

Medication Abortion: Patient Information

What is a medication abortion?

A medication abortion can be used to end an early pregnancy instead of an in-clinic abortion procedure. A medication abortion uses two medications, mifepristone and misoprostol, to cause a person to pass a pregnancy, like a miscarriage. About a third of all early abortions in the United States and Canada are medication abortions.

Why do people choose medication abortion?

When a person is early in pregnancy, they can choose either a medication abortion or an in-clinic abortion. Some people choose medication abortion because they want to avoid an in-clinic procedure. Others choose medication abortion because it feels more natural. Still others prefer medication abortion because it can be done in the privacy of their own home. People who prefer in-clinic abortion often want to have the abortion completed quickly and predictably or do not want to experience cramping and bleeding at home. Both types of abortion are safe and effective, and which type to choose is a up to each person.

When is medication abortion used?

Medication abortion can be provided as early as a person has a positive pregnancy test and up through 11 weeks of pregnancy.

How the medications work

Mifepristone. Mifepristone works by blocking the hormone progesterone, which is necessary to sustain pregnancy. Without this hormone, the lining of the uterus breaks down, the cervix (opening of the uterus) softens, and the pregnancy begins to detach. Mifepristone alone is not very effective at ending the pregnancy but helps make the combined medication abortion regimen more effective.

Misoprostol. Misoprostol works by causing uterine contractions and opening the cervix, causing the pregnancy tissue to expel. The day after taking mifepristone, four misoprostol tablets are placed between the cheek and gum or in the vagina. When a person is more than nine weeks into a pregnancy, a second dose of misoprostol four hours after the first dose may be used. Misoprostol causes the uterus to contract and the pregnancy to pass.

What are the Steps of a Medication Abortion?

Medication abortion is a process that takes a few days. On the first day, the person swallows one tablet of mifepristone. This can be done in the clinic or at home. About 10% of people will have bleeding or cramping after mifepristone, but most people can continue their normal activities, including going to work.

In the next day or two, the person takes misoprostol at home or in another convenient location. Bleeding and cramping usually start within one or two hours of taking misoprostol and may last a few hours as the pregnancy passes.

The clinic will follow-up with you either in-person or over the phone to be sure that the abortion is complete. Follow-up may include an ultrasound or blood tests. More than 95% of patients who take

mifepristone and misoprostol have a complete abortion with no need for further care. Some patients may need an in-clinic procedure because they have heavy bleeding or to complete the abortion.

What Does a Medication Abortion Feel Like?

Because medication abortion is like having a miscarriage, all patients can expect to have cramping and bleeding as the pregnancy passes. The range of pain and bleeding people experience during medication abortion is wide, and your provider will give you instructions and medications for managing pain.

Most people have cramps for several hours, and many pass blood clots as the pregnancy is passing. Cramps and bleeding usually begin to ease after the pregnancy tissue has been passed, but lighter bleeding, like a period, may last for a few weeks after medication abortion. Usually the pregnancy tissue is wrapped in a blood clot so you will not see anything other than large clots. A tiny amount of fetal tissue may be visible after 10 weeks if you look for it carefully.

Some people will have side effects from misoprostol. These side effects may include headache, nausea, vomiting, diarrhea, fever, chills, or fatigue. These side effects are self-limited and go away within a few hours after using misoprostol. If a person experiences fever or pain more than 24 hours after using misoprostol, she should call the clinic.

Most people have their first period around six weeks after a medication abortion. Some report that their first regular menstrual period after a medical abortion is heavier, or longer, or in some other way different from normal for them. By the second period after the abortion, cycles should be back to normal.

Possible Complications

More than 95% of people will have a successful medication abortion and don't need any further treatment. However, some people will need an aspiration because the medication abortion didn't work, or they are experiencing heavy or bothersome bleeding. Rarely, patients may need emergency care like a blood transfusion or emergency uterine aspiration for bleeding, or antibiotics for infection.

The risk of death after using medication abortion is extremely low, occurring in less than 1/100,000 people who use medication abortion (1). To put it in perspective, the risk of death after childbirth is about 20 times higher (2).

People who use medication abortion do not have any long-term health effects. There are no effects on a person's fertility--a person can have another pregnancy as soon as she is ready.

References:

1. Jatlaoui TC, Eckhaus L, Mandel MG, Nguyen A, Oduyibo T, Petersen E, Whiteman MK. Abortion surveillance – United States, 2016. *MMWR Surveill Summ.* 2019;68(1):1-41.
2. Centers for Disease Control and Prevention. Pregnancy mortality surveillance System. 2020. Available at: www.cdc.gov/reproductivehealth/MaternalInfantHealth/PMSS.html. Accessed March 2, 2020