



The morning-after pill

AND ALSO a range of other means and methods that do NOT provide adequate protection when used on their own.

These include **gels and pessaries** that kill sperm or reduce their mobility. **Special little computers** can be used to help calculate when ovulation is due, but such devices tend not to be accurate enough to rely on.

One very reliable method of contraception is **sterilisation**. In women this requires surgery to cut or clamp the fallopian tubes. In men the sperm ducts are snipped or closed off with clips. This step is one that needs to be thought about carefully and should not be considered until your family is complete.

Further Information

Further information about contraception can be found in the leaflet **"Safe and Sure – Contraception for Her and Him"** (Order No. 13060070).



An overview of contraception in the poster **"Verhütung im Überblick"** (Order No. 13062000).



Further material by the Federal Centre for Health Education (BZgA) can be found in the Media Overview **"Sexualaufklärung und Familienplanung – Medien und Materialien"** (Best.-Nr. 13010000) and online at www.sexualaufklaerung.de

Lots of information on these issues as well as on pregnancy and childbirth can be found at www.familienplanung.de

The booklet, poster and leaflets can be obtained free of charge from the **Federal Centre for Health Education (Bundeszentrale für gesundheitliche Aufklärung – BZgA)**, 50819 Köln or online from order@bzga.de

BARRIER METHODS all consist of a latex or silicon cap that seals off the cervix and so prevents sperm from reaching the egg. Variations include the diaphragm and the FemCap®.

HOW IT WORKS/RELIABILITY: The FemCap® has to be individually fitted by a doctor. The diaphragm comes in one size. Shortly before intercourse, the woman inserts the cap into the vagina and fits it in front of the cervix, so that no sperm can get in. When used correctly and in conjunction with spermicidal or anti-sperm gels, the diaphragm is reliable. The reliability of the FemCap® depends on it being used correctly.

+ PROS: Barrier methods generally have no side effects.

- CONS: Using barrier methods in a way that provides reliable contraception takes practice and experience.

NATURAL FAMILY PLANNING METHODS make use of the (un)fertile days in a woman's cycle. They include daily monitoring of basal body temperature and monitoring of cervical mucus.

HOW IT WORKS/RELIABILITY: The basal body temperature goes up after ovulation, so charting this makes it possible to identify the unfertile days that follow ovulation. The same goes for daily monitoring of cervical mucus (cervix = neck of the womb), which becomes wetter shortly before ovulation. Both methods need the woman to be very familiar with her own body. Natural family planning methods are a relatively reliable form of contraception when used correctly and supplemented with condoms on fertile days.

+ PROS: No side effects. Promotes body awareness and women often become more conscious of their own fertility.

- CONS: Natural family planning requires daily discipline and the use of an additional method of contraception (eg. condoms) or abstinence.

THE VAGINAL RING is a flexible plastic ring that releases hormones. The woman inserts it into her vagina, where it stays for three weeks; in the fourth week the woman has a period.

HOW IT WORKS/RELIABILITY: A vaginal ring fits any vagina and can't be felt during sex. A low dose combination of oestrogen and progesterone suppresses ovulation and prevents sperm from getting into the womb. It is very reliable.

+ PROS: Easy to use. Once you've put it in you don't have to think about contraception for three weeks. Diarrhoea and vomiting can't stop it from working.

- CONS: As with all hormonal contraceptives, there may be side effects such as headaches, vaginal infections and increased discharge. The risk of thrombosis is higher than with the pill.

THE CONTRACEPTIVE PATCH releases a combination of oestrogen and progesterone. It is applied to the abdomen or bottom and is changed weekly. After three weeks there is a "patch-free" week when the woman has a period.

HOW IT WORKS/RELIABILITY: The hormones suppress ovulation and make it difficult for sperm to reach the womb. The patch generally stays on well, including in the sauna or swimming pool. It is very reliable.

+ PROS: Highly reliable, without the need to think about contraception on a daily basis. Diarrhoea and sickness can't stop it from working.

- CONS: As with any hormonal contraception, there may be some unwanted side-effects. Its effectiveness may be reduced in women who weigh more than 90 kg. The risk of thrombosis is higher than with levonorgestrel pills.

