25 September 2012

The SOGC calls for increased awareness of, and access to, emergency contraception to reduce unintended pregnancies in Canada

OTTAWA (Ontario) – In celebration of World Contraception Day on 26 September 2012, the Society of Obstetricians and Gynaecologists of Canada (SOGC) is reminding Canadians that emergency contraception has the potential to safely and effectively reduce the number of unintended pregnancies in Canada, estimated to represent forty to fifty percent of all pregnancies in the country.

Some people have concerns that the emergency contraceptive pill is an ‘abortion pill’. Research has shown that emergency contraceptive pills can only prevent conception. They have no effect if a woman is already pregnant.

Emergency contraception is a potential option for any woman who presents within 5 days of unprotected (no birth control method is used) or inadequately protected sexual intercourse (e.g. condom breakage, missed birth control dose, detachment or dislodgement of birth control method, etc.) and does not wish to be pregnant. Insertion of a copper intrauterine device (IUD) can also be considered for emergency contraception.

Emergency contraception has been available in Canada for almost 30 years, but as of 2002, only 57% of Canadian women were familiar with it. From a public health perspective, emergency contraception can only be effective if women at risk of pregnancy, and their partners, are knowledgeable about this birth control option before they require it and that they are able to access it quickly.

Emergency contraception is not recommended as a regular form of birth control. Having said that, a number of sexual encounters tend to be spontaneous with many Canadians being unprepared when it comes to contraception.

“Women need to understand that emergency contraception is just that – birth control to be used in the event of an emergency. Getting emergency contraception is an opportunity to discuss ongoing contraception and protection from both unwanted pregnancies and sexually transmitted infections” said Dr. Édith Guilbert, principal co-author of the updated Emergency Contraception clinical practice guideline, published in the September edition of the Journal of Obstetrics and Gynaecology Canada. “This type of birth control option is an important solution for preventing an unplanned pregnancy that can result from unplanned and unprotected intercourse.”

The National Drug Scheduling Advisory Committee (NDSAC) approved of making emergency contraceptive pills available over the counter, without a prescription and without prior consultation with a pharmacist, thereby significantly improving access to this product.

However, possible barriers to the appropriate use of emergency contraception still exist and may include a lack of knowledge, negative attitude, fear of side effects, judgemental attitudes from providers, overstating of associated health risks, cost, impractical business hours of medical clinics and pharmacies, and unavailability of the product in some pharmacies.

“Health-care providers must become advocates for emergency contraception and ensure that Canadians who require this important therapeutic intervention are able to have access to it when they need it, wherever they may live, and regardless of other people’s personal views,” added Dr. Sheila Dunn, principal co-author of the guideline.
Any woman in the reproductive age group who has not been sterilized may be counseled about emergency contraception in advance with detailed information about how and when to use it. Being aware and being prepared does not mean the promotion of risky sexual behavior. This is about responsible sexual health.

-30-

Media Relations:
Natalie Wright
Society of Obstetricians and Gynaecologists of Canada
Tel: (613) 730-4192 or Toll-free: 1-800-561-2416, ext. 366
Mobile: (613) 240-0169
Email: nwright@sogc.com
Web: www.sogc.org