

## Information on termination of pregnancy (abortion)

A series of information leaflets on  
termination of pregnancy services  
in Greater Glasgow

Your first doctors appointment

The assessment clinic

### Medical termination of early pregnancy

Surgical termination

Medical termination

## Medical Termination of Early Pregnancy

If you have been offered a medical termination of pregnancy using mifepristone you should have been given some verbal information about the procedure and what to expect during your admission. This is a written copy of that information for you to keep. Please read it carefully. We will be happy to answer any questions that you have.

### How does mifepristone work?

The mifepristone tablet works by blocking the action of progesterone, a hormone needed in pregnancy.

It is used with misoprostol tablets taken by mouth or pessaries (which are put into the vagina) to help expel the pregnancy.

### What are the risks involved?

Many women, worldwide, have used this treatment and it has been proved to have a very good safety record. However, every form of medical treatment has some potential risk or side effect. With this treatment the main risks, although very small, are:

- Haemorrhage (excessive bleeding).  
Around 1.2 cases per 1,000 procedures.
- Infection (up to 10% of all procedures) In Glasgow antibiotics are given as routine which reduces this figure.
- Failure of method requiring a further

procedure (around 6 cases per 1,000 procedures).

There is no evidence to suggest that having an induced termination of pregnancy (abortion) effects a woman's future fertility or ability to have children.

This treatment is not suitable for you if any of the following apply to you:

- High Blood Pressure
- High Cholesterol
- On long term cortico-steroid treatment
- On anti-coagulant treatment

The doctor should have discussed these with you. If any of these conditions apply, please inform the nurse/doctor.

### What happens next?

You will be asked to attend the hospital twice.

- The first visit will only take about 30 minutes to one hour.
- The second visit will be two days later and will take the whole day (and possibly overnight).
- Have breakfast before you come in for BOTH visits.
- Please make any necessary arrangements, such as childcare, for your second visit.

### What will happen on my first visit?

- The doctor or nurse will check your medical details.
- You will be given one mifepristone tablet to swallow with some water. You may feel a little sick.
- If you vomit within 2 hours of taking the tablet you will need to return to the ward to take another tablet.
- Before leaving the ward you will be told when to come back to the ward, and who to contact if you have any problems or queries when you are at home.
- You are advised NOT to drink any alcohol or smoke. If you cannot stop smoking try and smoke less on these days.

### What will happen between my visits?

- Prior to attending for your second visit you may start to bleed and experience period type pains. In most cases these symptoms are only slight and nothing to worry about.
- Please do NOT use tampons.
- There is a small chance that your bleeding may become excessive and you may have severe pain. It is possible that you could expel the pregnancy at this stage but this is very unlikely. If you do expel the pregnancy there is a chance that you might see it. The nursing staff will discuss this with you prior to

commencing your treatment. If you are worried at any time, please contact the ward for support.

- If you need to use pain relief we recommend that you use paracetamol or codeine as other types of medication can affect how well the mifepristone will work.

**Following your first visit you will be asked to return to the ward two days later. It is very important that you keep this appointment, even if you do not think that you are pregnant any more.**

### What will happen at my second visit?

- You will be admitted to the ward. You will expect to stay between 6 and 8 hours
- The nurse will ask you about any pain or bleeding that you may have had over the last two days. If you have had any other symptoms, please mention these. If all is well we will continue your treatment.
- To make your stay more comfortable, please feel free to bring something to read, to eat and drink or a personal stereo.
- If you wish, a partner, friend or relative can stay with you.
- Four vaginal tablets will be inserted into your vagina (usually by a member of the nursing staff). These tablets will help your body expel the pregnancy. You will

start to bleed and experience period type pains. Women vary in their reaction to this treatment. Some women have significant bleeding and pain, while others have minimal bleeding and pain. Most women are somewhere in between.

- You may also suffer from diarrhoea, sickness, headache, dizziness, and hot flushes or chills. There is usually no need to worry about these, but please mention them to the nurse caring for you who will assist in relieving your symptoms.
- You will be asked to use a bedpan every time you use the toilet so that the nurses can check to see if you have expelled the pregnancy. You may possibly see the pregnancy whilst using the toilet. If you are uncomfortable going to the toilet on your own, please ask a nurse who will be happy to support you
- Prior to discharge you will usually be examined vaginally to assess whether the pregnancy has been expelled and the termination is complete. Occasionally it may be necessary to arrange an ultrasound scan to check this. It is very important to go for the scan. If the termination is not complete you may need to stay in overnight. Alternatively, you may be allowed home and asked to return to the ward for review in 7 – 10 days. When you are reviewed, you may need to repeat the second stage of the treatment or we may need to take you to

theatre for a small operation.

- If your blood group is Rhesus negative you will need an injection. The nurse will be happy to explain this to you.
- You will be given a 7-day course of antibiotics to take to help prevent infection.