THE HORMONAL COIL is made of plastic and contains a small reserve of hormones. It is inserted into the womb by a doctor and can be left in for up to five years.

HOW IT WORKS/RELIABILITY: The hormonal coil prevents the build up of the womb lining and makes it difficult for sperm to reach the egg.

+ PROS: Extremely reliable form of contraception. Women who have heavy periods often find that the coil makes their periods lighter.

- CONS: Many users report irregular periods. It should not be the method of choice for women who have not given birth.

THE CONTRACEPTIVE IMPLANT is a flexible rod containing the hormone progesterone that, using an applicator, is inserted just under the skin of the upper arm, by a specially trained doctor.

HOW IT WORKS/RELIABILITY: The implant suppresses ovulation and makes it harder for sperm to get into the womb. It is a very reliable form of contraception.

+ PROS: The implant works for up to 3 years, so you don't have to think about contraception all that time.

- CONS: More than 10 per cent of users experience unwanted side effects. These include nausea and vomiting, acne, headaches, weight gain, loss of libido etc.

THE QUARTERLY INJECTION contains the hormone progesterone and is injected into the muscle in your bottom. It is only suitable for women who cannot tolerate other methods or who can't take pills.

HOW IT WORKS/RELIABILITY: The progesterone suppresses ovulation and prevents the sperm from getting into the womb. It provides a very high level of contraceptive protection.

+ PROS: Protects against pregnancy for 3 months after each injection.

- CONS: Side effects may include breakthrough bleeding, headaches, anxiety, depression and weight gain.

CONDOMS are usually made from latex and are rolled on to the erect penis.

HOW IT WORKS/RELIABILITY: Condoms prevent sperm from getting into the vagina. When put on correctly, they stay firmly in place. To keep it in place after ejaculation, the condom must be gripped around the base of the penis when withdrawing the penis from the vagina. When used correctly, and in the correct size (see www.kondometer.de) condoms are a safe method of contraception.

+ PROS: With the exception of rare latex allergies, condoms have no side effects. They are also the only method of contraception that reduces the risk of contracting a sexually transmitted infection or HIV.

- CONS: Stopping to roll a condom on to the erect penis momentarily interrupts the the flow of sex. Some women find it difficult to ask their partner to protect them by wearing a condom.

THE COIL is a small, T-shaped plastic device, wound round with very thin copper wire. It is inserted into the womb by a doctor and can be left in for up to 5 years.

HOW IT WORKS/RELIABILITY: The coil is thought to act as a long-term irritant in the uterus, preventing implantation of any fertilized egg. The copper also impairs the sperm's mobility. Exactly how it works is not entirely clear. It is a very reliable method of contraception.

+ PROS: For as long as the coil remains in the uterus, there's no need to think about contraception at all. It is particularly suitable for women who have already had a baby.

- CONS: In the rare event that a pregnancy occurs despite a coil being fitted, there is an increased risk of miscarriage. The coil can make periods heavier and period pain worse. During the first few months there is a higher risk of pelvic infection, especially for girls and young women.

THE PILL usually contains a combination of the hormones oestrogen and progesterone and must be prescribed by a doctor. Some versions are notable for containing particularly low levels of hormones.

HOW IT WORKS/RELIABILITY: The pill works mainly by preventing ovulation – no egg means no conception. The pill is taken every day for 21, 22 or 24 days in a row (depending on the formulation), and then you will usually have a period. When used correctly the pill is almost 100% effective from day one.

+ PROS: Extremely reliable form of contraception. For those under 20 the cost is covered by Statutory Health Insurance Funds (a contribution is payable from the age of 18).

- CONS: The pill does have some possible side-effects. These include nausea and vomiting, weight gain, loss of libido etc. There is also an increased risk of thrombosis, especially for smokers.

THE MINIPILL contains just one hormone - either levonorgestrel or desogestrel.

HOW IT WORKS/RELIABILITY: The minipill must be taken at as close as possible to the same time each day in order to provide effective contraceptive protection. It works by thickening the mucus in the cervix so that sperm cannot get through into the uterus. It also stops the womb lining from thickening enough, making it difficult for a fertilized egg to implant. The hormone desogestrel also tends to stop ovulation and so offers even better contraceptive protection.

