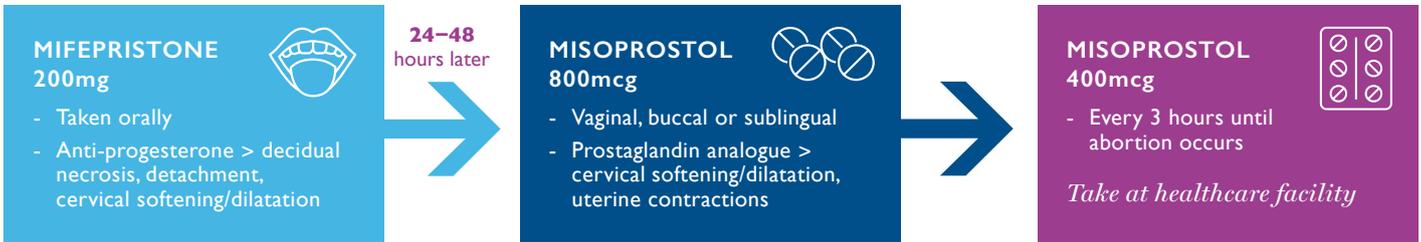


## Medical abortion from 12 weeks of pregnancy: Summary sheet

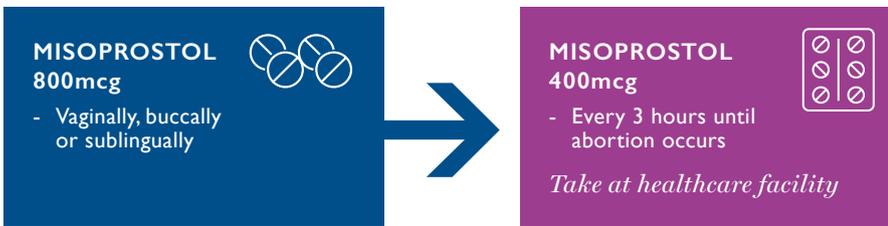
### I. DRUGS, MECHANISMS OF ACTION & REGIMENS

If mifepristone is available, use in combination with misoprostol



#### WHO: NO MAXIMUM NUMBER OF MISOPROSTOL DOSES

If mifepristone is NOT available



### 2. MEDICAL ABORTION >24 WEEKS

#### UTERUS MORE SENSITIVE TO MISOPROSTOL AS PREGNANCY ADVANCES

↓ Lower doses of misoprostol

↻ Increased intervals between doses

⚠ Especially with uterine scars

**24-25 weeks:**  
 200mg mifepristone, followed by 400mg misoprostol (vaginal, buccal or sublingual) every 3 hours until pregnancy has passed.

**25+1 -28 weeks:**  
 200mg mifepristone, followed by 200mcg misoprostol (vaginal, buccal or sublingual) every 4 hours until pregnancy has passed.

**>28 weeks:**  
 200mg mifepristone, followed by 100mcg misoprostol (vaginal, buccal or sublingual) every 6 hours until the pregnancy has passed (further dose reductions may be needed as pregnancy duration increases).

**RHESUS NEGATIVE INDIVIDUALS SHOULD BE OFFERED ANTI-D**

### 3. EFFICACY & SAFETY

Regimen	Failure rate	Time to expulsion	Major adverse events
Mifepristone + Misoprostol	At 36 hours: <1%	6-9 hours	<1%
Misoprostol only (Alternative regimen if mifepristone not available)	At 48 hours: <10%	12-18 hours	<1%

Risks	Failure rate
Failed induction	<1 in 100
Retained placenta or retained products of conception	5-8 in 100
Need for further intervention to complete the procedure	13 in 100
Infection	<2 in 100
Severe bleeding requiring transfusion <20 weeks	<1 in 1000
Severe bleeding requiring transfusion >20 weeks	4 in 1000
Uterine rupture	<1 in 1000

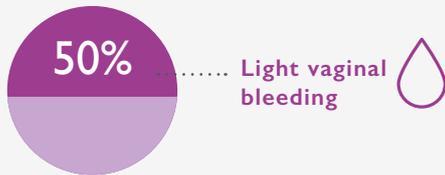


Without previous caesarean deliveries:  
**1 in 10,000**

With previous caesarean deliveries:  
**2.8 in 1,000**

## 4. SIDE EFFECTS

Mifepristone side effects:



TAKE ANOTHER PILL IF VOMITING OCCURS WITHIN AN HOUR

Misoprostol side effects:

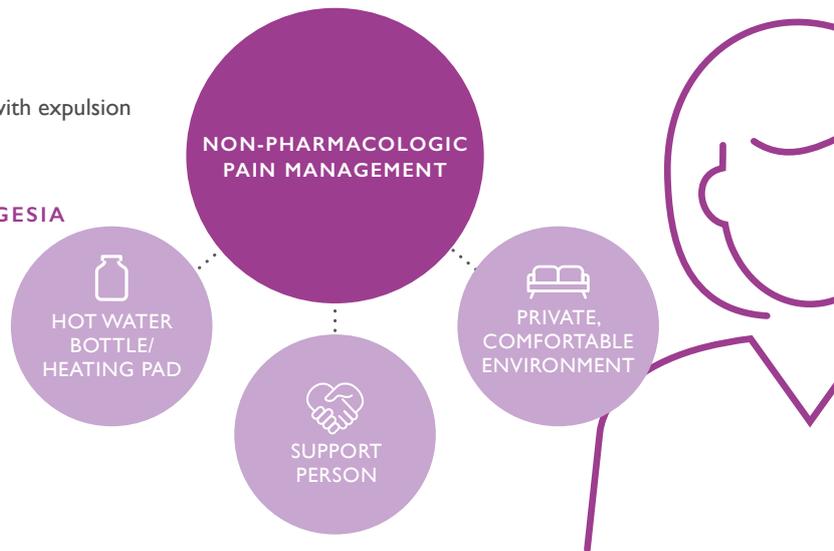
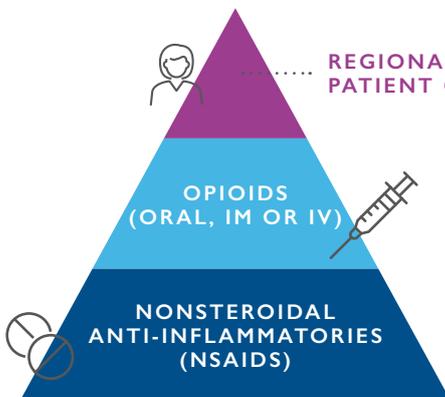


VOMITING WITHIN 30 MINUTES: REPEAT MISOPROSTOL IF INSERTED SUBLINGUALLY OR BUCCALLY

OFFER ANTIEMETICS

## 5. PAIN MANAGEMENT

Pain usually starts shortly after misoprostol administration, peaking with expulsion



## 6. CONTRAINDICATIONS & CONSIDERATIONS

### MEDICAL ABORTION

#### CONTRAINDICATIONS

- Allergies to meds
- Severe uncontrolled asthma
- Inherited porphyria
- Chronic adrenal failure

#### TO MIFEPRISTONE

#### CONSIDERATIONS

- Long term steroids
- Bleeding disorders
- Anticoagulant medication
- Symptomatic anaemia
- IUD in place

## 7. VENOUS THROMBOEMBOLISM RISK

CURRENTLY FULLY ANTI-COAGULATED:

- Treat in hospital setting
- Advice from haematologist

HIGH RISK OF VTE: THROMBOPROPHYLAXIS NEEDED

- Consider giving LMWH for at least 7 days after abortion

## 8. CONSENT

Verbal consent valid

Written consent form standard practice

Pre-printed consent forms are useful

Information on method (and feticide if needed)

Risks & complications

What to expect before, during and after the abortion

### BEFORE THE PROCEDURE

- When to take mifepristone
- Can eat and drink
- Where and when to come
- Need for further investigations/medication adjustment

### DURING THE PROCEDURE

- How misoprostol will be taken
- Amount of pain and bleeding
- How pain will be managed
- How long the abortion will take
- May see fetus and placenta
- May see some reflex movements from 16-17 weeks

