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## Top Ten Myths About Emergency Contraception: The Facts: It's Easy to Get, Easy to Use

**It's one of the most discussed topics in contraception today – and still one with the most questions for women. Even though EC has been on market for more than 10 years and has significantly impacted millions of women's lives by reducing the chance of an unintended pregnancy, many myths prevail. Some women still aren't sure when to use it, how it works or even how to get it.**

**Following are some common misperceptions and - most importantly - the facts all women need to know:**

1. **Myth:** You need a prescription to get emergency contraception (EC).

**Fact:** Not anymore for women 17 and older (with valid ID)! You can get Plan B One-Step™ (levonorgestrel) tablet, 1.5 mg -- the only FDA approved one-pill emergency contraceptive (EC) *available without a prescription* at your pharmacy counter. It is easy to get and easy to use. Since EC works best when taken as soon as possible, Plan B One-Step™ should be your first choice when you need an EC.

Ulipristal acetate (ella®) is the last chance EC, women will need to see a health care practitioner *for a prescription* when it becomes available at the end of this year or in early 2011. You must also rule out pregnancy before taking this product.

2. **Myth:** Contraception can only be used PRIOR to sex, never after.

**Fact:** While women should not use emergency contraceptive as a primary form of birth control, Plan B One-Step™ is the only one-pill FDA-approved emergency contraceptive *available without a prescription* to those 17 and older for use to prevent pregnancy AFTER a contraceptive failure (i.e., broken condom, etc.), or unprotected intercourse. When taken as directed, within 72 hours (3 days) of unprotected sex or contraceptive failure, Plan B One-Step™ is highly effective in reducing the chance of pregnancy.

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3. Myth: Women can wait before taking emergency contraception.

**Fact:** Timing is everything when it comes to emergency contraception. The sooner women take emergency contraception, the more effective it will be. When taken as directed, within 72 hours (3 days) of unprotected sex or contraceptive failure, Plan B One-Step™ (levonorgestrel) is highly effective in reducing the chance of pregnancy. Among women receiving Plan B One-Step™, 84% of expected pregnancies were prevented. It's important that you take control and don't wait. Go straight to your local pharmacy and ask for Plan B One-Step™.

If, for whatever reason, it is past 72 hours, **prescription only** ulipristal acetate (ella®) is approved for use within 120 hours (5 days) after unprotected intercourse or a known or suspected contraceptive failure and should, therefore, be considered the last chance emergency contraceptive.

4. Myth: Emergency contraceptive must be taken in two doses, 12 hours apart.

**Fact:** Not anymore with Plan B One-Step™, the only one-pill, one-dose, emergency contraceptive available *without a prescription* to women 17 and older. It should be considered the first line of defense for women because it is so easy to get—no need to see a doctor for a prescription. It's simple to use and has a long history of safety and efficacy. No more waiting 12 hours to take a second pill. Take one and you're done.

One-pill, one-dose, Plan B One-Step™, when taken as directed, within 72 hours (3 days) of unprotected sex, is highly effective in reducing the chance of pregnancy. About seven out of eight women who would have gotten pregnant will not become pregnant.

5. Myth: “I've heard that after using emergency contraception, women, in addition to resuming their regular oral contraceptive, must use additional barrier forms of birth control. Is that correct?”

**Fact:** Not the case if you take Plan B One-Step™! Just resume taking your usual method of hormonal contraceptive as directed.

In contrast, ella® may decrease the contraceptive action of regular hormonal contraceptive methods and women are instructed to use a barrier method in addition to her regular contraceptive for the rest of that menstrual cycle.

6. Myth: Women can't use emergency contraception more than once during a cycle.

**Fact:** While Plan B One-Step™ is *not* a substitute for routine contraception, it is safe to use more than once during a monthly cycle if needed.

Repeated use of ella® within the same menstrual cycle is not recommended, as safety and efficacy of repeat use within the same cycle has not been evaluated.