+ PROS: The minipill generally has fewer side effects than the combination pill. This makes it particularly suitable for women who cannot tolerate oestrogen, and the minipill is also recommended for women who are breastfeeding and yet still want to use a hormonal contraceptive.

- CONS: The levonorgestrel minipill will not provide effective contraceptive protection if it is taken more than 3 hours late. The desogestrel minipill stops being effective if taken more than 12 hours late. The minipill can cause headaches, acne, breast tenderness, nausea and irregular periods.

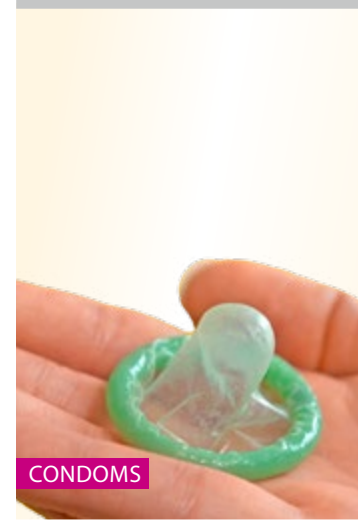
Contraception Overview

The pill and condoms are the most commonly used methods of contraception, but there are other methods that are also very reliable. Which option is best for you will depend on your current life circumstances and your personal needs.

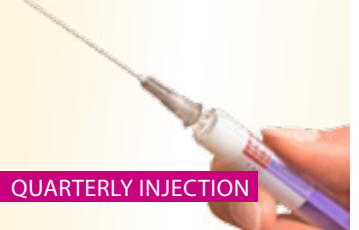
Your doctor can explain any potential health risks. Advice on choosing a suitable method of contraception is also available at advice centres.



THE PILL/MINIPILL



CONDOMS



QUARTERLY INJECTION



VAGINAL RING



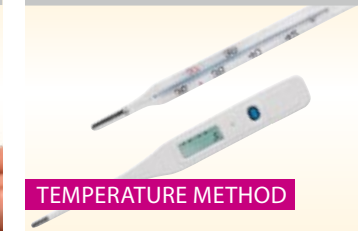
THE COIL



CONTRACEPTIVE PATCH



THE FEMALE CONDOM



TEMPERATURE METHOD



HORMONAL COIL



FEMCAP



GEL



CERVICAL MUCUS MONITORING



HORMONAL IMPLANT



DIAPHRAGM



PESSARIES



COMPUTER



Contraceptive failure can happen

A pill is easily forgotten at times of stress, condoms can break or slip off. Sometimes contraception gets forgotten altogether in the heat of the moment.

If the mishap occurs a few days before or during the woman's fertile days, there is a possibility that she will become pregnant. The man's sperm can survive in the womb and fallopian tubes for up to five days. If the woman ovulates during that time, conception may occur up to 5 days after unprotected sexual intercourse – and in very rare cases up to 7 days afterwards.

If your contraception keeps failing you, you should consider whether a different method of contraception might suit you better. (→ [see overview leaf for an overview of the options.](#))

Emergency contraception

After unprotected sex there is the option of taking "the morning-after pill". There are various formulations with different active ingredients: either levonorgestrel or ulipristal acetate. Pills that have levonorgestrel as the active ingredient may be taken up to 72 hours (3 days) after unprotected sex. Those containing ulipristal acetate may be taken for up to a maximum of 120 hours (five days) afterwards. After more than 120 hours it is too late to take the morning-after pill.

However, the morning-after pill can ONLY reliably prevent an unwanted pregnancy if it is taken BEFORE OVULATION takes place.

That is why it is so important to take the morning-after pill **as soon as possible** after unprotected sex.

! The morning-after pill is not a method of contraception for regular or long term use, but is for use in a contraceptive emergency.

How does the morning-after pill work?

Both versions work by suppressing or delaying ovulation. Pills containing levonorgestrel are effective if taken up to about two days before ovulation; versions containing ulipristal acetate are effective up to the day before ovulation. If ovulation is just about to happen or has already taken place, neither formulation will work. In order to get in ahead of ovulation, it's best to take the morning-after pill as soon as possible, preferably within 12 hours after unprotected sex. After that, the effectiveness drops significantly.

