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| Early Surgical Abortion LOCAL ANAESTHETIC WITH ORAL SEDATION |
| Patient Information – Gynaecology Services |

What is Early Surgical Abortion?

An Early Surgical Abortion is a short minor procedure to end a pregnancy. It involves passing a small flexible tube via the vagina through the cervix (entrance of the womb) and gentle suction is used to empty the uterus (womb). A local anaesthetic, light sedative and intravenous (IV) pain relief is used, meaning you do not need to have a general anaesthetic (be put to sleep).

# Preparing for your procedure

* Please come to Gynae Procedure Unit (GPU), Level 4, Riverside, Christchurch Hospital. Most people need to stay for around 4-5 hours which includes an appointment with a doctor (who can answer any further questions you have), pre-procedure checks with a nurse, the procedure itself and recovering from the procedure.
* Your appointment is in the morning, so please have a light breakfast prior to 7 am and then water only.
* You cannot drive yourself home after your surgery due to the medications you have had. Please make arrangements for your transport home.
* You are welcome to bring a support person with you.
* Your pregnancy tissue can be returned to you after the procedure if you wish. A nurse will discuss this with you.
* Before your procedure you will be given a hormone tablet called Misoprostol to place under your tongue to dissolve. Misoprostol is a medicine which allows the cervix (entrance of the womb) to open. The most common side effects of Misoprostol are abdominal pain, nausea, diarrhoea or constipation and feeling like you have a fever.
* You will be given oral sedation and oral pain relief.
* If your pregnancy is over 12 weeks, we may also ask you to take medication the day before (Mifepristone) which helps with stretching open the cervix (entrance of the womb).
* An intravenous (IV) drip/line will be put in your arm so you can receive strong pain relief right before your procedure begins.
* Please let us know if you need a medical certificate if you require time off work.

# What happens during the procedure?

* You will be shown into the procedure room.
* You are then given intravenous pain relief through the intravenous (IV) line in your arm by a nurse. The doctor will examine you and give the local anaesthetic into the cervix (entrance to the womb) to make it numb. This starts to work in a couple of minutes. You may also be offered nitrous oxide, also known as laughing gas.
* Once you are comfortable, the uterus (womb) will be emptied with a suction catheter. You may experience a cramping sensation in your tummy as the doctor finishes the procedure, this eases quickly. The procedure takes about 10 minutes.
* If you have requested an Intrauterine Contraception Device (IUCD)/Mirena as contraception this can be inserted into your uterus (womb) at the end of the procedure.
* You will return to the ward to rest. Your blood pressure and pulse will be checked. You will be given a warm drink and made comfortable. It is normal to have some bleeding and cramping.
* You will be able to go home once you feel comfortable which is usually around an hour after the procedure.

# What are the risks?

* You will see a doctor who will give you a full explanation of this procedure and the risks and answer any questions.
* It is a safe procedure and complications are rare. Like all procedures there are some potential risks.
* After the procedure some tissue may remain in the uterus (1 in 100 people) and you may need to have medication or a further procedure to remove it.
* Infection occurs in approximately 1 in 100 people.
* Heavy bleeding may occur and require treatment. 1 in 100 people need a blood transfusion if this occurs.
* There may be damage to the cervix (entrance of the womb), and the uterus (womb). This occurs in less than 1 in 1000 people. This could be a tear or perforation and may cause damage to the bladder and bowel if more severe. If such a complication occurred, you may need antibiotics and a surgery under general anaesthetic.
* A failed procedure (continuing pregnancy) is rare (1 in 1500). We do not recommend continuing the pregnancy if this occurs. We will arrange a further procedure for you if this occurs.

# What to expect after an abortion

To help avoid infection, for **two weeks after** an abortion:

* Do not put anything into your vagina.
* Do not use tampons or period cups- please use sanitary pads instead.
* Do not have vaginal sex (penis, fingers, mouth or sex toys could introduce infection).
* Avoid using a spa or swimming pool.
* **Contraception: you can get pregnant immediately if you have unprotected sex**. We will provide information about options for contraception and help you decide what is best for you. We can provide some options on the day of your procedure or arrange for follow-up.
* **Emotions**: It is quite normal to feel a range of emotions following an abortion (eg. relief, sadness, emptiness). If these feelings continue and you would like support, you can contact your GP or the counselling service at GPU which is confidential and free of charge.
* **Bleeding**: the amount of bleeding varies. It is normal to have some bleeding including small clots. Typically, after a surgical abortion bleeding can last from 3 to 7 days.
* **Periods**: your next period should come in 3-5 weeks. It may be heavier than usual, and you may pass clots. Your period may not occur with some types of contraception.
* **Pain**: You may experience crampy pain. You can use pain relief medication such as paracetamol and ibuprofen. A hot water bottle may be comforting.

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| **It is important to get medical help if:*** You are soaking one or more sanitary pads in an hour or passing heavy clots.
* You feel lightheaded or faint or have a high fever (over 38 degrees) or feel achy (these can be signs of an infection).
* You have severe continuous pain that is not relieved by mild pain relief such as paracetamol.
* You have a smelly vaginal discharge (can be a sign of infection)
* You do not get your period within 6 weeks of having the abortion.
* You continue to feel pregnant.

**Until 4:00pm today**, phone GPU 03 378 6386**After 4:00pm today**, phone GAU 03 364 4805 (7:30 am-10:00 pm)(Gynaecology Assessment Unit) 027 285 5863 (10:00pm-7:30 am)**After 48 hours**, phone your GP or after-hours clinic.**If it is an emergency**, call an ambulance (**111**) |

For more information about:

hospital and specialist services, go to www.cdhb.health.nz | your health and medication, go to www.healthinfo.org.nz