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7. Myth: Plan B One-Step™ (levonorgestrel) is the same as the abortion pill mifepristone RU-486.

**Fact:** Absolutely not, as nothing could be further from the truth. Levonorgestrel, the active ingredient in Plan B One-Step™, is contained in many of the traditional oral contraceptive pills women have relied on for several decades. Plan B One-Step™ is not effective if a woman is already pregnant and will not affect an existing pregnancy or harm a developing fetus.

Ulipristal acetate (ella®) is a cousin to mifepristone (RU-486). The risks to a fetus when ella® is administered to a pregnant woman are unknown. If this drug is inadvertently used during pregnancy, the women should be apprised of the potential harm to the fetus.

8. Myth: Plan B One-Step™ interrupts a pregnancy.

**Fact:** Plan B One-Step™ does not *interrupt* a pregnancy. It is an emergency contraceptive that *prevents* pregnancy after a contraceptive failure or unprotected intercourse. It contains the same ingredient found in many traditional birth control pills - levonorgestrel. Similar to other oral contraceptives, it works primarily by preventing ovulation or fertilization. Plan B One-Step™ will not work if a woman is already pregnant and it will not harm a pregnant woman or fetus.

Ulipristal acetate (ella®) is a new chemical entity and its long-term safety data is limited. The risks to a fetus when ella® is administered to a pregnant woman are still unknown. A pregnancy test will be required prior to getting a prescription for ella®, once it is available, which is expected to be at the end of 2010.

9. Myth: Women must take a pregnancy test BEFORE taking Plan B One-Step™.

**Fact:** No, there is no need to take a pregnancy test if you use Plan B One-Step™.

Plan B One-Step™ will not work if a woman is already pregnant and it will not harm a pregnant woman or fetus.

This is not the case for ulipristal acetate (ella®), however, which contains a new chemical entity that has limited long-term safety data. A pregnancy test will be required for ella® prior to getting a prescription from your doctor, when it becomes available, which is expected to be at the end of 2010.

10. Myth: Few women actually have unprotected sex or contraceptive failures.

**Fact:** There are almost 1 million acts of unprotected sex in the United States each night. Smart women know Plan B One-Step™, with its proven efficacy and safety record is the first line of defense when it comes to preventing unintended pregnancy.

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**Important Safety Information**

Plan B One-Step™ (levonorgestrel) is intended to prevent pregnancy after known or suspected contraceptive failure or unprotected intercourse.

Plan B One-Step™ isn't effective if you're already pregnant, and it won't terminate an existing pregnancy. Plan B One-Step™ does not protect against HIV and other sexually transmitted diseases (STDs). Side effects may include changes in your period, nausea, lower abdominal pain, fatigue, headache, and dizziness. If your period is more than a week late, you may be pregnant. You should not take Plan B One-Step™ if you are already pregnant. Plan B One-Step™ should not be used as a routine birth control, as it is not as effective. If you have severe abdominal pain, you may have an ectopic pregnancy, and should get immediate medical help.

You are encouraged to report negative side effects of prescription drugs to the FDA at [fda.gov/medwatch](http://fda.gov/medwatch) or call 1-800-FDA-1088. Please see full product information enclosed. Important product information is available on [www.PlanBOneStep.com](http://www.PlanBOneStep.com), by calling 1-800-330-1271, or by speaking to your pharmacist.

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**About Teva Women's Health, Inc.** Teva Women's Health, Inc., which develops and markets proprietary pharmaceutical products in North America, focuses primarily on products for women and emphasizes the development and marketing of products for reproductive and menopausal needs. Teva Women's Health, Inc. is a subsidiary of Teva Pharmaceutical Industries Ltd. (NASDAQ: TEVA) Teva Pharmaceutical Industries Ltd., headquartered in Israel, is among the top 15 pharmaceutical companies in the world and is the leading generic pharmaceutical company. The company develops, manufactures and markets generic and innovative pharmaceuticals and active pharmaceutical ingredients. Over 80 percent of Teva's sales are in North America and Western Europe.

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