The morning-after pill does not work if ovulation has already happened and/or the fertilized egg has already implanted in the womb. The morning-after pill is therefore **not** an "abortion pill" (although it is often confused with one).

When shouldn't I take the morning after pill?

Women who are sensitive to levonorgestrel or ulipristal acetate or who react to one of the other ingredients in the tablet should not take the morning-after pill in question.

Women who have previously had inflammation of the fallopian tubes or an ectopic pregnancy must discuss with their doctor whether the morning-after pill is appropriate for them.

The morning-after pill is not recommended if you have liver function problems. It is also not recommended for those with severe asthma, if they are taking glucocorticoids.

How do I take the morning-after pill?

The morning-after pill is available in pharmacies without a prescription. Pharmacists can also give advice. For example, they might discuss whether there is any chance that you are already pregnant, how likely fertilization is and any contraindications or possible interactions with other medications.

All formulations involve one dose of a single tablet, preferably within 12 hours after the unprotected sex.

Before taking the pill it is a good idea to have a little something to eat (a piece of toast for instance), as taking it on an empty stomach can mean you risk vomiting the pill back up. If this happens in the first 3 hours after it was taken, a new tablet must be obtained and taken as soon as possible in order to ensure that it works.



What should I look out for after taking the morning-after pill?

After taking the morning-after pill you will normally get your period a few days later than expected, no heavier or lighter than normal. If you don't get your period within a week of when it was due, you must take a pregnancy test and see a doctor.

! You will need to use a non-hormonal method of contraception (eg. condoms) until your next period.

If you are on the contraceptive pill and decide to take the morning-after pill because you forgot to take a pill, you should continue to take your normal contraceptive pill until the end of the cycle BUT you will still need to use an additional non-hormonal method of contraception (such as condoms).

Are there any side effects?

Unwanted side effects of the morning-after pill are a possibility, but they are not usually severe. They include above all headaches, nausea and abdominal pain. Other possible side effects include breakthrough bleeding and spotting, breast tenderness, dizziness and vomiting.

! If you are in a lot of pain or are worried for any other reason, don't hesitate to seek medical advice.

What else do I need to know?

If you are taking other medication, such as certain antibiotics, medication for seizures (anti-epileptics) or HIV infections, anti-virals or products containing St. John's Wort, the morning-after pill may not work as well. Women who are taking regular medication or have recently taken something should discuss this with the pharmacist or see a doctor before taking the morning-after pill.

Being very overweight may also stop the morning-after pill from working properly.



Frequently Asked Questions

Some questions about the morning-after pill get asked again and again. The answers given here are no substitute for a personal consultation with a pharmacist or doctor. If you have any problems or further questions, please seek medical advice.

? *How and where can I get the morning-after pill?* The morning-after pill is available in pharmacies without a prescription. Pharmacists can also give advice.

Sometimes a particular pharmacy may refuse to dispense the morning after pill. If that happens, you can go to another pharmacy. At night or at the weekend there are local out-of-hours pharmacies available; you can find out about these online or over the phone.

? *How much does the morning-after pill cost?* Prices for the morning-after pill may vary, as there is no fixed retail price.

Even now that the morning-after pill has become available without prescription, Statutory Health Insurance Funds will still reimburse the costs for women under 20 years old who have statutory insurance. However, in order to be for the cost to be covered they must get the morning-after pill prescribed by a doctor. 18 and 19 year olds will have to cover the prescription charge themselves. Women under 20 may also buy the morning-after pill in a pharmacy without a prescription, but in this case they cannot claim the cost back from their insurer.

? *Do minors need to have their parents' permission?* Girls under 14 years old will need to have their parents' permission if they want to buy the morning-after pill or have it prescribed for them.

Between 14 and 18 years old, this is at the discretion of the pharmacist or doctor. In the consultation they will try to ascertain whether the girl is in a position to be able to handle the decisions and consequences of self-medication herself.

? *Is there a risk of unwanted pregnancy at any point in the monthly cycle?* In theory, yes. It's true that the likelihood of getting pregnant is highest when the unprotected sex happens a few days before or during ovulation, but it is possible for ovulation to be delayed without this being noticed. It is therefore quite possible to become pregnant during the usual monthly period. Anyone who wants to be completely certain of avoiding pregnancy after a contraceptive failure should therefore seek medical advice and consider taking the morning-after pill.

