EMERGENCY CONTRACEPTION WITHOUT DOCTOR'S SUPERVISION - RISK AND CONSEQUENCES

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Presents the modern data available literature about the main methods of emergency contraception for protection from the occurrence of unwanted pregnancies, which are most popular among modern young women. Summarizes the basic medical and non-medical indications for the unauthorized use of these emergency methods. We discuss the basic rules of the competent use of medicinal and traditional, including such popular folk, contraceptives taking into account the contraindications to the use of high-hormonal drugs (Postinor, Ovulen, Eskapel). Presents the results of the survey among 100 young women 18-24 years of age, dedicated to their common objective of health literacy and awareness about the dangers and consequences of unauthorized use of different methods of emergency contraception without a doctor's supervision with respect to its women's health and future motherhood.

Keywords: emergency contraception, Postinor, Ovulen, Eskapel, indications and contraindications for high-hormonal contraceptives, long-term consequences.

ЭКСТРЕННАЯ КОНТРАЦЕПЦИЯ БЕЗ ВРАЧЕБНОГО КОНТРОЛЯ – ОПАСНОСТЬ И ПОСЛЕДСТВИЯ

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Представлены современные данные доступной литературы про основные методы экстренной контрацепции для предохранения от возникновения нежелательной беременности, которые наиболее популярны у современных молодых женщин. Обобщены основные медицинские и самовольные немедицинские показания для использования подобных экстренных методов. Обговорены основные правила грамотного применения лекарственных и традиционных, в том числе и столь популярных народных, контрацептивов с учетом противопоказаний в отношении использования гормональных высокодозных лекарственных препаратов (Постинор, Овулен, Эскапел). Представлены результаты проведенного опроса среди 100 девушек 18-24-летнего возраста, посвященного их общей медицинской грамотности и объективной информированности про опасность и последствия самовольного применения различных методов экстренной контрацепции без врачебного контроля в отношении своего женского здоровья и будущего материнства.

Ключевые слова: экстренная контрацепция, Постинор, Овулен, Эскапел, показания и противопоказания для высокодозных гормональных контрацептивов, отдаленные последствия.

Introduction. Many girls and young women due to their lack of awareness and ignorance of the basic medical neglect sound thinking, its women's health and future motherhood. Only in certain exceptional situations, the use of high hormonal doses preparations in the first 1-3 days after unprotected coitus, which are effective precisely in the before ovulation phase of the cycle (Postinor, Ovulen, Jeskapel) really is medically reasonable resolution of the situation, in most other cases, unjustified and irreparable harm to the body [1-3].

Relevance of the topic. Emergency contraception is a way to prevent an unwanted pregnancy in the case of unprotected intercourseor with ineffective application of permanent contraception (the gapor slipping a condom, skip two or more pills of combined oral contraceptives, the error of the calendar method, etc.).

Emergency contraception can help prevent pregnancy after unprotected vaginal sexual contact. The sooner measures are taken, the greater the chance of preventing pregnancy!

In most cases, emergency contraception can prevent pregnancy when used after intercourse.

- •emergency contraception can be used after unprotected intercourse, contraception failure, improper use of contraceptives, or in cases of sexual violence.
- •There are two methods of emergency contraception: the use of emergency contraceptive pills (ECPs) and the application of copper-bearing IUDs (IUDs).
- When applying within five days after unprotected intercourse copper intrauterine devices are the most effective form of existing emergency contraception.
- the who recommends the use of the pill for emergency contraception in the form of a single dose of 1.5 mg levonorgestrel taken within five days (120 hours) after unprotected intercourse.

When to use emergency contraception? Emergency contraception can be used in a number of cases after sexual intercourse:

- cases of non-use of contraceptives;
- cases of contraceptive failed or incorrect application, including:
- condom break, slipping or misuse;
- pass reception of combined oral contraceptive pills three or more times in a row;
- taking pills containing a progestogen-only pill (minipiljuli) later than three hours (or later than 12:00 in the case of pills containing 0.75 mg desogestrel);
- injection of norethisterone oenanthate (NET-EN), containing a progestogen-only pill, made later than two weeks;
- injection of depot-medroxyprogesterone acetate (DMPA), containing a progestogen-only pill, made later than four weeks;
 - monthly injection drug combination estrogen-plus-progestin made later than seven days;
 - offset a belated introduction or early removal of vaginal hormonal or transdermal patch;
 - coitus interruptus (e.g., ejaculation in vagina or on external genitalia);
 - incomplete dissolution spermicidal tablets before intercourse;
- errors in calculating the safe period when using of physiological calendar method or the use of a barrier method in the fertile days of the cycle;
 - release of intrauterine contraceptive (IUD) or hormonal contraceptive implant.
 - in cases of rape, when the woman is not protected by an effective contraceptive method.

