

WHAT TO EXPECT DURING A MEDICAL ABORTION

How does medical abortion work?

You will be given two medications, **mifepristone** and **misoprostol**, packaged together as Mifegymiso. Mifepristone comes in a **green box**, misoprostol comes in an **orange box**.

These medications are approved for use by Health Canada up to 9 weeks of pregnancy. However, research shows that they are **safe and effective** up to 10 weeks of pregnancy. The success rate of medical abortions using Mifegymiso depends on how far along you are in pregnancy:

7 weeks the medications are 92% to 99% effective
 8 weeks the medications are 91% to 98% effective
 9 weeksthe medications are 87% to 98% effective
 10 weeksthe medications are 90% to 96% effective

The first medication you will take is mifepristone, which is in the **green box**. It blocks progesterone and causes the lining of your uterus to break down. This ends the pregnancy. The second medication is called misoprostol and it is in the **orange box**. It causes the cervix to dilate and uterus to contract. This causes the pregnancy tissues to leave the body.



What should I expect during a medical abortion?

1. Clinic Visit

You will go to a clinic and speak to a doctor or nurse. They will ask **questions** about your pregnancy, your menstrual cycle and your general health. These questions may include:

- Do you remember when your last menstrual period started?
- Have you ever had an ectopic pregnancy?
- Have you ever had surgery on your uterus or fallopian tubes?
- Do you have any long-term or chronic health conditions?
- Are you on any prescription medications?
- Do you have access to a car or other form of transportation for the next 14 days?
- Do you agree to come back for a follow-up appointment after your abortion?
- Will you agree to have a surgical abortion if a medical abortion does not work?

Your healthcare provider will also conduct a short **physical exam**. They will likely take your blood pressure and ask you to give a urine sample. They might test you for chlamydia and gonorrhea, two common sexually transmitted infections, by taking a swab from your vagina. Some healthcare providers will check the size of your uterus by doing a bimanual exam. During this exam, they will place one hand on your stomach and then insert two fingers into your vagina.

Before prescribing Mifegymiso your healthcare provider will **draw blood** from your arm or send you to a lab to have this done. Your blood will be tested to see whether you are **Rh-negative**. Most people have a protein on their red blood cells called Rh, but about 15% do not.

If you are Rh-negative, there's a chance that your pregnancy may be Rh-positive. Having a medical abortion would put your body into contact with the pregnancy's Rh-positive blood. This could teach your immune system to attack future Rh-positive pregnancies.

To prevent this, you will be given a medication called **WinRho or RhoGAM** if you are Rh-negative. These medications are usually given by injection into the arm or thigh. They work best when given within 72 hours of when you take mifepristone, the medication in the **green box**. Your healthcare provider will likely send you to the hospital to get WinRho or RhoGAM.

2. Ultrasound

Your healthcare provider may send you for an ultrasound to confirm you are not more than 10 weeks pregnant. Some clinics will require you be less than 7 weeks pregnant in order to have a medical abortion. Your ultrasound may be transvaginal or abdominal.

In a **transvaginal** ultrasound, a technician places a small probe into your vagina to get an image of your uterus. For an **abdominal** ultrasound, the technician will spread gel onto the area below your belly button and run a wand over this gel to get an image of your uterus. No matter what kind of ultrasound you get, you can ask to see – or not to see - the image of your uterus.

3. Mifepristone

Once they receive the results of your blood tests and ultrasound, your healthcare provider will tell you to take mifepristone. This may happen the same day as your clinic visit, or a few days after. There is **1 tablet** of mifepristone in the **green box** inside the Mifegymiso packaging. Swallow it with a glass of water. Most people **don't feel any different** after taking mifepristone. A small number start bleeding and cramping because the pregnancy tissue has started to empty from the uterus. Once you take mifepristone, your abortion cannot be reversed.

4. Misoprostol

A day or two after taking mifepristone, you will take a second medication called misoprostol. There are **4 tablets** of misoprostol in the **orange box** inside the Mifegymiso packaging. Your healthcare provider may tell you to put the misoprostol tablets inside your vagina, or ask you put them in your mouth between your gum and cheek.

Most people start **bleeding and cramping** within a few hours of taking misoprostol. This is normal, and it means that the pregnancy tissue has started to empty of out your uterus. The bleeding may be very heavy, and you may pass clots as small as quarters or a big as lemons. You might also have strong or painful cramps.

You can take acetaminophen (Tylenol) or ibuprofen (Advil, Motrin) to help with the pain. Do not take aspirin, as it can make you bleed more. To help manage cramps you can also put a hot water bottle or heating pad on your stomach, take a shower, sit on the toilet, or have someone rub your back.

