

Evaluating the use of ulipristal acetate with and without misoprostol for contragestion

Submission date 28/09/2025	Recruitment status Recruiting	☒ Prospectively registered ☐ Protocol
Registration date 15/10/2025	Overall study status Ongoing	☐ Statistical analysis plan ☐ Results
Last Edited 16/03/2026	Condition category Pregnancy and Childbirth	☐ Individual participant data ☒ Record updated in last year

Plain English summary of protocol

Background and study aims

This proof-of-concept study will assess the safety, efficacy, and acceptability of use of ulipristal acetate (UPA) with and without misoprostol for prevention and/or disruption of early pregnancy processes through 35 days since the last menstrual period (LMP). Although UPA is known to be effective when used before ovulation for pregnancy prevention, and recent evidence suggests it is highly effective when used with misoprostol for termination of confirmed pregnancies up to 63 days LMP, its potential for pregnancy prevention and/or disruption in the initial post-ovulatory period through 35 days LMP has not been studied in humans. If either regimen is shown to be safe, effective and acceptable when used as a contragestive through 35 days LMP, this would fill an important gap in available fertility control methods.

Who can participate?

Women at risk of unwanted pregnancy who are between the ages of 18 and 39 years, over 5 days since unprotected intercourse and 35 days or less since the last menstrual period (LMP)

What does the study involve?

Participants will provide a blood sample at the time of enrollment and will then be randomly assigned to receive either 60 mg of ulipristal acetate followed by 800 mcg misoprostol 24 hours later, or 60 mg of ulipristal acetate followed by placebo pills 24 hours later. Follow-up takes place at the study clinic approximately 14 days after taking the ulipristal acetate and includes a pregnancy test and exit interview and, for those with a positive test result, an ultrasound. The main outcomes assessed are pregnancy status at follow-up, safety and patient satisfaction.

What are the possible benefits and risks of participating?

Participants may benefit from access to a safe and effective option for pregnancy prevention and/or disruption under close medical supervision. Risks include expected side effects of the medications, including cramps, bleeding, nausea, vomiting, chills and fever. Serious side effects are rare but monitored closely, and clinical care is provided if needed.

Where is the study run from?

The study is carried out in one maternity hospital in Mexico City (Hospital Materno Infantil Inguarán) and three private clinics in Mexico City (Cuidado Integral de la Mujer, Gineclinic, S.C., Integra, MDK, and Centro Médico Mujer).

What is the study starting date and how long is it expected to run for?

October 2024 to June 2027

Who is funding the study?

The study is jointly funded by Verge Research (New York, USA) and the Secretaría de Salud de la Ciudad de México (SEDESA)

Who is the main contact?

Manuel Bousiéguéz, (Senior Associate, Verge Research), mbousieguéz@vergeresearch.org

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Additional identifiers

Protocol serial number

1001

Study information

Scientific Title

Safety, efficacy and acceptability of ulipristal acetate with and without misoprostol for contragestion through 35 days LMP

Study objectives

To evaluate the safety, efficacy, and acceptability of using 60 mg of ulipristal acetate, alone or in combination with 800 mcg of misoprostol, for preventing and/or terminating unwanted pregnancy up to 35 days since a woman's last menstrual period (LMP).

Ethics approval required

Ethics approval required

Ethics approval(s)

1. Approved 05/05/2025, Allendale Investigational Review Board (30 Neck Road, Old Lyme, CT, 06371, United States of America; +1 (0)860 575 0092; erin.staab@allendaleirb.com), ref: Protocol #1001
2. Submitted 19/08/2025, Research Ethics Committee, Belisario Domínguez Specialty Hospital (Av. Tláhuac No. 4866, esq. Zacatlán. Col. San Lorenzo Texcoco. Alcaldía Iztapalapa,, Mexico City, 09790, Mexico; +1 (0)52 55 5850 0000 Ext. 1064; dgpcs.correspondencia@salud.cdmx.gob.mx), ref: N/A (number will be provided after approval)

Primary study design

Interventional

Study design

Multicenter interventional doubled-blinded randomized controlled trial

Study type(s)

Efficacy, Prevention, Safety, Treatment

Health condition(s) or problem(s) studied

Prevention or disruption of unwanted pregnancy in women up to 35 days LMP

Interventions

Arm 1: 60 mg (two 30 mg tablets) ulipristal acetate orally, followed 24 hours later by 800 mcg (four 200 mcg tablets) of misoprostol buccally.

