Medical Termination of Pregnancy

Patient information leaflet

Directorate of Women and Children’s Services
This leaflet aims to tell you what to expect during and after your medical termination of pregnancy (TOP).

Medical termination involves having medication that will end your pregnancy. If you prefer the alternative to this is surgical treatment. This is an operation to remove the pregnancy from the womb and is carried out under general anaesthetic.

How is it done?
Two separate visits to hospital 36 – 48 hours apart are needed. You will be given an appointment to return to the clinic for the first part of the treatment. You will be given a tablet, called Mifepristone, to swallow. The tablet works by altering the hormone balance needed for a pregnancy to continue. You will be asked to remain at the hospital for 1 hour to observe that you do not vomit after taking the tablet. If you do vomit you will need to take another tablet.

How will this tablet affect me?
You may have no symptoms however you may get some vaginal bleeding and cramp like pain. You should use sanitary towels, not tampons to help reduce the risk of infection. You can take Paracetamol or Cocodamol for pain. (not Aspirin or Ibuprofen). If you have heavy bleeding or pain you are unable to manage or you are worried contact the ward and speak to one of the nurses, they will be happy to help.

24 hour contact number: - Tel: 0191 445 2021

Second part of treatment

Date........ Time.........

You should return to ......................................................... on the agreed date for the second part of the treatment.
Second Part of treatment
When you return to the hospital the nurse will carry out a vaginal examination to place some tablets called Misoprostol as high as possible into the vagina. This is not usually painful.

What can I expect following the medication?
You can eat and drink as you want, however some women experience nausea and diarrhoea. Usually 2-4 hours after having the Misoprostol you will start bleeding and have pains like period cramps.
It is difficult to say when the pain will start and finish, or how much pain you will have, as this is varies from women to women. For some women it is quite mild while others it is very painful. The amount of bleeding also varies from women to women but can be quite heavy with some blood clots. You should use sanitary towels not tampons, so you can observe how much you bleed. Tampons could also increase the risk of infection.

Treatment in Hospital
You can expect to stay on the ward for 6-8 hours or until the doctor or nurse is happy that you are well enough to go home. If you have heavy bleeding you may need to stay overnight. You can bring someone with you who can stay for the day. Wear comfortable clothing and bring an overnight bag. You will be asked to use bedpans when you go to the toilet so that pregnancy loss can be observed by nursing staff. You should ask the nurse for medication to help relieve your pain.

Treatment at home
If you are going home immediately after your treatment you will need a responsible adult with you and transport home. You should not use public transport. You should take the pain killing medication when you get home. Check the instructions on the packaging for the correct dose.

What happens to the pregnancy tissue
All pregnancy material will be treated with care and respect. We have in place arrangements for sensitive disposal. You are unlikely to pass anything recognisable if you were less than 7 weeks pregnant. However you may see a small sac. If you are at home you can use the toilet as you would
with a heavy period. If you prefer, you can bring the pregnancy tissue to Women’s Health Clinic, in a clean dry container. It will be sent to the pathology lab for examination. All pregnancy tissue is sent for cremation to Saltwell Crematorium in Gateshead. If you do not want to be included please speak to your nurse.

**Are there any risks**

- Heavy bleeding during the procedure is not common, occurring in 1 in 1000 people. If you are at home and find that you need to change your sanitary pad every 30 minutes or if the bleeding is so heavy you are unable to leave the toilet and it continues for more than one hour you should come to Accident and Emergency Department.
- Failure occurs in 1 in 1000 while incomplete termination occurs in 1 in 100 people. If this happens arrangements would be made for you to come to hospital for further treatment. This may involve surgical treatment.
- Post termination infection can occur in 1 in 10 people. To reduce this risk you will be given a course of antibiotics. You should take the whole course of tablets after your termination.
- Emotional distress. This is common before and immediately after termination of pregnancy. For some women distressful feelings may be more prolonged and difficult to cope with. If you do feel upset it often helps to talk to someone about it. Your GP may be able to arrange some counselling support.

**What can I expect after the treatment**

You may continue to have abdominal discomfort for the next few days. You can take Paracetamol or Cocodamol as directed on the package. If pain is severe or prolonged seek advice from your GP. You can expect to have some bleeding, which should gradually stop over two weeks. If bleeding continues to be heavy or you have severe pain or have an unpleasant vaginal discharge or high temperature contact your GP or the Women’s Health Clinic as soon as possible. These may be signs of infection or incomplete treatment. You should use sanitary towels, not tampons to reduce the risk of infection and finish the course of antibiotics you have been given.

You may feel tired for the next two or three days, you may want to take time off work.
If your periods normally occur every month, the first period after treatment usually happens within six weeks. It may be heavier than usual. Your periods will return to their normal pattern, but this can take a few months.

Follow up after termination will be discussed with you in clinic.

**What about contraception?**
It is important that you start some form of contraception as soon as possible after your termination. It is possible to get pregnant before your next period if you do not.

If you decide to use:
- **Depo provera (injection)**; this can be given on the ward before you go
- **The “pill”**; the first tablet should either be taken the night of your treatment or the next morning. We can arrange a supply of pills for you before you go home.
- **A coil or implant**; can be fitted in the family planning clinic or at your GP surgery. You must use another type of contraceptive until you have this fitted.

**Contact numbers:**

Nurse Practitioner/ Women’s Health Clinic
Tel: 0191 4452374 or 4452146
Monday – Friday  08.30am – 4.30pm

**24 hours**

Ward 21
Tel: 0191 4452021
North East NHS Surgery Centre Level 2
Tel: 0191 4453005

**Further information is available from:**

[www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)  or Tel: NHS Direct help line 0845 4647

British Pregnancy Advisory Service
[www.bpas.org](http://www.bpas.org)
**Data Protection**

Any personal information is kept confidential. There may be occasions where your information needs to be shared with other care professionals to ensure you receive the best care possible.

In order to assist us improve the services available your information may be used for clinical audit, research, teaching and anonymised for National NHS Reviews. Further information is available in the leaflet Disclosure of Confidential Information IL137, via Gateshead Health NHS Foundation Trust website or the PALS Service.

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**This leaflet can be made available in other languages and formats upon request**