

# PROTECT YOUR FUTURE REPRODUCTIVE HEALTH

## FUTURE PRE-TERM DELIVERIES

- Complications associated with an abortion can make it more difficult to become pregnant in the future or carry a pregnancy to term.<sup>18</sup>
- Some research suggests a possible link between abortion and an increased risk of: vaginal bleeding during early pregnancy, preterm birth, low birth weight, placenta problems.<sup>19</sup>

## STDs & PELVIC INFLAMMATORY DISEASE

- PID can often be caused by gonorrhea or chlamydia infections. These...bacteria may enter your reproductive tract anytime the normal barrier created by the cervix is disturbed. This can happen after intrauterine device (IUD) insertion, childbirth, miscarriage or abortion.<sup>20</sup>
- If women applying for termination of pregnancy with chlamydia infection are not treated, 10-60% will develop pelvic infection after abortion.<sup>21</sup>

## MENTAL HEALTH

- One woman's emotional reaction to an abortion may be different from another's...one may feel relief, another may feel sad and may feel a sense of emptiness and guilt. Some women find those feelings go away with time, others find them more difficult to overcome and that negative feelings can last longer if a woman has not had to make major life decisions or has serious emotional problems.<sup>22</sup>

## BREAST CANCER <sup>23</sup>

Medical experts continue to debate the link between abortion and breast cancer today. Research\*\* shows:

- Carrying pregnancy to full term gives a measure of protection against breast cancer especially in a woman's first pregnancy. Terminating a pregnancy results in loss of that protection.
- The hormones of pregnancy cause breast tissue to grow rapidly in the first 3 months, but it is not until after 32 weeks LMP that breasts mature enough to produce milk and become more cancer resistant. That's why a premature birth before 32 weeks LMP significantly increases a woman's risk of breast cancer, as with late term abortions.
- The majority of worldwide studies report a positive association (increased risk) between induced abortion and later development of breast cancer.

*\*\*Citations for medical journals & medical institutes for above research found in endnote number 23.*

1. Rue VM, Coleman PK, Rue JJ, Reardon DC (2004). "Induced abortion and traumatic stress: A preliminary comparison of American and Russian women." Medical Science Monitor; 10 (10): SR5-16.
2. U.S. Food and Drug Administration, (2016, March). Mifeprex® medication guide: <http://www.fda.gov/downloads/Drugs/DrugSafety/UCM088643.pdf>
3. Hill, M.A. 2017 Embryology Musculoskeletal System-Limb Development: [https://embryology.med.unsw.edu.au/embryology/index.php/Musculoskeletal\\_System\\_-\\_Limb\\_Development](https://embryology.med.unsw.edu.au/embryology/index.php/Musculoskeletal_System_-_Limb_Development)
- 3.1 See <http://www.womenshealth.gov/pregnancy/youre-pregnant-now-what/stages-pregnancy>
4. U.S. Food and Drug Administration, (2016, March). Mifeprex® medication guide. Online pages 16-19 at <http://www.fda.gov/downloads/Drugs/DrugSafety/UCM088643.pdf>
5. Department of Health and Senior Services, Missouri's Informed Consent Booklet, 2015. Page 14. Online at [www.health.mo.gov/informedconsent](http://www.health.mo.gov/informedconsent)
6. Ibid.
7. Ibid. Pages 3-4
8. American College of Obstetricians and Gynecologists. Online at <http://www.acog.org/Patients/FAQs/Induced-Abortion#first>
9. Ibid.
10. Ibid.
11. Department of Health and Senior Services, Missouri's Informed Consent Booklet, 2015. Pages 4, 5. Online at [www.health.mo.gov/informedconsent](http://www.health.mo.gov/informedconsent)
12. American College of Obstetricians and Gynecologists. Online at <http://www.acog.org/Patients/FAQs/Induced-Abortion#surgical>
13. Ibid.
14. American Pregnancy Association. Online at <http://americanpregnancy.org/unplanned-pregnancy/surgical-abortion/>
15. American College of Obstetricians and Gynecologists. Online at <http://www.acog.org/Patients/FAQs/Induced-Abortion#surgical>
16. Department of Health and Senior Services, Missouri's Informed Consent Booklet, 2015. Page 5-7. Online at [www.health.mo.gov/informedconsent](http://www.health.mo.gov/informedconsent)
17. Ibid. Page 15
18. Ibid. Page 14
19. Mayo Clinic: <http://www.mayoclinic.org/healthy-lifestyle/getting-pregnant/expert-answers/abortion/faq-20058551>
20. The Mayo Clinic, Pelvic Inflammatory Disease Causes, available at <http://www.mayoclinic.org/diseases-conditions/pelvic-inflammatory-disease/basics/causes/con-20022341>
21. National Center for Biotechnology Information, U.S. National Library of Medicine Ugeskr Laeger. 1992 Oct 26;154(44):3047-53.
22. Department of Health and Senior Services, Missouri's Informed Consent Booklet, 2015. Page 15. Online at [www.health.mo.gov/informedconsent](http://www.health.mo.gov/informedconsent)
23. CareNet® 2016. Before You Decide Brochure. Page 21.



