



## ADULT MEDICATION GUIDELINE

# Levonorgestrel

**Scope (Staff):** All WNHS Staff

**Scope (Area):** Obstetrics and Gynaecology

This document should be read in conjunction with the [Disclaimer](#).

### Quick Links

[Dose](#)

[Administration](#)

[Monitoring](#)

[Pregnancy and Breastfeeding](#)

### Restrictions

**Mirena®, Kyleena®:** [Formulary: Restricted](#)

**Others:** [Formulary: Unrestricted](#)

### Medication Class

Progestogens

### Presentation

**Tablet:** 30 microg (**Microlut®**), 1.5 mg (**Levonorgestrel GH®**)

#### **Combination Products**

**Femme-Tab ED 20/100® Tablet:**

Levonorgestrel 100 microg/ Ethinylestradiol 20 microg

**Microgynon 50 ED® Tablet:**

Levonorgestrel 125 microg/ Ethinylestradiol 50 microg

**Femme-Tab ED 30/150®:**

Levonorgestrel 150 microg/ Ethinylestradiol 30 microg

#### **Intrauterine device:**

**Mirena® 52 mg:** (delivering an average of 20 microg/ 24 hours during the first year, 15 microg/ 24 hours during the first 5 years and 13 microg/ 24 hours over the complete 8 year period of use).

**Kyleena® 19.5 mg:** (delivering an average of 12.6 microg/ 24 hours over the first year and 9 microg/ 24 hours over the complete 5 year period of use).

## Storage

**Tablet & combination products:** Store at room temperature, below 25°C. Protect from light and moisture. Keep in the original packaging and out of reach of children.

**Mirena®:** Store below 30°C. Protect from direct sunlight and moisture.

**Kyleena®:** Store below 30°C.

## Dose

### Emergency Contraception

#### Oral:

1.5 mg as a single dose.

*Give levonorgestrel as soon as possible within 72 hours after unprotected intercourse, as its efficacy decreases with time. May still be considered up to and beyond 96 hours but efficacy is uncertain.*

### Contraception

#### Oral:

30 microg once daily at the same time each day. Begin 2-3 weeks after delivery; use before this may cause heavy, irregular bleeding.

### Prolonged Contraception (regular cycle)

#### Intrauterine device:

19.5 mg (Kyleena®): One device (19.5 mg) inserted into the uterus within the first 7 days of the menstrual cycle for immediate effect. Replace every 5 years.

52 mg (Mirena®): One device (52 mg) inserted into the uterus within the first 7 days of the menstrual cycle for immediate effect. Replace every 8 years.

### Postpartum Prolonged Contraception

#### Intrauterine device:

19.5 mg (Kyleena®): One device (19.5 mg) inserted within the first 48 hours postpartum. If this cannot be achieved, wait until at least 4 weeks (usually 6 weeks) postpartum to reduce the risk of expulsion or uterine perforation. Replace every 5 years.

52 mg (Mirena®): One device (52 mg) inserted within the first 48 hours postpartum. If this cannot be achieved, wait until at least 4 weeks (usually 6 weeks) postpartum to reduce the risk of expulsion or uterine perforation. Replace every 8 years.

**Heavy menstrual bleeding, HRT (as adjunct to oestrogen), Endometriosis****Intrauterine device:**

One device (52 mg only) inserted into the uterus within the first 7 days of the menstrual cycle for immediate effect. Replace every 5 years.

**Administration****Oral**

May be taken with or without food. Taking the 1.5 mg tablet after food may reduce nausea.

**Intrauterine Device**

To be inserted by the doctor.

**Monitoring**

Refer to guidelines.

**Pregnancy**

**1<sup>st</sup> Trimester:** Contraindicated

**2<sup>nd</sup> Trimester:** Contraindicated

**3<sup>rd</sup> Trimester:** Contraindicated

**Breastfeeding**

**Oral:** Considered safe to use.

**Combination product:** Consider alternative.

**IUD:** Considered safe to use but insert at least 4-6 weeks after delivery.

For more information, please contact [KEMH Obstetric Medicines Information Service](#).

**Comments**

N/A

**Related Policies, Procedures & Guidelines****WNHS Clinical Practice Guidelines:**

[Contraception](#)

[Gynaecology \(Non-oncological\)](#)

[Menopause and menopausal symptoms](#)

[Pain: Acute on chronic pelvic pain management](#)**References**

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CDC Contraceptive Guidance for Health Care Providers

FSRH UK Medical Eligibility Criteria for Contraceptive Use

FSRH CEU Guidance: Drug Interactions with Hormonal Contraception

NHS Contraception Guide

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