### **How long will I bleed for after the procedure?**

- You may bleed for 2 to 3 weeks following the termination. However, some women bleed less than this, while others may bleed up until their next period.
- You should NOT use tampons until the bleeding has stopped. This prevents the introduction of infection. You can use tampons again when your next period comes.

### **When will I be able to go home?**

- You should be able to go home after 6-8 hours.
- Very occasionally some women need to stay in hospital overnight following this procedure. Please be prepared for this and make any necessary arrangements, (such as childcare), prior to your admission.

### **When can I resume sexual intercourse?**

- We advise you that you should not resume sexual intercourse until you have stopped bleeding.

- It is possible to become pregnant again shortly after the procedure. For this reason it is important to use contraception immediately. The nursing staff will discuss future contraception with you before you go home. If you are starting on the contraceptive pill you should use condoms as well for the first 7 days or until any bleeding stops.

### **Do I need to contact the ward following discharge?**

You will not need to contact the ward routinely, however if:

- You have severe pain which is not relieved with mild pain killers
- You feel feverish
- You have excessive bleeding
- You have a smelly vaginal discharge
- If your period is later than expected and you still feel pregnant

It is important that you contact either the ward, your local Accident and Emergency Unit or your GP within 24 hours.

### **How will I feel after the termination?**

Women experience a wide range of emotions after a termination of pregnancy and sometimes a mixture of different feelings at different times. Each woman is unique and her feelings are personal to her. Most women find these feelings resolve themselves over time.

- Feelings of loss or sadness are common even though a woman knows she has made the right decision for her. This does not mean the decision was wrong but that it was a very hard decision to make.
- Feelings of anger sometimes surface and these might be directed at others, for example if a woman feels she has not been supported.
- Feelings of guilt or self-blame also occur, for example feeling that she may have not taken enough care or that other people are judging her.
- Some women feel a strong sense of relief and a sense of being unburdened.
- Many women feel isolated following a termination as it is usually a very private experience and it can be hard to talk about it to other people.

If you wish to discuss your feelings following from a termination please contact the ward or the Sandyford Initiative who will be able to arrange someone for you to talk to.

**Should you need to ask any further questions, please do not hesitate to contact:**

### **The Ward**

Telephone details can be written down in the space at the end of this leaflet.

## The Sandyford Initiative

[www.sandyford.org.uk](http://www.sandyford.org.uk)

2-6 Sandyford Place

Glasgow G3 7NB

- **Family Planning and Reproductive Health**  
Tel: 0141 211 8130

Based within the Sandyford Initiative Family Planning and Reproductive Health provide contraception, reproductive and sexual health services. These include referral for termination of pregnancy, pre and post termination counselling and someone to talk to whether your termination was a recent event or a long time ago.

**Services are also offered from a network of community clinics.**

**Please contact for details**

- **Centre for Women's Health**  
Tel: 0141 211 6700

As part of the Sandyford Initiative, the Centre provides information, support and counselling on all aspects of women's health.

## fpa Scotland (The Family Planning Association)

[www.fpa.org.uk](http://www.fpa.org.uk)

Provides confidential advice and support on all aspects of sexual and reproductive health including termination of pregnancy.

**Confidential helpline on 0141 576 5088**

**Monday to Thursday 9am - 5pm**

**Friday 9am - 4.30pm**

### **What if I am not happy with the service I have received and wish to make a complaint?**

Sometimes things go wrong. When they do, those working in the NHS must know so they can put them right for you and also learn from your experience to provide a better service in future.

The NHS Complaints Procedure (1996) aims to make this process more simple, open and fair.

### **Who do I complain to?**

Where possible you should tell the staff involved and they will try to sort out the problem straight away.

### **What if I prefer to talk to someone who is not involved in my care?**

- You can phone or write to the Complaints Manager of the service. They will try to find out what has happened and decide what to do. Contact details must be provided by the Practice, Hospital or Health Board.

- If you wish to complain about a GP and do not wish to deal with the Practice directly then you can contact the Complaints Manager at Greater Glasgow Primary Care Division on 0141 211 0683 who will help you.
- The usual time limit for placing a complaint is a maximum of 6 months from the event but this may be extended in some circumstances.

### **Where can I get more information on complaints procedure?**

Your local Health Council are an independent organisation set up within the NHS to represent patient's interests and to give you information, advice and support.

### **Complaints Officer**

**Greater Glasgow Health Council**

[www.show.scot.nhs.uk/gghc](http://www.show.scot.nhs.uk/gghc)

**44 Florence St**

**Glasgow G5 0YZ**

**Tel: 0141 429 7698**

# Notes and Contact Details

Hospital .....

Address .....

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Ward/clinic .....

Telephone .....

## 1st Appointment

Date .....

Time .....

## 2nd Appointment

Date .....

Time .....

