

Emergency contraception overview update

Information for pharmacists and patients

May 2007

Introduction

Effective May 25, 2007 Plan B® emergency contraception (EC) tablets are available from community pharmacies in B.C. without a physician's or pharmacist's prescription. Many women in B.C. were already receiving EC from pharmacists who had received training to prescribe emergency contraception under previous regulations. Most women won't notice a difference; essentially, the process has been streamlined.

Alternative EC is still available by pharmacist prescription; however, most women choose Plan B® because its drug regimen is simpler, and it has fewer side effects.

Main rescheduling points

- Plan B® moved from Schedule IV to Schedule II; EC training is not required for this drug.
- With the scheduling change, an informed consent sheet is no longer required for Plan B®, but other pharmacist-prescribed EC will still require this form.
- It can be purchased by women or men.
- Schedule II drug counselling standards should be followed when Plan B® is provided; review the *Framework of Professional Practice* if necessary:
<http://www.bcpharmacists.org/standards/pdf/FPP.pdf>
- To maintain access to coverage of this ECP, PharmaCare will continue to cover the Actual Acquisition Cost (AAC) of levonorgestrel, plus a dispensing fee, if a pharmacist completes a prescription form and submits a claim on PharmaNet.
- Please inform all patients who request levonorgestrel that:
 - **If they would like the drug cost and dispensing fee to be covered by PharmaCare, they can choose to provide their Personal Health Number (PHN) and have the pharmacy submit the claim on PharmaNet as if it were a prescription.** If the patient chooses this option, please complete a prescription form (to assign a prescription number) as in the past, and submit a PharmaNet claim with your pharmacist ID in the Prescriber field. Coverage of the AAC and the dispensing fee will be subject to the usual rules of the patient's PharmaCare plan. A male purchasing Plan B® for a woman may provide her PHN/CareCard to have the drug entered on PharmaNet.
 - **If they prefer not to provide their PHN, they can choose to pay for the drug themselves.** In this case, PharmaCare cannot cover the cost and it will not count towards the patient's Fair PharmaCare deductible.
- Pharmacists who do not wish to provide this product for personal moral reasons must keep the following portion of the college's code of ethics (Value VIII) in mind:

A pharmacist is not ethically obliged to provide requested pharmacy care when compliance would involve a violation of his or her moral beliefs. When that request falls within recognized forms of pharmacy care, however, there is a professional obligation to refer the patient to a pharmacist who is willing to provide the service. The pharmacist shall provide the requested pharmacy care if there is no other pharmacist within a reasonable distance or available within a reasonable time willing to provide the service.

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Pharmacist resources

- **Canadian Pharmacists Association**
http://www.pharmacists.ca/content/about_cpha/whats_happening/cpha_in_action/emerge_contra.cfm
- **not-2-late.com**
<http://ec.princeton.edu/worldwide/default.asp>

How EC works

EC tablets contain hormones that prevent or delay the release of an egg from the ovary, prevent fertilization, or cause changes in the lining of the uterus that may prevent implantation of a fertilized egg. The tablets will not stop or interfere with pregnancy.

EC tablets are taken after having unprotected sex (sex without birth control or birth control failure). They are used as an emergency treatment only and not as routine contraception. EC tablets are not 100 percent effective.

Research has indicated that the following points are useful guidelines for women seeking information on Plan B® (levonorgestrel) or alternative (combination) EC.

- EC should be taken within five days of unprotected intercourse.
- For women who cannot use hormone-based emergency contraception, a copper IUD can be used up to seven days after unprotected intercourse to provide emergency contraception. A copper IUD can also be used as regular birth control for women who cannot use hormone-based contraception.
- Levonorgestrel EC is more effective with fewer side effects than combination products.
- Two tablets of levonorgestrel 0.75 mg taken at once are as effective as one tablet followed by the second tablet 12 hours later.
- EC should be started as soon as possible after unprotected intercourse.
- EC may be purchased to have on hand in case a barrier method (e.g., a condom) fails, or for occasions when regular-use oral contraceptives aren't taken.
- In most cases, a pelvic examination by a physician is not needed before providing EC.

Additional EC information

- A woman should see her doctor if she has not started her period within three weeks of EC treatment.
- Reactions to EC tablets may include nausea and vomiting, fatigue, dizziness, breast tenderness, and early or late menstrual period.

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- Use of condoms, spermicides, a diaphragm, or oral contraceptives should be continued to prevent pregnancy if sex takes place before a woman's next period. After that, use of one of these contraception methods should continue.
- EC does not protect from or treat sexually transmitted diseases. Women should seek diagnosis and treatment if:
 - They have had sex with a new partner in the past month.
 - Their partner has had sex with someone else in the past month.
 - Their partner has a sexually transmitted disease.
 - The woman has had two or more partners in the last six months.
- According to the product monograph, Plan B® isn't recommended for routine birth control. For more information, contact the manufacturer. <http://www.paladin-labs.com/index.asp>