

- Women who choose to repeatedly use EC pills may benefit from contraceptive counselling regarding the range of contraceptive options available.¹⁸
- For women with certain conditions^B that prevent them from using hormonal contraception, frequent and repeated use of EC pills is not recommended.¹⁹ However, there is currently no definition of 'frequent' repeated use.
- Using a condom or abstaining from sex until the next period is recommended after EC pill use. But if unprotected sex happens again after 24 hours, EC pills can be used again.²⁰
- Ongoing hormonal contraception can be started (or resumed) right after intake of LNG EC pills²¹, but it may not be effective right away. Individuals need to use a condom or abstain from sex for 7 days from starting (or resuming) their ongoing hormonal contraception.
- If UPA EC pills were used, it is recommended to wait 5 days before using (or resuming) an ongoing hormonal contraceptive.²² Individuals should be advised to use a condom or abstain from sex) during this time, plus an additional 7 days once an ongoing contraception is started (or approximately for a total of 2 weeks from the time UPA was taken).
- EC pills do not cause ectopic pregnancies.²³
- Using EC pills does not affect a woman's long-term fertility.²⁴
- Repeated use of EC pills does not cause health risks, but it can result in menstrual irregularities.²⁵
- A double dose (3 mg) of LNG EC pills can be taken in certain instances. This is recommended if a woman is taking specific enzyme-inducing drugs²⁶. The FSRH recommends either this dose or UPA EC pills for women with higher weight (>70 kg) or body mass index (>26 kg/m²)²⁷.
- Taking a double-dose of UPA-EC pills is not currently recommended.²⁸
- Repeating a dose of EC pills is recommended if vomiting occurs within 2 hours of taking LNG EC pills, or 3 hours of taking UPA EC pills.²⁹
- There is currently no literature on the side effects or adverse events following long-term use of EC pills over multiple years.
- WHO and the FSRH do not provide recommendations related to repeated use of mifepristone (10 mg – 25 mg) EC pills.

B. Conditions include cardiovascular diseases, acute venous thromboembolism, liver tumour, breast cancer, unexplained vaginal bleeding, breastfeeding and 6 weeks postpartum, use of medications (certain anticonvulsants, rifampicin/rifabutin), and high hypertension.

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References	
1	European Consortium for Emergency Contraception (ECEC) (n.d.). Emergency contraception in the world. https://www.ec-ec. org/emergency-contraception-in-the-world/, accessed 27 November 2024.
2	ECEC (2023). (Factsheet). Emergency contraception pills sales in low- and middle-income countries: Data from social marketing programs August 2023. Available at https://www.ec-ec.org/wp-content/uploads/2023/08/DKT-ECEC-White-Paper-Final-Digital-081723-1.pdf, accessed 29 November 2024.
3	Odwe G, McCann B, Liambila W, Vandermark J, Mwanga D, Anab E, Wanami M, Ramarao S. Feasibility of e-commerce pharmacy provision and acceptability of levonorgestrel 1.5 mg for pericoital use in urban and peri-urban settings in Kenya: a prospective cohort study. BMJ Sex Reprod Health. 2023 Jan;49(1):35-42. doi: 10.1136/bmjsrh-2022-201653. Epub 2022 Nov 2. PMID: 36323492; PMCID: PMC9872235.
4	McCann B, Liang T, Ramarao S, Kuffour E, Ankomah A, Vandermark Moore J, Bruce H, Essandoh P, Boateng A. Feasibility and Acceptability of LNG 1.5 mg as an On-Demand Pericoital Contraceptive in Ghana. Stud Fam Plann. 2023 Sep;54(3):523-538. doi: 10.1111/sifp.12248. Epub 2023 Jul 18. PMID: 37464575.
5	International Institute for Population Sciences (IIPS) and ICF (2021). <i>National Family Health Survey (NFHS – 5), 2019-21: India: Volume 1</i> . Mumbai: IIPS.
6	ECEC (2024). Concerns over repeat use of emergency contraception pills. Available at https://www.ec-ec.org/concerns- over-repeat-use-of-emergency-contraception-pills/, accessed 29 November 2024.
7	World Health Organization (WHO). Medical eligibility criteria for contraceptive use, fifth edition (2015). Available at https://iris. who.int/bitstream/handle/10665/172915/WHO_R?sequence=1, accessed 14 November 2024.
8	World Health Organization (WHO). Selected practice recommendations for contraceptive use, third edition (2016). Available at https://www.who.int/publications/i/item/9789241565400, accessed 25 November 2024.
9	Faculty of Sexual and Reproductive Health (FSRH) (2017). Clinical guideline: emergency contraception. March 2017 (Amended July 2023). Available at https://www.fsrh.org/Common/Uploaded%20files/documents/fsrh-guideline-emergency-contraception03dec2020-amendedjuly2023-11jul.pdf, accessed 27 November 2024.
10	Gemzell-Danielsson K, Berger C, Lalitkumar PG. Mechanisms of action of oral emergency contraception. Gynecol Endocrinol. 2014 Oct;30(10):685-7. doi: 10.3109/09513590.2014.950648. Epub 2014 Aug 12. PMID: 25117156.
11	WHO (2015). Medical eligibility criteria for contraceptive use, 9.
12	FSRH. Clinical guideline: emergency contraception, 30.
13	Johansson E, Brache V, Alvarez F, Faundes A, Cochon L, Ranta S, Lovern M, Kumar N. Pharmacokinetic study of different dosing regimens of levonorgestrel for emergency contraception in healthy women. <i>Human Reproduction</i> 2002;17(6):1472-6.
14	FSRH, 28.
15	FSRH, 27.
16	FSRH, 27.
17	FSRH, 28.
	WHO (2015), 72.

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19 WHO (2021). Emergency contraception. Fact sheet. Available at https://www.who.int/news-room/fact-sheets/detail/ emergency-contraception, accessed 20 November 2024. 20 FSRH, 27-28. **21** FSRH, 31. **22** FSRH, 31 23 FSRH, 28-29. 24 FSRH, 29. **25** WHO (2021). Emergency contraception. Fact sheet. 26 FSRH, 16 **27** FSRH, 3. **28** FSRH, 3. **29** WHO (2016), 58-59.

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