Canadian Guide to Emergency Contraception

Types of emergency contraception	How well does it work?	How soon do I have to use it?	How do I use it?	Where can I get it?
Copper IUD (Cu-IUD) (Flexi-T°, Liberté°, Mona Lisa°, Nova-T°)	99.9% effective	Within 7 days	It is placed in the uterus by a doctor or nurse practitioner ————————————————————————————————————	At a pharmacy, no prescription is needed unless required by insurance To get in quickly, say your visit is for emergency contraception
Levonorgestrel-IUS (Mirena®)	99.7% effective	Within 5 days	It is placed in the uterus by a doctor or nurse practitioner Highly effective for ongoing birth control	At a pharmacy, with a prescription from doctor or nurse practitioner To get in quickly, say your visit is for emergency contraception
Ulipristal (UPA-EC) (ella®)	~60% effective	ASAP Up to 5 days	Take one 30 mg pill by mouth immediately Remember to use every time you have unprotected sex	At a pharmacy, with a prescription Get an extra pack for future emergencies. Consider longer term contraception if needed
Levonorgestrel (LNG-EC) (Plan B°, Contingency One°, Backup Plan One-step°)	~50% effective	ASAP Best taken up to 3 days, but may be taken up to 5 days	Take one 1.5 mg pill by mouth immediately Remember to use every time you have unprotected sex	At a pharmacy, no prescription needed Get an extra pack for future emergencies. Consider longer term contraception if needed
Yuzpe regimen using oral contraceptive pills (Alesse®, Alysena®, Avian®, Min-Ovral®, Ovima®, Indayo®, or Portia®)	~40% effective	ASAP Up to 3 days	Take 2 doses by mouth 12 hours apart Each dose: 5 pills Alesse®, Alysena®, or Aviane, 4 pills Min-Ovral®, Ovima®, Indayo®, or Portia® Remember to use every time you have unprotected sex	At a pharmacy, with a prescription Dimenhydrinate (e.g. Gravol®) may reduce nausea









