

## What is “emergency contraception”?

“Emergency contraception” is the use of a drug or a device after intercourse to prevent pregnancy. Emergency contraception is promoted for use when a woman has been raped, when a couple has chosen to have intercourse without using any form of contraception, or when there is a suspected contraceptive failure. Types of emergency contraception include the Morning After Pill, the insertion of the copper-T Intrauterine Device (IUD) five to seven days after intercourse, or the use of the abortion drugs Danazol or Mifepristone (RU-486).

## What is the “Morning After Pill”?

The phrase “Morning After Pill” is used to describe a set of contraceptive pills taken *after* a sexual act, with the purpose of preventing pregnancy. There are many brands of the Morning After Pill, some containing progestins only, some with a combination of synthetic progestin and estrogen. Only one type of Morning After Pill, named “Plan B,” is currently being marketed in the United States.<sup>1</sup> Like many commercial contraceptives, it contains only a synthetic progestin. On August 24, 2006, the U.S. Food and Drug Administration approved Plan B for sale without a prescription to persons 18 years and older.

## How does the Morning After Pill work?

The Morning After Pill is made of the same chemicals (hormones) as oral contraceptive pills (OCPs), so it likely operates in the same ways in a woman’s body. It may inhibit or delay the release of the egg (ovulation), or it may impair the transportation of the sperm or the egg (although there is no clinical data to support these processes), thus inhibiting conception. Research findings have shown that the hormones used in OCPs have adverse effects on the lining of

the uterus. OCPs reduce the thickness of the uterine lining and also change certain organic compounds in the uterine lining, making it very difficult for the embryo to implant (attach itself to the mother’s womb) and develop.<sup>2,3</sup>

## What about other types of emergency contraception?

*Copper-T IUDs* affect the uterine lining in a way that makes the uterus hostile to the semen and/or the embryo, thus possibly preventing fertilization or implantation.

*Danazol and Mifepristone (RU-486)* destroy a new human life through chemical abortion.



**Remember that  
a new life is  
destroyed  
when implantation  
is prevented.**

If conception (fertilization) has already taken place, then the *only* way by which the IUD and the Morning After Pill can be effective is by preventing implantation. With currently available technology, there is no way for a woman or her doctor to know, when she takes these pills or the IUD is inserted, whether or not she has already conceived. A pregnancy test cannot give this information. Therefore, whenever these pills are taken or a copper-T IUD is inserted after sexual activity, there is the risk that a new human life will be destroyed.

## Does this mean that emergency contraception is an abortifacient—that it can cause an abortion?

A new human life begins at conception, also called fertilization. However, it is important to know how the medical community now uses these terms. In September 1965, the American College of Obstetricians and Gynecologists (ACOG) redefined “pregnancy” as beginning at the time of implantation, and not at the time of conception. Emergency contraception can cause the death of a newly formed human being by

preventing implantation. Since implantation occurs 5 to 7 days after conception, pills and devices that destroy a new human being by preventing implantation should be called “abortifacient” in spite of the medical definition from the ACOG.

## How effective is emergency contraception?

It is very difficult to measure the effectiveness of emergency contraception because a woman is only fertile during a few days of her menstrual cycle, and most women do not know whether they are in their fertile time or not. In some studies, scientists have provided free Morning After Pills to some women in a location but not to others, and compared the rates of unintended pregnancies. Other studies compared unintended pregnancy rates in certain locations before and after a change in the law made these pills easier to obtain. A review published in January 2007 of available research described 23 of these comparative studies.<sup>4</sup> This review found that women who received free packets of the Morning After Pill used it more often than others, but in spite of this increased usage, **“to date, no study has shown that increased access to this method [the Morning After Pill] reduces unintended pregnancy or abortion rates....”** Two of the studies, in fact, showed a **higher** rate of pregnancy with increased availability of the Morning After Pill.<sup>5,6</sup> One study involved giving five free packages of Morning After Pills to 17,831 women in one county of Scotland.<sup>7</sup> Abortion rates (an indicator of unintended pregnancy) in that county did not decrease, nor were they different from abortion rates in comparison counties that did not receive free Morning After Pills. **Overall, the evidence suggests that the Morning After Pill is not effective for preventing unintended pregnancies.**

We are not aware of any such comparative research that has been done on the IUD as an emergency contraceptive.

### **Warning!**

**Emergency contraception  
does not protect against  
STDs or HIV/AIDS.**

## How safe is emergency contraception?

Approximately 50% of the women who use the combined progestin and estrogen pills experience nausea and 20% have vomiting. Also, 23% of the women who use Plan B report nausea and 6% report vomiting. Both can cause headache, breast inflammation, tiredness, irregular bleeding, retention of fluids, abdominal pain, diarrhea, and dizziness.<sup>8</sup> The use of Plan B increases the risk of ectopic pregnancy.<sup>9</sup> Since the pills used for emergency contraception contain large doses of the same chemicals found in typical birth control pills, it is possible that they will increase the risk of health problems in the same way as OCPs. These risks include an increase in breast cancer,<sup>10</sup> cervical cancer, and liver cancer, as well as heart disease, stroke, peripheral vascular disease, other life-threatening illnesses,<sup>11</sup> and birth defects.<sup>12</sup>

Women who use the copper-T IUD can experience uterine cramps and other undesirable effects such as bleeding, infections, or perforation of the uterus.<sup>13</sup> More research and time are needed to know the long-term effects of emergency contraception.

## Are there other options?

If you are single, the surest way to avoid pregnancy or a sexually transmitted infection is abstinence, and it always works. If you are married, the modern methods of Natural Family Planning (NFP) are the safest, healthiest, and least expensive means for family planning.

Victims of rape or sexual abuse need and deserve the best medical care and human support possible. The additional stress and health risks of emergency contraception would add additional harm. Pregnancy due to rape is estimated at 5.0%.<sup>14</sup> For the vast majority of these women, emergency contraceptives impose significant health risks with **no benefit**. If conception has already occurred, then a very early abortion is the **only** means for emergency contraception to be effective. Abortion carries with it many serious adverse consequences such as increased rates of breast cancer,<sup>10</sup> depression, anxiety, suicidal behaviors and substance use disorders.<sup>15</sup> A far safer approach is to carry the child to term. Adoption is always an option.

Confidential pregnancy assistance services are available throughout the U.S. and Canada by calling Option Line at 1-800-395-HELP (4357).

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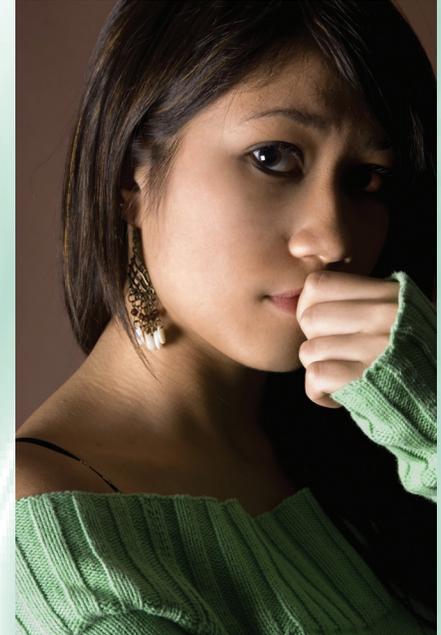
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## The “Morning After Pill” and other types of “Emergency Contraception”



## Myths and Realities

by Lili Cote de Bejarano, MD, MPH