

Emergency Contraceptive (EC) Methods Table



This table complements the information provided in the *Emergency Contraception Facts for Family Planning Staff* job aid.

| EC Method | Evidence-based usage & effectiveness | Active Ingredient | Access | **Mechanism of Action (MOA) | Reduced Pregnancy Risk % | Considerations |
|---|--|----------------------------|---|---|-------------------------------|--|
| Levonorgestrel/ Progestin-only 11+ brand names (i.e., Aftera, Fall Back, My Way, New Day, Next Choice One Dose, One Step, Plan B, Solo) | This single dose pill is most effective when initiated within 72 hours of unprotected or inadequately protected vaginal intercourse. Research supports use up to 5 days after unprotected or inadequately protected sex. Less effective if taken at 72–120 hours or close to ovulation. | 1.5mg of levonorgestrel | Available over-the-counter. | Works by preventing or delaying ovulation and inhibiting fertilization by interfering with sperm function. It is not effective once the process of implantation has begun. ¹ | 81–90% reduced pregnancy risk | Levonorgestrel/progestin-only EC pills may be less effective at preventing pregnancy in persons over 165 pounds or body mass index (BMI) over 30. However, this should not discourage individuals from using this EC type.* ² |
| Ulipristal acetate Brand name: ella® | This single dose pill is most effective when taken as soon as possible and up to 5 days after unprotected intercourse or inadequately protected vaginal intercourse. | 30mg of ulipristal acetate | Requires prescription. Some states allow pharmacists to dispense under statewide protocols. These states can be found on the Guttmacher Institute's website. | Works by inhibiting or delaying ovulation. | 85% reduced pregnancy risk | There is conflicting research on efficacy for women who are overweight and/or obese. ³ UPA pills may be less effective in persons over 194 pounds, however, the evidence is not entirely clear. This should not discourage anyone from using this EC type. ⁴ Concurrent use of progestin-containing contraceptives may impair the ability of ella to delay ovulation. |

*Consumers and healthcare providers will need to make decisions about EC without complete information about how weight impacts EC efficacy.

¹American Society for Emergency Contraception (ASEC). June 2022. Mechanism of Action of Levonorgestrel Emergency Contraception Pills. https://www.americansocietyforec.org/_files/ugd/0cdab4_043f0fb9e84a4135a96c094ce126903f.pdf

²American College of Obstetricians and Gynecologists. 2015. Emergency Contraception, Number 152. <https://www.acog.org/clinical/clinical-guidance/practice-bulletin/articles/2015/09/emergency-contraception>

³U.S. FDA. FDA communication on levonorgestrel emergency contraception effectiveness and weight. May 2016. United States Food & Drug Administration (FDA). FDA-Approved Drugs. Drug Databases.

<https://www.accessdata.fda.gov/scripts/cder/daf/https://www.fda.gov/drugs/postmarket-drug-safety-information-patients-and-providers/plan-b-075mg-levonorgestrel-and-plan-b-one-step-15-mg-levonorgestrel-tablets-information>

⁴American Society for Emergency Contraception (ASEC). June 2022. Efficacy of Emergency Contraception and Body Weight: Current Understanding and Recommendations.

https://www.americansocietyforec.org/_files/ugd/0cdab4_12f4b1c5cdf64feab998bc561692137c.pdf

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| *Yuzpe Method A number of birth control pills with different trade names are used. | This regimen is taken within 72 hours of unprotected intercourse and repeated 12 hours later. | Ethinyl estradiol 100–120 µg and levonorgestrel 0.5–0.6 mg | Requires prescription. | Works by inhibiting or delaying ovulation. | 74% reduced pregnancy risk | Formulated from a variety of hormonal-combined oral contraceptive pills. See Wertheimer 2000 for regimens. ⁴ |
| *Copper intrauterine device (IUD) Brand name: Paragard™ | Most guidelines recommend placing the copper IUD within 5 days of unprotected or inadequately protected vaginal intercourse. However, research shows this can extend to 7 days. ⁵ Research also suggests that the copper IUD is highly effective as EC if placed at any time in the menstrual cycle. ⁶ | Non-hormonal slow-released copper | Trained health care provider visit required. | May work by interfering with sperm movement, viability, transport or fertilization, and by preventing implantation. It does not affect ovulation. | 99% reduced pregnancy risk | May remain in place for up to 12 years following insertion. |
| *Hormonal LNG IUD Brand names: Liletta®, Mirena® | This EC method is placed up to 5 days after unprotected or inadequately protected sex. | 52mg of levonorgestrel | Trained health care provider visit required. | May work by thickening cervical mucus, thinning uterine lining, inhibiting sperm movement, reducing sperm survival, and delaying follicular development. | 99% reduced pregnancy risk ⁷ | May remain in place for up to 8 years following insertion. |

*Although these methods are not FDA labeled for use as emergency contraception, they have been found to be safe and effective when used for emergency contraception and can be used off-label for this indication.

**No single mechanism of action has been established for emergency contraception.⁸

⁴Wertheimer, R. 2000. Emergency postcoital contraception. *American Family Physician*. 62(10):2287–2292. <https://www.aafp.org/pubs/afp/issues/2000/1115/p2287.html>

⁵Goldstuck ND, Wildemeersch D. Practical Advice for Emergency IUD Contraception in Young Women. *Obstet Gynecol Int*. 2015;2015:986439. doi: 10.1155/2015/986439

⁶Robert A. Hatcher, *Contraceptive Technology 21st Edition*; page 106 (Atlanta: Managing Contraception, LLC, 2018).

⁷Turok DK, Gero A, Simmons RG, et al. Levonorgestrel vs. copper intrauterine devices for emergency contraception. *N Engl J Med* 2021; 384:335–344. <https://www.nejm.org/doi/full/10.1056/NEJMoa2022141>

⁸American College of Obstetricians and Gynecologists. 2015. Emergency Contraception, Number 152. <https://www.acog.org/clinical/clinical-guidance/practice-bulletin/articles/2015/09/emergency-contraception>