Emergency contraception has its own rules:

- almost any medication you need to take emergency contraception not later than 72 hours after sexual intercourse. If after sex more than 3 days, the drug will not be effective.
- If after sex has gone 3-5 days, you can apply to a gynecologist, who put uterine spiral. Intrauterine device-a device that is inserted into the uterine cavity and prevents pregnancy.
 - before taking any contraception should consult with the doctor gynecologist.

• some diseases of the digestive system (e.g. Crohn's disease), as well as other medications can reduce the effectiveness of emergency contraception. These drugs are listed in the instructions to the drug emergency contraception.

What method of emergency contraception is the best?

As sad as it may sound, but the best way to prevent an unwanted pregnancy who works in 100% of cases, it bounces off sex or abstinence. all other methods of contraception (in addition to operations on the genitals) does not give a 100 percent guarantee that you do not conceive. But it's really not all that bad: some means of protection when properly using them will help you not get pregnant in 99% of cases.

Are condoms provide 100% guarantee of protection? – No! None of the existing methods of contraception does not give 100% guarantee protection from genital infections or pregnancy. To be confident in full, you need to refrain from sexual activity. A reliable way to reduce the risk of sexually transmitted diseases, is to maintain a sexual relationship with the same partner, which in turn has sex only with you. But the most reliable way to avoid problems is to sex using a condom. Here it is worth noting that even a small error can cause a condom fails in the most crucial moment-will slip or breaks during sex. Thus, know the rules of condom use is becoming extremely important to your health. Note: some "unusual" condoms, for example, glow in the dark or with ridiculous attachments may not protect against sexually transmitted diseases or pregnancy. This information is always stated in the instructions or on the packaging.

After taking the emergency contraception medications:

- the next menstruation may start earlier or later than usual;
- menstrual flow may be more abundant in this case must apply to the doctor;
- always consult your doctor gynecologist before the next menstruation for genital infections survey, inform listeners that used emergency contraception;
- If three weeks after emergency contraceptive drugs you have not started menstruating or signs of pregnancy are urgently visit the gynecologist;
 - If pain in the abdomen, you should immediately consult your doctor-gynaecologist;
 - before the next menstruation must use barrier methods (condom).

Contraindications to the use of hormonal emergency contraception:

- -high sensitivity to components of the drug;
- -the onset of pregnancy (except for Mifepristone);
- -previously undergone hepatitis, diseases of the liver or bile ducts;
- -embolism and uterine bleeding in the past;
- -heavy bouts of headaches (migraine);
- -great experience.

Emergency after coitus contraception is a modular concept, which is based on the principle of using different types of contraception in the first hours after unprotected intercourse to prevent an unwanted (unplanned) pregnancy. Preparations for the emergency contraception known as "pretty pills the next morning.

How does it work? Preparations for emergency contraception do not allow egg develop as usual, stopping fertilization, and if it has already happened, not giving a fertilized egg to attach to the uterine wall. All drugs that fit and are used for emergency contraception, hormonal. How they work: periodic release doses of the hormone that causes in the female body condition, reminiscent of the usual alteration during pregnancy. Gynecologists called this condition after applying medications menstrual chaos. Probably, understandably, to have recourse to methods of emergency contraception can be not too often, but better-as seldom as possible. These methods cannot, under any circumstances, should not be regarded as the main way to avoid unwanted pregnancy. On the one hand, after coitus contraception efficient enough, and, on the other hand, the harm to the body can be very large compared to other means.

