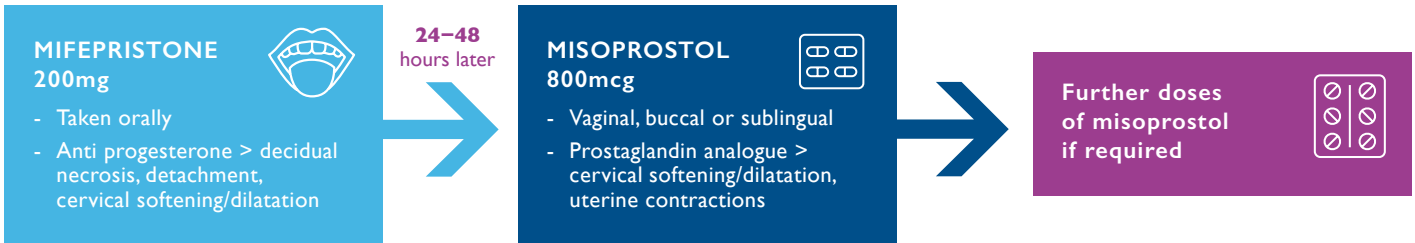


Medical abortion before 12 weeks of pregnancy: Summary sheet

I. DRUGS, MECHANISMS OF ACTION & REGIMENS

If mifepristone is available, use in combination with misoprostol



BOTH SAFE TO TAKE AT HOME. IF LEGAL RESTRICTIONS, TAKE AT FACILITY.

If mifepristone is NOT available



2. DETERMINING PREGNANCY DURATION

- When was the **first day** of your last menstrual period?
- Did your last period come when you **expected** it?
- Was the **bleeding** normal for you?
- Was it as heavy and as long as usual?
- Are your periods usually **regular**?

NEED SCAN/EXAMINATION

- If **LMP uncertainty** or
- **Irregular or absent periods**

CONSIDER SCAN/EXAMINATION

- If used **hormonal contraception/ emeg**

SCAN OR EXAMINATION

3. CONTRAINDICATIONS & CONSIDERATIONS

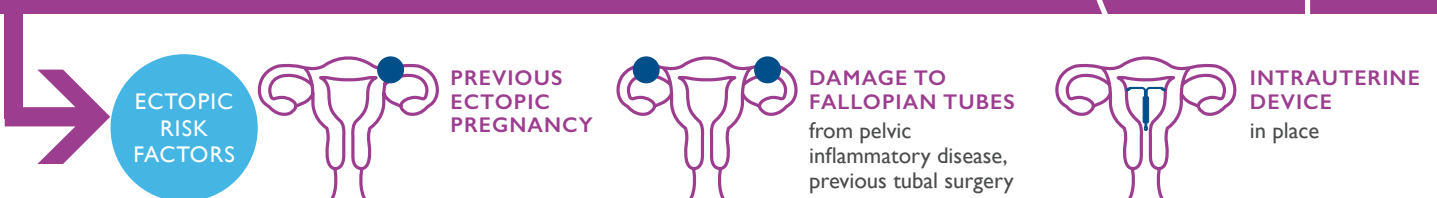
MEDICAL ABORTION

CONTRAINDICATIONS

- Allergies to meds
- Severe uncontrolled asthma
- Inherited porphyria
- Chronic adrenal failure
- Known/suspected ectopic pregnancy

CONSIDERATIONS

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



SYMPTOMS OF ECTOPIC PREGNANCY



Non-ruptured

- Vaginal bleeding/spotting



Ruptured

- Pain under ribs/shoulder tip.
- Severe abdominal pain.
- Signs of shock
- Rebound tenderness.

SYMPTOMS

- Have you had any vaginal bleeding or spotting since your last period?
- Have you had any lower abdominal pain since your last period?

RISKS

- Have you had an ectopic pregnancy in the past?
- Do you have an intrauterine device in place currently or at the time you became pregnant?
- Have you ever been sterilised or had any other surgery on your fallopian tubes (the tubes connecting your ovaries to your uterus) or been told your tubes have been damaged?

