
Abortion, medical treatment

The advantage of medical abortion is that there is no need for general anesthesia or invasive procedures on the uterus. Medical termination of pregnancy is successful in about 95 per cent of cases. The abortion is carried out using two different medications, which cause your uterus to contract and the pregnancy to pass in the form of bleeding. The abortion **is irreversible** after the medication has been taken, because the medication can cause fetal malformations. Medical abortion might not be a suitable option for individuals with severe chronic diseases, severe hypertension, severe asthma or allergy to the medication used to carry out the treatment.

Making an appointment for abortion

You can make an appointment for abortion by calling the Gynaecological outpatient clinic. **Take a pregnancy test before booking the appointment.** The nurse will schedule an appointment for you, taking into account the first day of your last menstrual period.

Appointment at the Gynaecological outpatient clinic

When you arrive at the hospital, you are asked to fill a patient information form and the AB1 form, which is required to terminate the pregnancy. For this reason, please arrive 30 minutes before your appointment time.

During your appointment, a doctor **will verify the gestational age by performing a gynecological ultrasound** and determine the best contraception option for you after the abortion. Chlamydia or gonorrhea infection is ruled out either with a urine sample or with a cotton swab sample from the vagina. The doctor can prescribe you **2 days of medical leave**, starting from the first day of bleeding.

After your appointment, a nurse will give you the medications and instruct you on how to carry out the treatment. Medical management can be carried out at home or at the hospital. If the treatment is carried out at home, **you must have an adult support person at home to help you on the day you take the termination medication.** If necessary, taking the medication can be scheduled so that you get a support person present with you.

If the pregnancy is over 10 weeks, you will receive a second set of medication to terminate the pregnancy in the Gynaecological inpatient ward. Prior to that, a blood test will be conducted in the laboratory to determine your blood type.

Starting the medical treatment

You will receive the **first medication to terminate the pregnancy** (Mifegyne®) under a nurse's supervision. The medication prepares your body for the emptying of the uterus, which takes place one to three days later. If you **vomit within 2 hours** of taking the medication, some of the medication can fail to absorb. If this happens, call the hospital responsible for your care to receive another dose. The medication can cause bloody discharge and discomfort in your lower abdomen. You can take pain medication at home if needed.

Carrying out the medical management at home or at the hospital

If the treatment is carried out at the gynaecological inpatient ward, you will receive the medications at the hospital.

To be filled: **The treatment is carried out on** _____

Take **the first pain medication**, for example ibuprofen 600–800 milligrams and/or paracetamol 1 gram, in the morning with your breakfast to ensure it will have taken effect before contractions start.

About an hour after taking the pain medication, place **4 Cytotec® tablets** in your vagina. **After 3 hours, place 2 more Cytotec® tablets.** If you are already experiencing heavy bleeding, take the tablets by mouth by sucking on / chewing them. If there is already bleeding, the tablets can exit the vagina with the bleeding without having been absorbed.

The medications **cause the uterus to contract**, and the pregnancy tissue will pass in the form of **heavy bleeding**. The heaviness of the bleeding depends on how far along the pregnancy has progressed. In most cases, the termination happens 2 to 6 hours after the first tablets were taken.

Pain management

As the uterus contracts and the cervix opens, in almost all cases this causes pain in the lower abdomen, lower back, and sometimes in the thighs. The pain can vary from mild painful sensation, similar to menstrual pain, to intense pain. Other symptoms can also include nausea, and sometimes vomiting, diarrhea, dizziness, and headache. The symptoms will ease after pregnancy tissue has passed.

Take additional pain medication according to your needs, for example:

- ibuprofen 600–800 milligrams 1 to 3 times a day
- paracetamol 1 gram 1 to 3 times a day

You can take the pain medication both **at the same time or take them in turns. Do not exceed the maximum daily dosage!** You can also manage pain by moving around, relaxing, using a heating pad, or taking a warm shower.

After abortion

It is possible to continue having **pain** similar to menstrual pain for a few days: take pain medication as needed.

The **post abortion bleeding** varies from person to person and can last for 2 to 4 weeks. At first, for a few days, the bleeding can be heavier than menstrual bleeding, but it will start to decrease gradually. **During the bleeding, avoid** swimming, bathing in a bathtub, using tampons / menstrual cups and having intercourse **due to a risk of infection**.

Menstrual cycle usually starts up 4 to 7 weeks after termination. Because new pregnancy can start even before the first period, remember to **ensure you are using adequate contraception immediately after the termination**. You can start using **contraceptive pills, a vaginal ring or contraceptive patch** the day after the termination. A **contraceptive implant** can be fitted immediately after the termination, and an **IUD** (intrauterine device) can be fitted in the beginning of your first period.

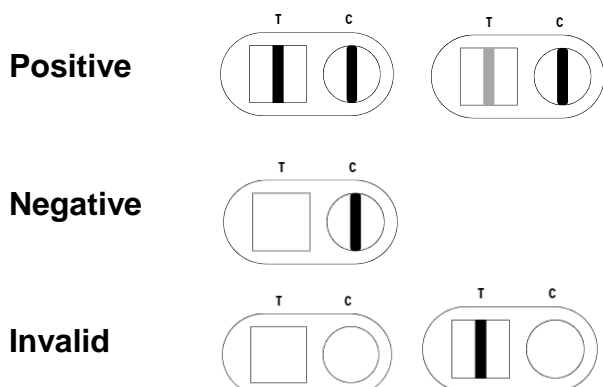
Possible problems and post-abortion pregnancy test

Contact the hospital responsible for your care **the next weekday**, if bleeding does not start or if it is very light. **Contact the hospital later**, if the bleeding becomes heavier again or if it develops an unpleasant odour, or if you develop lower abdominal pain or fever.

The success of an at-home medical abortion is ensured with a urine pregnancy test. You will receive a testing kit from the hospital. It is important that you take the hospital provided pregnancy test. Other routine follow-ups are not needed.

To be filled: **Pregnancy test on day _____.**

The pregnancy test is stored at room temperature. Open the pregnancy test foil package. Remove the cork from the testing stick and urinate onto the narrow end, or urinate into a clean cup and dip the narrow end into the urine for 15 seconds. Put the cork back on, set the test down onto an even surface and start timing. The test is readable after 3 minutes, but becomes unreadable after 10 minutes. Please see below instructions on how to interpret the results. If the test is positive or invalid, contact the unit responsible for you care the following weekday. If the test is negative, the abortion has been carried out successfully.



Counselling

It is possible to receive **support from your primary health care provider or from our crisis workers**. You can talk with the nurse experienced in crisis support or the hospital chaplain. Receiving counseling from the hospital chaplain does not require you to be a member of any religion. The support our crisis workers provide always focused on your needs.