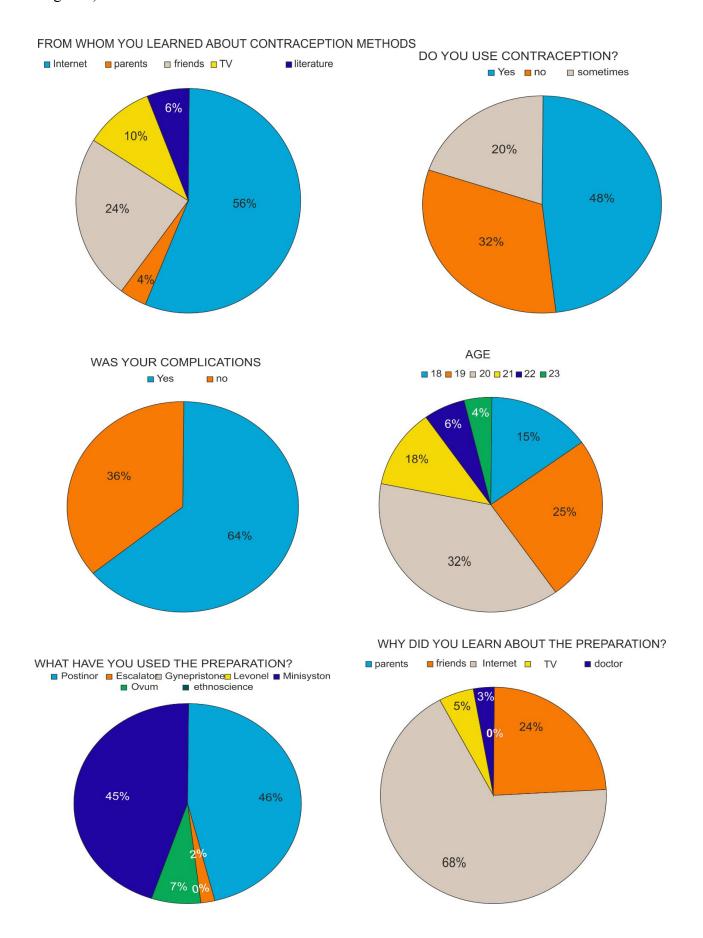
Use emergency contraception can only be really intractable and dangerous situations where there is simply no other way. It is desirable that emergency contraception be used two to three times a year, and the best is even rarer. The most common side effects of emergency contraception — vaginal bleeding, which may start a few days after taking hormonal medication. Some women have a menstrual cycle is disrupted and delays menses. Other common side effects — various allergic reactions, headaches, Vertigo, disorders of the digestive tract (diarrhea and vomiting).

It is very important to remember that if emergency contraception drugs are taken and then may be vomiting or diarrhea attack, taking the drug will have to repeat because the body does not got a dose of medication, which is needed to prevent an unwanted pregnancy.

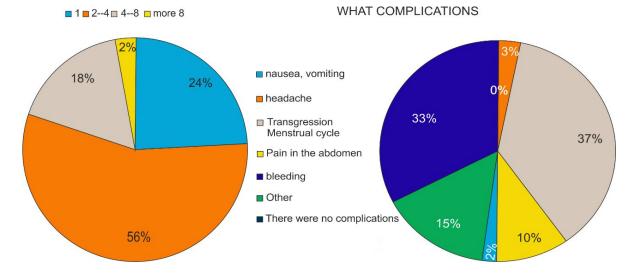
Attention! Emergency contraception should not be used by pregnant women or when pregnancy is suspected (may be possible). The effectiveness of emergency contraception is quite high and reaches 96-98% if after unprotected sexual intercourse does not exceed 72 hours [4-5].

Materials, methods and results of the study. We interviewed 100 girls 18-24years of age. All those interviewed live sex, 32% of them do not practice safe sex, 20% -irregularly, when random links for prevention of sexually transmitted diseases (AIDS, gonorrhea, syphilis, chlamydia, etc.), and 48% - use emergency contraception without complying with the instructions for medical application (46% - Postinor, 7% - Ovulen, 2% - Eskapel). About the percentage of contraceptive choices girls have learned from the Internet (56%), friends (24%), the media (10%-6%, television, magazines, newspapers), and only 4% of the polled parents. 45% have used dubious local traditional methods with spermicidal action using intravaginal (vinegar, lemon wedges, Coca-Cola).

36% later noticed a serious complications (dysmenorrhoea, metrorragii, vomiting, headaches) (see diagrams).



HOW MUCH HALF OF PARTNERS HAVE YOU?



Conclusion. Modern teenagers and students, despite the doctor's warnings, emergency contraception is still widely used and arbitrarily assigned (without consulting a gynecologist, no survey, no dynamic control efficacy and complications, without the notion of competent planning contraception). Many girls and young women because of the lack of awareness and ignorance of basic medical neglect sanity, your women's health and future motherhood.

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