

NSW Medications in Pregnancy & Breastfeeding Service



# **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 (ie. babies are 100% breastfed including some night feeds), 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.<sup>1</sup> 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.<sup>2</sup>

## **Emergency Contraception Pill**

A single oral dose of levonorgestrel 1.5 mg should ideally be taken as soon as possible after unprotected intercourse. 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.<sup>2,3</sup> There are several brands of the EC pill available over the counter from a pharmacy. 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. It is also important that as part of the counselling process women are made aware of the potential risks of sexually transmitted infections.

The EC pill 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.<sup>5</sup> Experts agree that this small amount of hormone is not significant and women are encouraged to continue breastfeeding without interruption.<sup>6</sup> It is not necessary to withhold breastfeeds at all, though some drug companies may suggest this in their product information. It is important to remember 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 affect the composition or amount of breastmilk, or the growth and development of the breastfeed infant.<sup>6</sup>

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.



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# <u>Copper intrauterine contraceptive device (IUD)</u>

A copper IUD inserted in the uterus 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.<sup>4</sup>

## Other considerations

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

Taking the EC pill more than once in a cycle is not harmful, however alternate methods of contraception would be preferred.

Nausea and vomiting are very rare side effects of the EC pill. If vomiting does occur within two hours of taking the tablet, the dose should be repeated to ensure reliable contraceptive effect.

## 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, pregnancy can occur even after taking the EC pill. However, reports on human pregnancies are reassuring that the EC pill taken in early pregnancy is not associated with an increased risk of birth defects or pregnancy complications.<sup>7</sup>

If you are breastfeeding but not planning a pregnancy soon, see your doctor or family planning clinic about other contraceptive methods.

### <u>References</u>

- 1. Labbok M. The Lactational Amenorrhea Method (LAM) for postpartum contraception. 2013 Jul. Accessed 14 Oct 2013 https://www.breastfeeding.asn.au/bfinfo/lactational-amenorrhea-method-lam-postpartum-contraception
- Family Planning NSW. Emergency Contraception. May 2013. Accessed 14 Oct 2013 <u>http://www.fpnsw.org.au/422437\_8.html</u>
- 3. Pharmaceutical Society of Australia. Pharmacist-only medicines (S3) guidance documents: Guidance for provision of Levonorgestrel.
- 4. Family Planning NSW. Copper IUD. May 2013. Accessed 14 Oct 2013 http://www.fpnsw.org.au/682847\_8.html
- Gainer E, Massai R, Lillo S et al. Levonorgestrel pharmacokinetics in plasma and milk of lactating women who take 1.5 mg for emergency contraception. Hum Reprod. 2007. 222(6):1578-1584.
- 6. Drugs and Lactation Database LactMed. Levonorgestrel
- Micromedex Healthcare Series. Reprotox. Greenwood Village, CO: Truven Health Analytics, 2013. <u>http://www.micromedexsolutions.com.acs.hcn.com.au/micromedex2/librarian?acc=36422</u>. Accessed 25 Oct 2013.

### Other resources

- 1. Family Planning NSW. Phone 1300 658 886 for contraceptive, reproductive and sexual health information and referral. <u>http://www.fpnsw.org.au/404926\_20\_85826259.html</u>
- 2. Australian Breastfeeding Association. Phone 1800 686268 for breastfeeding information and support. https://www.breastfeeding.asn.au/breastfeeding-helpline

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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)