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### FREE & CONFIDENTIAL MEDICAL SERVICES INCLUDE:

Pregnancy Testing, Options Consultation, Pregnancy Verification, Limited Obstetrical Ultrasound Services, STD Testing & Treatment Services

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# ABORTION

## INFORMATION INCLUDES

Abortion Procedures & Side Effects  
Reproductive & Other Health Risks  
Fetal Development

*84% of an American sample of women said they did not receive adequate counseling before making the decision to have an abortion. 64% felt pressured by others.<sup>1</sup>*

## WITHIN 10 WEEKS OF LMP\*

RU-486 (Mifepristone [Mifeprex] and Misoprostol)

The FDA approved Mifeprex® (The Abortion Pill)<sup>2</sup> regimen use up to 70 days from LMP for medical abortion is:

- Day 1 at the Provider's Office: Patient is given Mifeprex tablets to swallow which causes the death of the fetus. Additional visits will be up to the Provider's discretion.<sup>2</sup>
- 24–48 hours later: Misoprostol tablets are taken which causes cramping and expels fetus. Beyond 8 weeks gestation, parts of expelled fetus may be identifiable.<sup>2, 3, 3.1</sup>
- Follow up at Provider's Office occurs 1–2 weeks after taking initial pill: Patient's Provider will check whether the baby has died and been expelled from the uterus. If not and still pregnant, the Provider will discuss the need for a surgical abortion.<sup>2</sup>

### RISKS & SIDE EFFECTS:

- FDA bordered box warning: "Warning: Serious and sometimes fatal infections and bleeding."<sup>4</sup>
- Painful cramping, nausea, vomiting, diarrhea, heavy bleeding, uterine blood clots, fever, allergic reaction to medication, infection, and incomplete abortion.<sup>5</sup>
- Signs that require care include heavy bleeding, severe abdominal pain, or fever.<sup>6</sup>

### FETAL DEVELOPMENT (WEEKS 6–10):<sup>7</sup>

- Nerves, brain and spinal cord begin to develop
- Heart is beating at 6 weeks and can be seen on ultrasound
- Eyes, ears, arms, and legs begin to form
- Muscles and bones begin to develop
- Lungs, stomach, liver, and intestines begin to form

## 6 TO 12 WEEKS AFTER LMP\*

Suction Aspiration or Vacuum Aspiration

- A speculum is inserted into your vagina to hold it open. Your cervix usually is dilated (opened) so that a suction tube can fit through it. Your cervix is dilated either at the time of the procedure or before the procedure. When it is done at the time of the procedure, a series of dilators are inserted into and withdrawn from the cervix to gradually increase the size of the opening. When it is done before the procedure, different techniques can be used. Special dilators called laminaria can be inserted into the cervix. Medications also can be taken by mouth or placed in the vagina to dilate the cervix.<sup>8</sup>
- After the cervix is dilated, a thin, plastic tube is inserted into the uterus. It is attached to a suction or vacuum pump, which removes the pregnancy.<sup>9</sup>

### RISKS & SIDE EFFECTS:<sup>10</sup>

- Cramping, possible heavy bleeding, intrauterine blood clots, damage to the cervix and perforation of the uterus.
- Pelvic infection, incomplete abortion, and anesthesia-related complications.

### FETAL DEVELOPMENT (WEEKS 8-12):<sup>11</sup>

- Heart has 4 chambers
- Nervous system becoming more responsive
- Muscles and bones are developing
- Eyes, ears, arms and legs are identifiable
- Twenty buds for future teeth appear
- Fingers and toes are forming with soft nails (baby has beginning ridges of finger prints)
- Baby begins random body movements
- Fetal heartbeat can be heard with a heart Doppler monitor

**DISCLAIMER:** This fact sheet is designed as an informational tool only. It is not intended to replace the medical advice or care from your primary medical practitioner who knows and understands your health history best. Please discuss your medical concerns with your doctor.

## 13 TO 21 WEEKS AFTER LMP\*

Dilation and Evacuation (D&E)

- Dilation and evacuation is a second-trimester surgical abortion that takes place after 13 weeks of pregnancy.<sup>12</sup>
- Dilation and evacuation usually can be done as outpatient surgery, meaning that you can go home the same day. You may need to visit your health care provider the day before to take medications or start having your cervix dilated. Your cervix is dilated with dilators, laminaria, or medication. General anesthesia or regional anesthesia may be used for pain relief. The fetus is removed through the vagina. Suction via a cannula is used to remove any remaining tissue.<sup>13</sup>
- After surgical methods of abortion, fetal remains are usually examined to ensure everything was removed and that the abortion was complete.<sup>14</sup>

### RISKS & SIDE EFFECTS:<sup>15</sup>

- Nausea, fever, vomiting, diarrhea
- Soreness (pain) or cramping may occur for 1 or 2 days after the procedure. Bleeding may last for up to 2 weeks.
- Incomplete abortion: If the abortion is incomplete, a follow-up procedure may be needed. This is more likely to happen with a medical abortion.
- Infection
- Heavy bleeding: Some bleeding after an abortion is normal. Bleeding is rarely heavy enough to require a blood transfusion.
- Injury to the uterus and other organs: The risk increases with the length of the pregnancy.

### FETAL DEVELOPMENT (WEEKS 13-22):<sup>16</sup>

- Baby swallows, can suck thumb, kidneys make urine
- External genitals have developed and sex identified
- Limb movements more coordinated; can grasp
- Skin begins to form
- Facial expressions possible as baby can move mouth and blink
- All organs/structures formed and continue to grow
- Respiratory movements occur
- Baby sleeps and wakes regularly
- Baby feels pain at 20 weeks from last period<sup>17</sup>