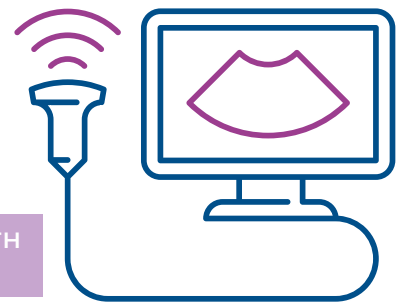
ECTOPIC PREGNANCY RISK

SCAN

IF PREGNANCY TOO EARLY TO BE SEEN, DO A BASELINE BETA HCG

LIKELY TO BE VERY EARLY INTRAUTERINE PREGNANCY

CAN STILL HAVE MEDICAL ABORTION WITH CLOSE FOLLOW UP, IF MEDICALLY STABLE

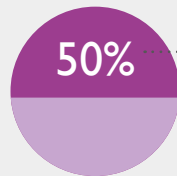


4. RISKS & SIDE EFFECTS

OFFER ANTIEMETICS

Complications/risks	Medical abortion
Continuing pregnancy	1-2 in 100
Need for further intervention to complete the procedure	70 in 1000
Infection	<1 in 100
Severe bleeding requiring transfusion	<1 in 1000

Mifepristone side effects:



Light vaginal bleeding

TAKE ANOTHER PILL IF VOMITING OCCURS WITHIN AN HOUR

Misoprostol side effects:



1 in 10

Hot flushes, chills, transient fever
Nausea & vomiting
Headache,
Diarrhoea, Dizziness

REPEAT MISOPROSTOL IF VOMITING OCCURS WITHIN 30 MINUTES

ABDOMINAL CRAMPING

- More painful than period
- on and off for one week.
- Oral analgesia may be needed.

Take pain relief as directed



VAGINAL BLEEDING

- Heavier than period with clots.
- Lighter bleeding continues for 2-3 weeks.

Most complete within 4 hours, almost all by 24 hours

5. CONFIRMING PREGNANCY HAS ENDED

SELF ASSESSMENT: PREGNANCY TEST

FROM 2 WEEKS:

Low sensitivity urine pregnancy test



OR

FROM 4 WEEKS:

High sensitivity pregnancy test



SELF ASSESSMENT QUESTIONS

Still feel pregnant?

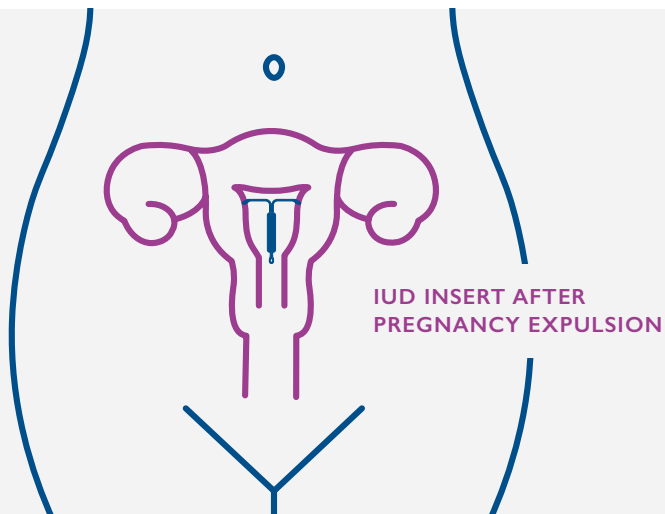
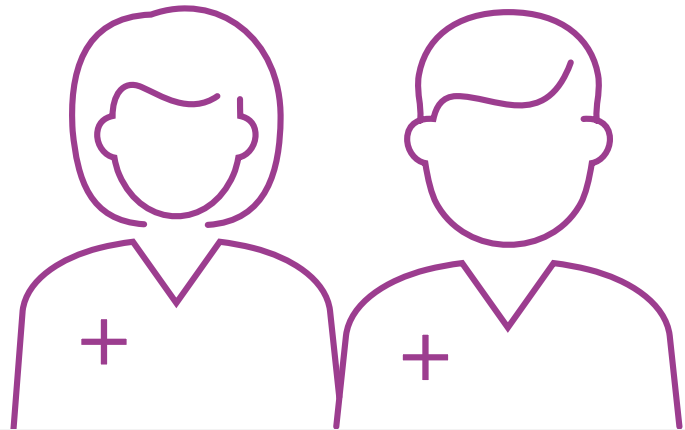
- Tender breasts?
- Ongoing nausea?

Feel like the pregnancy has passed?



WHEN TO SEEK MEDICAL ATTENTION

- **Very heavy bleeding (Seek urgent help)**
- Little/No bleeding 24-hours after misoprostol
- Ongoing/New abdominal pain
- Fever +/-
- Unusual smelling, discoloured vaginal discharge
- Feeling generally unwell
- Ongoing bleeding after 4 weeks



6. CONTRACEPTION

The following contraceptions can be started at time of mifepristone or misoprostol:

- IMPLANT
- INJECTION
- PILLS
- PATCHES
- RING
(CAN BE INSERTED
AFTER PREGNANCY
HAS PASSED)