Most people find that the pregnancy tissue comes out **within 4-6 hours** of taking misoprostol, the medication in the **orange box**. You may not see it being expelled. If you do see the pregnancy tissue, it may look like blood clots or a grape-sized ball of white or grey tissue.

The heaviest bleeding and cramping usually happen while the pregnancy tissue comes out. After this, bleeding and cramping should slow down, though they won't stop right away. Expect **lighter bleeding and spotting** for 10 to 16 days after using misoprostol. It's normal for bleeding to stop and start in the days after a medical abortion.

4. Follow-up appointment

In order to have a medical abortion you must be able to return to clinic for a follow-up appointment or go to a lab for tests. To be sure that your medical abortion was complete, your healthcare provider will send you for a **blood test 7 to 14 days after** you take mifepristone, the medication in the **green box**. They might also ask you to return for a second ultrasound.

What are the common side effects of a medical abortion?

Bleeding is normal. You can expect the bleeding to be heavy and to pass blood clots as small as quarters and as large as lemons. After the pregnancy tissue comes out you may have some bleeding or spotting for several more days or a few weeks. Bleeding may stop and start during this time. If you soak through more than 2 maxi pads an hour for more than 2 hours in a row, call your healthcare provider or go to the nearest emergency room.

Cramps are normal during a medical abortion, especially in the 24 hours after you take misoprostol, the medication in the **orange box**. These cramps can be strong and may be painful. You can take acetaminophen (Tylenol) or ibuprofen (Advil, Motrin) to help. Do not take aspirin, as it can make you bleed more. You can also put a hot water bottle or heating pad on your stomach, take a shower, sit on the toilet, or have someone rub your back. If your cramps don't get any better after taking pain medication, call your healthcare provider.

Fever or chills are normal the day that you take misoprostol, the medication in the **orange box**. It is not normal to have a fever after that. If you have a fever and it's been more than 24 hours since you took misoprostol, call your healthcare provider or go to the nearest emergency room.

Nausea, vomiting, and diarrhea are normal on the day you take the misoprostol, the medication in the **orange box**. It is not normal to keep feeling nauseous, thrown up, or have diarrhea more than 24 hours after taking misoprostol. If this happens, call your healthcare provider or go to the nearest emergency room.

Feeling tired is a common side effect of medication abortion. It may help to take time off work or school and to have someone help you with childcare during the first 24 to 48 hours after you take misoprostol, the medication in the **orange box**.

When should I seek urgent medical care during a medical abortion?

You should call your healthcare provider or go to the hospital if you experience any of the following:

- Your temperature is more than 38° C (100.4° F) and it's been more than 24 hours since you took misoprostol, the medication in the **orange box**. It's normal to have a fever or chills in the 24 hours after taking misoprostol. After this, a fever or chills could be a sign of infection.
- Your bleeding is soaking through more than 2 maxi pads an hour for more than 2 hours in a row.
- You have stomach pain or cramps that don't get any better with pain medicine.
- You feel nauseous, throw up, or have diarrhea and it's been more than 24 hours since you took misoprostol, the medication in the **orange box**. It's normal to have these symptoms in the 24 hours after you take misoprostol. After this nausea, vomiting, or diarrhea could be signs of infection.
- You feel dizzy or lightheaded, or your heart is racing.

How effective is a medical abortion at ending a pregnancy?

About **4% to 10%** of people who take Mifegymiso will need to have a follow-up surgical abortion. Usually this is because there is still pregnancy tissue inside the uterus. In some cases, your healthcare provider may offer you a second dose of misoprostol to try and empty the remaining pregnancy tissue from your uterus. If not, you will be referred for a surgical abortion.

How will I feel after a medical abortion?

Most people feel very relieved when the abortion is over. Some people also feel sad or are moody after an abortion. These feelings are partly from changes in hormones now that you are no longer pregnant. Feeling emotional at this time is normal. If you want to talk about how you are feeling before or after a medical abortion you can call Planned Parenthood Ottawa at 613-226-3234.

What else should I know about a medical abortion?

You can return to your regular activities like school, work, or childcare as soon as you feel ready.

You can also have sex as soon as you feel ready. You **can get pregnant again 1 week after** your medical abortion, even if you are still bleeding. Your healthcare provider will let you know when to start using your chosen method of birth control. The pill, the patch, and the ring are usually started the day you take misoprostol, the medication in the **orange box**. If you'd like to have an IUD inserted, this can be done 2 or 3 weeks after your medical abortion.

Most people have their **next period** 4 to 8 weeks after a medical abortion. If you started a new form of birth control after your medical abortion, such as the shot (Depo Provera) or the hormonal IUD (Mirena, Skyla, or Kyleena) this may affect the timing of your period.

Sources

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