Arm 2: 60 mg (two 30 mg tablets) ulipristal acetate orally, followed 24 hours later by four placebo tablets buccally.

Randomization is 1:1 and carried out in blocks of 8 for each study site using a computer program.

Intervention Type

Drug

Phase

Phase I/II

Drug/device/biological/vaccine name(s)

Ulipristal acetate, misoprostol

Primary outcome(s)

Proportion of study participants not pregnant at follow-up, as determined by urine pregnancy test and, for those with a positive urine test, ultrasound

Key secondary outcome(s)

1. Self-reported incidence of side effects (diarrhea, nausea/vomiting, cramps, fever, chills or other) after taking the study medications, as measured by an exit interview at follow-up.
2. Acceptability of the contragestive medications to participants, defined as the proportion of participants who report at follow-up that the medications were acceptable or highly acceptable.
3. Incidence of bleeding within five days after administering the study medications, defined as the proportion of participants who report at follow-up that they experienced any bleeding in the first 5 days after taking the study medications.
4. Duration of bleeding in days following administration of the study medications, defined as the number of days that participants report experiencing bleeding after taking the study medications, as measured by an exit interview at follow-up.
5. Severity of bleeding following administration of study medications, defined as the proportion of participants who report that the bleeding they experienced was very severe, somewhat severe, or not severe at all, as measured by an exit interview at follow-up.

Completion date

28/06/2027

Eligibility

Key inclusion criteria

1. Age 18-39 years
2. LMP ≤ 35 days, as verified by report of last menstrual period
3. Missed the EC window (had unprotected sex > 5 days ago)
4. General good health
5. Does not want to be pregnant
6. History of regular monthly menstrual cycles (± 3 days)
7. Willing and able to understand and sign consent forms
8. Willing to return for a follow-up visit
9. Willing to provide a blood draw at enrollment and urine sample at follow-up

Participant type(s)

Healthy volunteer

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 Years

Upper age limit

39 Years

Sex

Female

Total final enrolment

0

Key exclusion criteria

1. Known allergies or contraindications to either of the study drugs
2. Symptoms of or risk factors for ectopic pregnancy, including:
 - 2.1. Unilateral pelvic pain or significant bilateral pelvic pain within the past week
 - 2.2. Prior ectopic pregnancy
 - 2.3. Prior permanent contraception or other tubal surgery
3. Current use of an IUD, contraceptive implant or injectable
4. History of renal or liver disease

Date of first enrolment

04/05/2026

Date of final enrolment

28/06/2027

Locations**Countries of recruitment**

Mexico

Study participating centre

Hospital Materno Infantil Inguarán

Estación # 307

Col. Felipe Ángeles

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Mexico City
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Study participating centre
Cuidado Integral de la Mujer, Gineclinic, S.C.
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Study participating centre
Centro Médico Mujer
Av. Baja California 111B
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IntegraMDK
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Miguel Hidalgo
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Sponsor information

Organisation
Verge Research

Funder(s)

Funder type

Charity

Funder Name

David and Lucile Packard Foundation

Alternative Name(s)

David & Lucile Packard Foundation, The David and Lucile Packard Foundation, Packard Foundation, The Packard Foundation, The David & Lucile Packard Foundation, Packard, DLPF, PF

Funding Body Type

Private sector organisation

Funding Body Subtype

Trusts, charities, foundations (both public and private)

Location

United States of America

Funder Name

Secretaría de Salud de la Ciudad de México (SEDESA)

Funder Name

Verge Research

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Data sharing statement to be made available at a later date