Emergency Contraception and Breastfeeding

Breastfeeding as contraception
Breastfeeding is up to 98% effective as a method of contraception. However, this applies only for the six months following birth and only in women who are fully and regularly breastfeeding (babies having no other food or drinks) and whose menstrual periods have not returned. Once any of these factors change, breastfeeding cannot be relied on for preventing pregnancy and alternate contraception is recommended. See your doctor or family planning clinic for advice on methods considered safe and effective in breastfeeding.

What is emergency contraception?
There are two methods of emergency contraception – the emergency contraception (EC) pill and the copper intrauterine device (IUD). The EC pill is sometimes known as the "morning after pill". It can be useful for women who occasionally fail to use reliable contraception, or who accidentally miss a dose of their regular contraceptive Pill. The active ingredient in the EC pill is levonorgestrel. It is thought that emergency hormonal contraception prevents ovulation and fertilisation of the egg by the sperm. It may also cause changes in the lining of the wall of the uterus to discourage implantation of a fertilised egg.

Levonorgestrel
There are several brands of levonorgestrel pills available over the counter from a pharmacy. A single 1.5 mg oral dose should be taken as soon as possible, but within 72 hours of unprotected sex. The pharmacist has a duty of care to ask some questions when dispensing without a prescription to ensure that the supply of this medicine is appropriate. For women who prefer to have a dose on hand at home, a doctor can write a prescription or women can request "advance provision" from a pharmacist. When taken within 72 hours of sexual intercourse, the EC pill is 98.5% effective in preventing pregnancy. The longer the time delay between unprotected sex and taking the EC pill, the less effective this method is.

Levonorgestrel can be taken while breastfeeding. After a single 1.5mg dose, the total amount of drug passing into the breastmilk over the next 3 days is only about 0.1% of the mother's dose. Experts agree that this small amount of hormone is not significant and that women can be encouraged to continue breastfeeding without interruption. It is not necessary to withhold breastfeeds, though some drug companies may suggest this in their product information. It should be borne in mind that ceasing breastfeeding for a period of time reduces the contraceptive effect of breastfeeding itself. In addition, introducing formula unnecessarily to a young baby can increase the health risks for the baby. Studies indicate that levonorgestrel does not adversely affect the composition of milk, the growth and development of the infant or the milk supply.

Levonorgestrel is the same hormone found in the "Mini Pill", which is considered the oral contraceptive of choice for breastfeeding mothers. However, the dose found in the "Mini Pill" is much lower and has to be taken at the same time every day.
Copper intrauterine contraceptive device (IUD)
A copper IUD inserted in the vagina within 5 days of unprotected sex is another method of emergency contraception. It is even more effective than a single dose of levonorgestrel, and offers the advantage of ongoing contraception if required. However, it may be difficult to organise to have an IUD inserted by an experienced doctor within 5 days of unprotected sex. Copper IUDs can be safely used by breastfeeding women.4

Other considerations
If neither of these options is accessible, a number of oral contraceptive pills can also be taken as EC. Contact your doctor of a family planning clinic for advice on the dose or number of tablets which needs to be taken.

EC Pills are not effective if a woman has already had unprotected sex, or if she repeats this in the same cycle. Taking levonorgestrel more than once in a cycle is not harmful, however alternate methods of contraception would be preferred. If vomiting occurs within 2 hours of taking the tablet, the dose should be repeated to ensure the EC Pill is effective.

What else do I have to do?
If your period does not come as usual within three weeks, or if your periods have not returned since your baby's birth, and you think you might be pregnant, make an appointment to see your doctor. Very rarely, there are cases where pregnancy occurs even after taking the EC Pill. However, in pregnancies occurring after levonorgestrel exposure, the drug has not been associated with an increased risk of birth defects or pregnancy complications.
If you are breastfeeding but not planning a pregnancy soon, see your doctor or family planning clinic about alternate contraceptive methods.

References

Other resources

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For more information call MotherSafe: NSW Medications in Pregnancy and Breastfeeding Service on 9382 6539 (Sydney Metropolitan Area) or 1800 647 848 (Non-Metropolitan Area) Monday -Friday 9am-5pm (excluding public holidays)