Prescribing protocol SESLHDPR/619 Ulipristal acetate for Emergency Contraception



Ulipristal acetate for Emergency Contraception		
Areas where Protocol/Guideline applicable	Sexual Health Clinics, Emergency Departments, Obstetrics and Gynaecology	
Areas where Protocol/Guideline not applicable	General ward areas	
Authorised Prescribers	Medical Officers in above specialities	
Indication for Use	Emergency contraception	
Clinical Condition	Woman of child bearing age who had unprotected intercourse or contraceptive failure between 72 and 120hrs (3 and 5 days) prior to presentation	
Contra-indications	 Hypersensitivity to the active substance or to any of the listed excipients. Known or suspected pregnancy. If menstrual bleeding is overdue, if the last menstrual period was abnormal in timing or character or if pregnancy is suspected for any other reason, pregnancy should be excluded (by pregnancy testing or pelvic examination) before treatment is given. 	
	 If a woman has had unprotected intercourse more than 120 hours earlier in the same menstrual cycle, conception may have already occurred. Treatment with ulipristal following a second act of unprotected intercourse may therefore be ineffective in preventing pregnancy. Severe liver disease Severe asthma insufficiently controlled by oral glucocorticoids 	
Precautions	Patients treated with liver enzyme-inducing medications in last 4 weeks – may reduce effectiveness of ulipristal (copper IUD preferred) Obesity – data on efficacy in obese women is conflicting Breastfeeding women are advised to express and discard breast milk for	
	one week after UPA is taken	
Place in Therapy	Ulipristal is not 100% reliable and does not prevent pregnancy every time First line for patients that have unprotected sexual intercourse between 72-120 hours prior to presentation.	
	Levonorgestrel 1.5mg should be used for patients that have unprotected sexual intercourse up to 72 hours prior to presentation	
If part of combination therapy, list other drugs	Nil	
Dosage (include dosage adjustment for specific patient groups)	30 mg as a single oral dose	
Duration of therapy	Once only	

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Important Drug Interactions	Hormonal contraceptives – progestogens may reduce efficacy of ulipristal. Wait at least 5 days after ulipristal use before starting progestogen containing hormonal contraception. CYP3A4 inducers and inhibitors (no recommendations regarding dosing)	
	Medicines affecting gastric pH	
Administration Instructions	The treatment consists of one tablet to be taken orally as soon as possible, but no later than 120 hours (5 days) after unprotected intercourse or contraceptive failure. The tablet can be taken with or without food. Can be taken at any time during the menstrual cycle.	
Monitoring Requirements	Follow up with GP for a pregnancy test in 3-4 weeks	
Management of complications	If vomiting occurs within 3 hours of taking the dose, another tablet should be taken.	
Basis of Protocol/Guideline: (including sources of evidence, references)	https://www.racgp.org.au/afp/2017/october/emergency-contraception- oral-and-intrauterine-options/ Australian Medicines Handbook, March 2018	
Groups consulted in development of this guideline	Sexual Health and HIV, Sexual Assault and Emergency Department, SESLHD Quality Use of Medicines Lead Pharmacist	

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	GOVERNANCE	
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