A prospective, randomised study to compare the effectiveness of the 24 hour versus 12 hour double doses regimen of levonorgestrel for emergency post-coital contraception

Submission date 23/03/2004	Recruitment status No longer recruiting	 Prospectively r Protocol
Registration date 01/04/2004	Overall study status Completed	 [] Statistical analy [X] Results
Last Edited 31/05/2011	Condition category Pregnancy and Childbirth	[_] Individual parti

- registered
- lysis plan
- cicipant data

Plain English summary of protocol

Not provided at time of registration

Contact information

Type(s) Scientific

Contact name Prof Pak Chung Ho

Contact details Department of Obstetrics and Gynaecology **Queen Mary Hospital 6F Professorial Block** Pokfulam Road

Hong Kong

pcho@hkusub.hku.hk

Additional identifiers

EudraCT/CTIS number

IRAS number

ClinicalTrials.gov number

Secondary identifying numbers WHO/HRP ID 97137

Study information

Scientific Title

Study objectives

To compare the effectiveness of two double dose regimens of levonorgestrel (given at either 12 or 24 hour intervals) for emergency contraception. In addition, we studied the efficacy of both regimens when the coitus-treatment period was extended to 120 hours.

Ethics approval required Old ethics approval format

Ethics approval(s) The Institutional Review Board (IRB) approved the study at each participating centre

Study design Multicentre controlled randomised two-arm clinical trial

Primary study design Interventional

Secondary study design Randomised controlled trial

Study setting(s) Hospital

Study type(s) Treatment

Participant information sheet

Health condition(s) or problem(s) studied Contraception

Interventions

Levonorgestrel two doses of 0.75 mg 12 hours apart
 Levonorgestrel two doses of 0.75 mg 24 hours apart

Intervention Type Drug

Phase Not Specified

Drug/device/biological/vaccine name(s)

Levonorgestrel

Primary outcome measure

Pregnancy rate

Secondary outcome measures

1. Delay in onset of next menses 2. Incidence of side-effects

Overall study start date

01/10/1998

Completion date 01/06/2003

Eligibility

Key inclusion criteria

- 1. Requesting emergency contraception within 120 hours of unprotected intercourse
- 2. Only one act of unprotected intercourse during current cycle
- 3. Willing to abstain from further acts during current cycle
- 4. Regular menstrual cycles (24 to 42 days)
- 5. Having at least one spontaneous cycle before current cycle
- 6. Available for follow-up in the next six weeks
- 7. Negative pregnancy test
- 8. Willing to participate
- 9. Not breastfeeding

10. No use of hormonal contraceptives or of rhythm or natural family planning method of contraception during current cycle

11. Not unsure about the date of last menstrual period

Participant type(s)

Patient

Age group

Adult

Sex

Female

Target number of participants

2071 at five centres (Hong Kong, Shanghai, Nanjing, Shenzhen and Beijing)

Key exclusion criteria

- 1. Post-abortion or post-partum patients whose period had not yet returned
- 2. Regular use of prescription drugs before admission to the study
- 3. Intercourse during the treatment cycle greater than 120 hours before admission into the study

Date of first enrolment

01/10/1998

Date of final enrolment 01/06/2003

Locations

Countries of recruitment China

Hong Kong

Study participating centre Department of Obstetrics and Gynaecology

Hong Kong

Sponsor information

Organisation World Health Organisation (WHO) (Switzerland)

Sponsor details 20 Avenue Appia Geneva Switzerland CH-1211

Sponsor type Research organisation

Website http://www.who.int/en/

ROR https://ror.org/01f80g185

Funder(s)

Funder type Research council

Funder Name

Hong Kong Research Grant Council (Hong Kong) (ref: HKU7286/98M)

Results and Publications

Publication and dissemination plan

Not provided at time of registration

Intention to publish date

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Not provided at time of registration

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<u>Results article</u>	results	01/01/2005		Yes	No