



Mini Review

## Awareness of Emergency Contraceptive Pills Among Females

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### Abstract:

Emergency contraception can prevent pregnancy in women at risk of an unintended pregnancy; also called “morning after” pills or post-coital contraceptives. They are safe for use by all women involving those who cannot use ongoing hormonal contraceptive methods; they work by preventing or delaying the release of eggs from the ovaries (ovulation). Emergency contraception is a method used to avoid pregnancy after unprotected sexual intercourse unlike the regular methods of contraception that are taken before sexual contact. It has the potential, as the last resort, to avoid unwanted pregnancy and therefore abortion; a desirable goal especially when abortion is illegal. When used within 72 hours after sexual contact pills have the capacity to prevent pregnancy by 75-85% and with the use of intrauterine devices unwanted pregnancy can be prevented by as much as 99%. This is especially significant for those young couples that opt not to use a long-term regular contraceptive method and their sexual behavior is rather unplanned, erratic and irregular.

**Keywords:** Awareness; Emergency contraceptive pills; Females

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## Introduction

Albert Yuzpe first characterized as the use of hormonal contraception regimen for post coital pregnancy prevention in 1972 [1-3]. Oral contraceptive pills have been used as “off label” for post coital pregnancy prevention purpose since that time. According to this

approach the medication is taken in two doses. The first is taken within 72 hours of unprotected intercourse and the second 12 hours after the first [4, 5]. Emergency contraception can prevent pregnancy in women at risk of an unintended pregnancy; also called “morning after”

pills or post-coital contraceptives. They are safe for use by all women involving those who cannot use ongoing hormonal contraceptive methods, they work by preventing or delaying the release of eggs from the ovaries (ovulation). Women that are already pregnant cannot benefit from emergency contraceptive pills. They do not prevent pregnancy if the sexual intercourse happens more than 24 hours after taking emergency contraceptive pills. Without contraception, 8 out of 100 women have the likelihood of becoming pregnant if they have sex once during the second or third week of their menstrual cycle. Emergency contraceptive pills are less effective in obese women (body mass index  $>30\text{kg/m}^2$ ) [6-11]. However, these women should not be denied the use of emergency contraception when needed. For maximal effectiveness, emergency contraceptive pills should preferably be taken as early as possible after unprotected intercourse and within 72 hours, particularly beneficial to women who want to use a highly effective, long-acting and reversible contraceptive method. Prevent pregnancy by altering the chemical nature of the sperm and egg to stop fertilization. As an emergency contraceptive method, copper-bearing intrauterine devices should be inserted within 5 days of unprotected intercourse [12-15]. Each year there are about 250 Million pregnancies globally and one third of these are unintended and 20% of these undergo induced abortion. In Low income countries, more than one third of the 182 million pregnancies are unintended; the fate of 19% will be induced abortion and 11% of this is unsafe. In low income countries, the women who do not use any contraceptive contribute to two third of unintended pregnancies, where more than 100 million married women have unmet need for contraception [16-20]. Emergency contraceptive pills is indicated after unprotected sexual intercourse, following sexual abuse, misuse of regular contraception, or non-use of contraception [21]. In about half of all unwanted pregnancies, conception occurs due to inadequate guidance to use contraception effectively, including the users' inability to address their feelings, poor attitudes towards contraceptives, and lack of motivations. Despite the Ethiopian government's effort to prevent unwanted pregnancies and abortion among youths of age less than 24 years, the number of youths requesting termination of pregnancy is increasing annually [22]. Studies conducted in Ethiopia indicated that awareness of emergency contraceptive is less than 50% and utilization is below 10%. These limited studies conducted on the issue of

emergency contraceptive in the country were mostly focused on university students, who are believed to have better overall knowledge than college students [23]. Consequences of unprotected sex, such as unintended pregnancy and unsafe abortion, can be prevented by access to contraceptive services including emergency contraception. Emergency contraception is a method used to avoid pregnancy after unprotected sexual intercourse unlike the regular methods of contraception that are taken before sexual contact. It has the potential, as the last resort, to avoid unwanted pregnancy and therefore abortion; a desirable goal especially when abortion is illegal. When used within 72 hours after sexual contact pills have the capacity to prevent pregnancy by 75-85% and with the use of intrauterine devices unwanted pregnancy can be prevented by as much as 99%. This is especially significant for those young couples that opt not to use a long-term regular contraceptive method and their sexual behavior is rather unplanned, erratic and irregular [24]. Global and regional shows that 14 per 1000 incidence of unsafe and associated mortality in women aged 15 to 44 years in the year 2003 which accounts for 13% of all maternal deaths worldwide. In east Africa the incidence rate is be 39 per 1000 and accounts for 17% of all maternal deaths in the region. More than half maternal deaths in Africa are due to unsafe that occurs in age below 25 years of age [25, 26]. Worldwide, around 120 million women per year need contraception but they did not use it. Parallel with this, approximately 250 million pregnancies occur and one third of them are unintended; out of them, 20% are terminated by induced abortion. Consequently, around 47,000 women die each year from complications of unsafe abortions [127]. In Ethiopia, unwanted pregnancy is a big problem; more than 60% of the pregnancies in adolescents are unwanted resulting from unprotected sexual intercourse which is an alarming figure, and most of these pregnancies particularly in adolescents end up with unsafe abortion. Unsafe abortion is one of the top causes incriminated in the high number of maternal morbidity and mortality in Ethiopia. According to a national survey on abortion conducted in 2000 by World health organization, abortion related mortality was 1,209 per 100,000 live births [28]. Unwanted pregnancy leading to unsafe abortion is one of the most important causes of maternal morbidity and mortality. Unsafe abortion is a major medical and public health problem in Ethiopia. Ethiopia has a high incidence of unwanted pregnancies and incomplete and unsafe/ septic abortions,

particularly among adolescents. Several studies in the country have revealed that women who tend to undergo induced abortion are below the age of 30 years and are literate; many of whom being above the secondary educational level. Unwanted pregnancy and its outward consequences on physical and psychological well-being of adolescent girls and young adult women is a problem. Unwanted pregnancy is one of the main factors for unsafe abortion. Every year on average about 210 million throughout the world became pregnant. About 40-50 million of those women result to abortion, 30 million of them are in developing countries. Of 40-50 million abortions performed annually in the world, 20 million are thought to be unsafe. Unsafe abortion due to an unplanned pregnancy is one of the main causes of maternal morbidity and mortality in Ethiopian women. Several studies in the country have revealed that women who tend to undergo induced abortions are below the age of 30 and above the secondary educational level. Young people today start sex before marriage. Thus, they face a greater risk of unintended pregnancy [29-31].

## Conclusion

Oral contraceptive pills have been used as “Off label” for post coital pregnancy prevention purpose since that time. According to this approach the medication is taken in two doses. The first is taken within 72 hours of unprotected intercourse and the second 12 hours after the first. Emergency contraception can prevent pregnancy in women at risk of an unintended pregnancy; also called “morning after” pills or post-coital contraceptives. They are safe for use by all women involving those who cannot use ongoing hormonal contraceptive methods, they work by preventing or delaying the release of eggs from the ovaries (ovulation). Women that are already pregnant cannot benefit from emergency contraceptive pills. Consequences of unprotected sex, such as unintended pregnancy and unsafe abortion, can be prevented by access to contraceptive services including emergency contraception. Emergency contraception is a method used to avoid pregnancy after unprotected sexual intercourse unlike the regular methods of contraception that are taken before sexual contact.

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