

BC Women's Sexual Assault Service: Guidelines for Emergency Contraception

WITH THE PATIENT'S CONSENT THE FOLLOWING TREATMENT, IF INDICATED, WILL BE OFFERED TO ALL FEMALE SEXUAL ASSAULT SURVIVORS

INDICATION FOR TREATMENT	TREATMENT OF CHOICE	PATIENTS WHO ARE AT RISK FOR PREGNANCY INCLUDE:	CONTRAINDICATIONS	PATIENT TEACHING
<p>Post-coital contraceptive treatment offered to women who are at risk (see RISK column) for unwanted pregnancy within 5 days of unprotected vaginal/penile contact.</p>	<p>Levonorgestrel (Plan B). 1.5 mg P.O (2 x 0.75 mg tabs or 1 x 1.5 mg tab). Nausea & vomiting are uncommon with Levonorgestrel (Plan B).</p> <p>Women weighing greater than 75 kg or women presenting greater than 5 days after the sexual assault, should be offered Plan B and referred to an IUD insertion clinic for emergency contraception. A copper IUD can be inserted up to 7 days following a sexual assault.</p>	<p>1. Patients who experience any form of vaginal/penile contact during an assault and who were not using any form of birth control at the time. This includes patients menstruating at the time of assault.</p> <p>2. Patients with poor compliance on their hormonal contraceptive (e.g., missed pills).</p> <p><u>Patients who are not at risk for pregnancy include:</u></p> <p>Those who are:</p> <ul style="list-style-type: none"> • post menopausal (no menses in at least one year) • post hysterectomy • post tubal ligation • compliant with their hormonal contraceptives • patients with an IUD in place • patients who did not experience any form of vaginal/penile contact during the assault. 	<p>1. Levonorgestrel (Plan B) is not contraindicated in pregnancy but will simply not work. Plan B is NOT an abortifacient.</p> <p>2. Contraindications to IUD insertion would include an existing pregnancy, among others. The remaining contraindications can be assessed by the clinician/service offering IUD insertion.</p>	<p>1. Warn patients that, although it is uncommon, Levonorgestrel (Plan B) may cause nausea and vomiting. If she vomits the pills within one hour after taking them she should take an additional dose, preferably with food. (If Plan B is given in a timely manner in exam, that hour should pass while the patient is still in our care).</p> <p>1. After taking Levonorgestrel (Plan B), the patient may experience unusual or unexpected bleeding. Bleeding can also occur in early pregnancy. Advise the patient to get a pregnancy test at 10 days to four weeks post assault, whatever her bleeding pattern.</p> <p>3. If the patient has been non-compliant on her hormonal method of birth control, and has now chosen to take Plan B, she should continue her hormonal method as originally directed. Instruct the patient to use condoms plus her own hormonal method for 7 days after she takes Plan B.</p> <p>4. Interactions between Plan B & antibiotics are unlikely. Plan B & STI medications can and should be given together.</p> <p>NOTE: While effectiveness of PLAN B decreases with time passed since coitus, there may be some degree of benefit if taken up to 5 days post exposure. Therefore you may offer Plan B up to 5 days after the assault, (provided you explain the more limited benefit after 72 hours).</p> <p>As of Feb 2008 the BC Centre of Excellence pharmacy finds NO drug interactions between HIV PEP, Plan B or the STI medications administered by BCW SAS.</p>