? *How can I tell if the morning-after pill is working?* You cannot always feel the effects of the morning-after pill – in many cases there are no side effects such as nausea and vomiting, headaches or abdominal cramps. Of course, that doesn't mean that the morning-after pill isn't working.

After taking the morning-after pill you will normally get your period a few days late, no heavier or lighter than normal. If you don't get your period within a week of when it was due, you must take a pregnancy test and see a doctor.

You can't make the morning-after pill more effective by taking two "pills" at once... more likely there is a risk of an overdose and worse side-effects.

? *What is "the morning-after coil"?* For up to 5 days after unprotected sex, it is possible to prevent implantation of a fertilized egg in the womb using a copper coil. A coil is fitted by a doctor and, as well as being an emergency measure, makes particular sense if the woman also wishes to use the coil for contraception going forward.

A coil costs between 120 and 300 euros depending on the model. The price includes the consultation, examination and fitting of the coil. Statutory Health Insurance Funds reimburse the cost up to the age of 20.

? *If I get my period after taking the morning-after pill, does that mean I am definitely not pregnant?* In general a period that comes more or less when expected (or a little later) and is no lighter or heavier than normal is a sign that you are not pregnant. However, having a period does not guarantee this with absolute certainty, because it is possible that this could have been breakthrough bleeding.

If your period is more than a week late or is unusually heavy or light, a pregnancy test should be taken no later than 3 weeks after taking the morning-after pill.

? *Does the morning-after pill provide enough contraceptive protection to last til the end of the cycle?* No. For the rest of the cycle (until your next period) you will need to use a non-hormonal method of contraception, such as condoms.

? *Can I also use the morning-after pill as a normal method of contraception?* No. The morning-after pill should only be used as an emergency measure.

? *How soon after taking the morning after pill can I start taking the normal contraceptive pill, if I've never used a hormonal contraceptive before?* Generally the first pill is taken on the first day of your next monthly period. The normal contraceptive pill has to be prescribed by a doctor, so this question is best answered by your doctor – especially if it is not clear when exactly your next period is due.

? *Mistakes with hormonal contraceptives: when is the morning-after pill an option?* The instruction leaflet for any hormonal contraceptive will provide information on when contraceptive protection is no longer reliable. This depends for example on the timing of the contraceptive failure in the pill-taking cycle (eg. in which week the pill was forgotten or when the vaginal ring slipped off).

It is a good idea to visit a pharmacy or doctor's surgery for advice as soon as possible after the unprotected sex. You can then work out together whether taking the morning-after pill is an option for you or not.

www.familienplanung.de/pille-vergessen

? *Can I take the morning-after pill if I am still breastfeeding?* With some restrictions, yes. The hormone levonorgestrel does pass into your milk. If you take a product that contains levonorgestrel, you should take it immediately after feeding your baby and then wait at least 8 hours before breastfeeding again.

For morning-after pills with the active ingredient ulipristal acetate it is recommended that you avoid breastfeeding for at least a week. In both cases, it is a good idea to express to keep up your supply. Any expressed milk will have to be thrown away.

Advice

Advice on anything relating to sexuality, contraception, family planning and pregnancy is available to all women and men free of charge at pregnancy advisory centres. If you find yourself conflicted about a pregnancy, these advice centres can help you to weigh up the pros and cons. The advisory centres can also advise you about possible financial support and other help that is available for families and children. They can also help with relationship difficulties that concern family planning.

The advisory centres operate with a duty of confidentiality. They can also give advice anonymously. Pregnancy advisory centres are supported by church associations, other welfare organizations and independent providers as well as by community health authorities.

i **Find an advisory centre near you in the telephone book, through social services or healthcare providers, or online at:**
www.familienplanung.de/beratungsstellensuche

If you find yourself in a situation where you feel you must terminate the pregnancy, one of the statutory requirements for legal termination of a pregnancy within the first 12 weeks is certification of participation in pregnancy counselling (Schwangerschaftskonfliktberatung) in a named pregnancy advice centre. Although Caritas and the social service of Catholic Women do offer pregnancy counselling, they do not issue such counselling certificates.

i **More on contraception and advice at**
www.familienplanung.de

ABOUT

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