### AFTER THE PROCEDURE

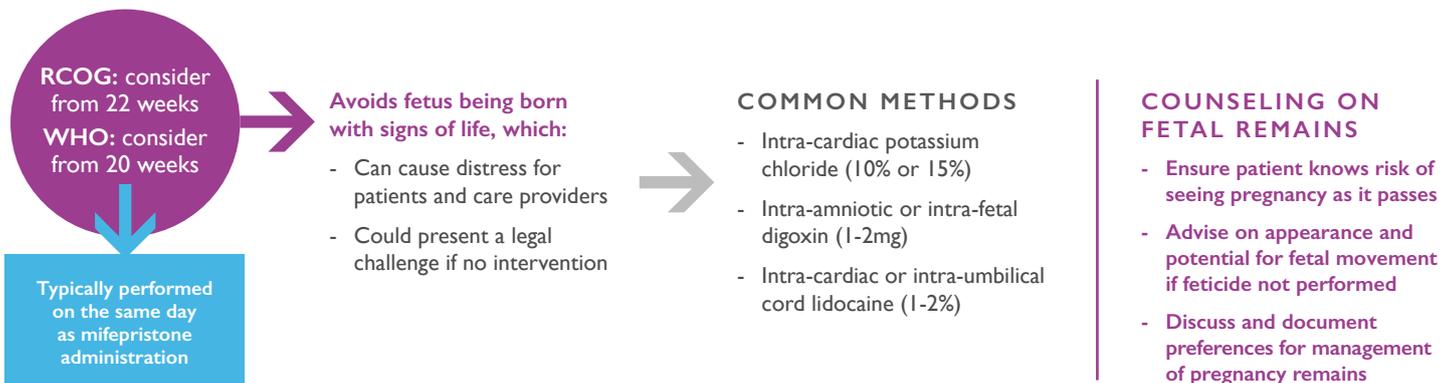
- Amount of pain and bleeding
- When they can go home
- Need for someone to accompany them home
- Whether they can drive
- Need for medication

## 9. COMPARING MEDICAL & SURGICAL METHODS

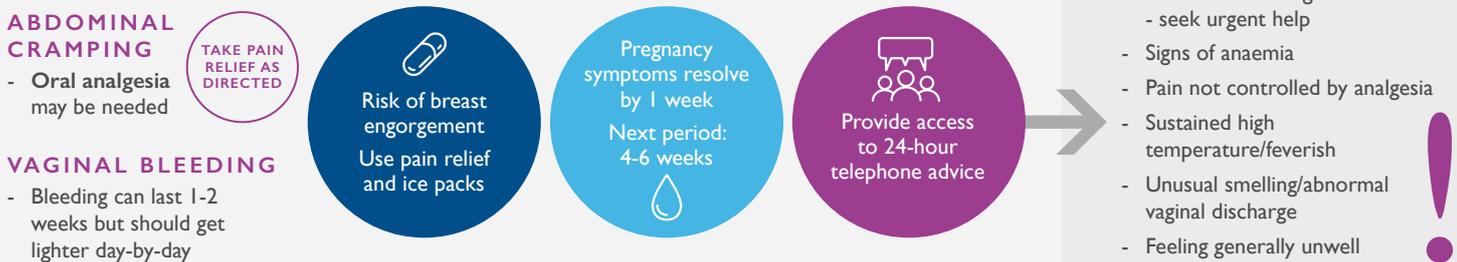


	Surgical	Medical
Location of abortion	Clinic or Hospital	Clinic or Hospital
Pre-procedure care	Cervical preparation 3-24 hours pre-evacuation	Mifepristone 24-48 hours pre-induction
Procedure duration	10-20 minutes (day case)	6-8 hours (median duration) (15% > 10 hours)
Pain during procedure	Minimal to none due to anaesthesia (Osmotic dilator placement - 'moderately painful')	Painful contractions and delivery
See products	Not unless chosen	Possibly
Intact fetus	No May be possible with Dilatation and Extraction	Yes
Bleeding post-procedure	About 1 week, less each day	About 2 weeks, less each day

## 10. FETICIDE



## 11. WHAT TO EXPECT AFTERWARDS



## 12. CONTRACEPTION

