MEDICAL ABORTION

Medication abortion (also called the **abortion pill**) can be taken up to 70 days (10 weeks pregnant) after the start of your last menstrual period.

- It's called RU-486 and was approved by the FDA in 2000; it is also called a medical or chemical termination.
- The pill is actually two drugs, mifepristone and misoprostol, taken in two separate doses.
- It has been used "off-label" beyond 10 weeks.
- It is not an option for people with certain medical conditions.
- The abortion pill is not the same as the emergency contraceptive, The Morning After Pill or Plan B One Step.
- Abortion pill reversals possible if action is taken after the first dose.

Action – The first medication, Mifeprex blocks progesterone. Progesterone is a hormone that is necessary for the pregnancy to survive. Without progesterone, the embryo dies. The second medication, Mifepristone, causes cramping, expelling the embryo and uterine contents.

Side effects – Cramping and bleeding are expected. Bleeding may be like a heavy period. Bleeding can last 9 to 16 days and possibly up to 30 days. Other possible side effects include nausea, vomiting, diarrhea, fever, chills, weakness, dizziness and headache.

Complications – Possible complications include heavy bleeding requiring surgery to stop the bleeding, and serious infection. Before taking any medication, you should discuss the risks with your doctor and know what do to if complications arise.

SURGICAL ABORTION

Surgical abortions are done by dilating the cervix and passing instruments into the uterus to suction, grasp, pull, and scrape the pregnancy out. The exact procedure is determined by the fetus' level of growth.

Aspiration/Suction – 4-14 weeks estimated gestational age. This surgical abortion is done throughout the first trimester. The patient typically receives pain medication and antibiotics. For very early pregnancies (4-7 weeks LMP), after local anesthesia is given, a long, this tube is inserted into the uterus and the baby is suctioned out.

Dilation and Evacuation(D&E) – 15 weeks estimated gestational age and up. Most second trimester terminations are performed using this method. The cervix must be opened wider than in the first trimester abortion because the baby is larger. Local anesthesia, oral, or intravenous pain medications and sedation are commonly used. Up to 16 weeks gestation, the uterine contents are suctioned out, and remaining fetal parts are removed with a forceps tool. A curette tool may also used to scrape out the remaining tissue. After 16 weeks, much of the procedure is done using forceps to grasp, tear, and pull the baby's body apart and out through the cervical opening. **D&E After Viability**- From about 24 weeks estimated gestational age and up. This procedure typically takes 2–3 days and is associated with increased risk to the life and health of the mother. General

Plan B

What is Plan B - The Morning After Pill? Are you thinking of taking the Morning After Pill (MAP) or Plan B and have questions? First, The Morning After Pill (MAP), also known as Plan B One-Step® is not effective in ending an already existing pregnancy.1 To make sure you are not already pregnant from a previous sexual encounter Next Step Pregnancy Solutions and Services can provide you with a free laboratory quality pregnancy test. Stop in or contact us to learn more about how we can assist you.

How does it work?

The MAP can delay or prevent ovulation, which is the release of an egg from the ovary.2 Even though sperm can fertilize an egg within minutes after intercourse, the MAP can prevent the egg from being fertilized, if taken within 72-hours3, by altering the lining of the uterus, which would cause an early abortion.4

Some important information you should know:

- Overtime, the repeated use of emergency contraception can increase the failure rate.5
- Some side effects that could result from taking MAP are changes in your period, nausea, lower abdominal pain, fatigue, headaches and dizziness.7
- Taking this medication will not protect you from any sexually transmitted diseases.8
- The MAP should not be used as routine birth control.9

This information is intended for general education purposes only and should not be relied upon as a substitute for professional medical advice.

References:

1. Plan B One-Step® product information, page

http://www.planbonestep.com/pdf/PlanBOneStepFullProductInformation.pdf

(Accessed June 26, 2013) []

ABORTION FACTS

Follow-up – It is important to follow-up with your doctor after taking this medication regime to see if an abortion has occurred and to assess for complications.

Abortion pill Reversal

Have you taken the first dose of the ABORTION PILL MIFEPRISTONE (Mifeprex or RU-486)? Are you questioning your decision of taking the abortion pill? We are waiting to help you! There is an effective process for reversing the abortion pill, called ABORTION PILL REVERSAL. For additional information contact our office at 814-226-7007, go online at https://www.abortionpillreversal.com OR CALL THE 24/7 HOTLINE:(877) 558-0333 At Next Step Pregnancy Solutions and Services, we are here for you. We have the information you need and free pregnancy tests that can help you process your next step. Let's talk about your options.

purposes only and should not be relied upon as a substitute for professional medical advice. Sources: Kaiser Family Foundation, "Issue Update: Mifepristone: An Early Abortion Option," July 2001. Mifeprex® Medication Guide, Danco Laboratories, LLC,

revised 4/22/0

This information is intended for general education

anesthesia is usually recommended, if available. Because of the risk of a live birth, drugs may be injected into the fetus or the amniotic fluid to cause fetal death before starting the procedure. The cervix is dilated wide, the amniotic sac is broken, and forceps are used to dismember the fetus. The "Intact D&E" pulls the fetus out legs first, then compresses the skull in order to remove the fetus in one piece.