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What is the morning after pill?

Recent discussion in Australia about the 'morning after pill' (MAP) has focused on the drug levonorgestrel, marketed by Schering as *Postinor-2*.

The prescribing information for this drug describes it as a 'postcoital emergency contraceptive'. One tablet is taken as soon as possible and within 72 hours of 'unprotected intercourse', followed by another tablet 12 hours later. This dose is the equivalent of 50 tablets of the levonorgestrel 'minipill', *Microlut*.

How does *Postinor-2* work? Is it a contraceptive?

Levonorgestrel is a synthetic progestogen. The prescribing information for *Postinor-2* states that the drug is "...thought to work mainly by preventing ovulation and fertilisation by altering tubal transport of sperm and/or ova. It may also cause endometrial changes that discourage implantation."¹

However, it is a scientific fact that *human life begins with fertilisation*, the process by which a sperm from a man and an ovum from a woman unite to give rise to a new human being.² This is also referred to as the moment of *conception*. It is when a pregnancy begins.

Therefore, a drug which prevents the implantation of a human embryo in the uterus is not acting as a contraceptive. In this instance, conception has already occurred and the drug is *preventing the pregnancy from continuing* by causing a chemical abortion.

As such, it is clearly misleading to only call *Postinor-2* a form of emergency or post-coital 'contraception' when it may in fact work by causing an early abortion (i.e. act as an abortifacient).

Hasn't this drug been available for some time? What has changed?

Postinor-2 was first registered in October 2001 as an 'emergency contraceptive' for oral use within 72 hours of unprotected intercourse. Up until recently, however, it was only available after a woman had consulted a doctor and received a prescription for it.

Since the 1st of January 2004, the Therapeutic Goods Administration has decreed that *Postinor-2* should be available over-the-counter from Australian pharmacies as a Schedule 3 drug. This means that it should be available *without* a medical consultation and prescription from a doctor.

Why are the Catholic Church, as well as other institutions and individuals who respect and serve human life, concerned about this development?

- The MAP can harm or destroy human embryos.

The MAP can act to cause chemical abortions.³ Out of respect and reverence for the gift of human life, we regard abortion at any stage to be gravely wrong as it is the deliberate killing of an innocent human being.

¹ MIMS Australia, 1996-2002.

² Sadler T, *Langman's Medical Embryology*, 6th Ed. Williams and Wilkins; Maryland, 1990, p.3.

The human being is to be respected and treated as a person from the moment of conception; and therefore from that same moment his rights as a person must be recognized, among which in the first place is the inviolable right of every innocent human being to life.⁴

The MAP can cause harm to an embryo or fetus in other ways as well. The drug company recommends that pregnancy should be excluded before supplying *Postinor-2* because: "While the consensus is that levonorgestrel is not teratogenic, no guarantee can be given that pregnancy will result in a normal baby." *No studies* of the mutagenic (the ability to cause harm to an already developing embryo or fetus) potential of the MAP have been performed.

The MAP can also increase the risk of ectopic pregnancy. This is a pregnancy which proceeds outside of a woman's womb, usually within the fallopian tubes. This causes the death of the embryo and can cause tube damage or potentially life-threatening internal bleeding in women.⁵

- **The MAP can harm women.**

1. **Physical effects.**

Prescribing information recommends that *Postinor-2* only be used as an emergency measure and that women who present for repeated courses of 'emergency contraception' should be advised to consider long-term methods of contraception.

Perhaps this recommendation is because no studies of the carcinogenic (cancer causing) potential of the MAP have been performed?

Prescribing information states that high dose progesterone containing medication like the MAP should never be given to women who have unexplained vaginal bleeding, current breast cancer or hypersensitivity to the preparation. It is probable that this medication can also cause harm if taken by women who have severe hypertension, diabetes mellitus with established complications, ischaemic heart disease, stroke, or a past history of breast cancer.

Stated side effects of the MAP include: fatigue, abdominal pain, gastrointestinal upset, dizziness, headache, breast tenderness and vaginal bleeding.

The MAP can also have serious interactions with other medications such as warfarin.⁶

This information suggests that the history taking which is necessary to safely supply the MAP to women should be undertaken by a doctor with the expertise, privacy and time to give women the medical care they deserve. Other-the-counter supply of the MAP is unsatisfactory healthcare for women.

The MAP does not protect against sexually transmitted diseases.

...but contact with a doctor may allow timely medical counsel and intervention to prevent or treat sexually transmitted diseases. Pharmacists cannot, and should not, be expected to try and fulfil this responsibility.

It is not surprising that the *Australian Medical Association* has stated that the decision to make *Postinor-2* available over the counter trivialises women's health.⁷

³ Kahlenborn C, Stanford J, Larimore W. Postfertilization Effect of Hormonal Emergency Contraception. *The Annals of Pharmacology*, 2002; 36; 465.

⁴ Congregation for the Doctrine of the Faith, Instruction on Respect for Human Life in its Origin and on the Dignity of Procreation *Donum Vitae* (22 February 1987), I, No. 1: AAS 80 (1988), 79. Reaffirmed by Pope John Paul II in *Evangelium Vitae* n.60.

⁵ Sheffer-Mimouni G, Pauzer D, Maslovitch S et al. Ectopic pregnancies following levonorgestrel contraception. *Contraception*. 2003; 67; 267-269.

⁶ Ellison J, Thomson AJ, Greer IA. Apparent interaction between warfarin and levonorgestrel used for emergency contraception. *British Medical Journal* 2000;321; 1382.

2. Potential for psychological harm.

Easy access to the MAP will result in more abortions. As the destruction of human life at any stage is morally significant, it is reasonable to suppose that the decision to use the MAP may harm many women and result in post abortion grief. Many women could use the MAP without understanding that it can cause an early abortion.

For women who find themselves coerced into unwanted sexual relationships, or even victims of outright sexual abuse, the over-the-counter provision of the MAP will remove a significant opportunity for them to seek a confidential and personalized medical consultation and referral for professional help. Of course many pharmacists will try to meet this important need as best they can. However it is unfair and impractical to expect them to do so in the context of their professional responsibilities and working environment.

- **The over-the-counter availability of the MAP will further undermine the dignity of human sexuality and the value of marriage.**

Easy access to the MAP creates a culture which does nothing to encourage women and men to live chaste lives and take responsibility for their actions.

- **Effects upon the profession of pharmacy.**

The profession of pharmacy is dedicated to healing. Like medicine, it seeks to 'do no harm'. There ought to be no role for the cooperation of this profession with the deliberate destruction of human embryonic life.

At the very least, it is hard to envisage how pharmacists will be able to meet their professional responsibilities to ensure that all reasonable care is provided in supplying a Schedule 3 drug such as *Postinor-2*, where private and detailed history taking is necessary.

What should we do about the sale of the MAP?

- Support pharmacists who choose not to supply the MAP.
- Support doctors who choose not to prescribe the MAP.
- Pray that similar attempts to introduce the over-the-counter sale of the MAP in the United States will be overturned.
- Look for opportunities to educate our families, friends and colleagues about the medical and moral significance of the morning-after-pill.
- Encourage community and church initiatives which support women who fear that they may have an unexpected pregnancy, and provide practical and material support to women who want to continue with the pregnancy.

Life Office
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www.lifeoffice.org.au/resource/MAP_facts.pdf

⁷ Australian Medical Association, Media release, 31st December 2003.