### Medical Abortion

**How does it work?** Methotrexate is used to stop the pregnancy from growing. You then use misoprostol pills at home that cause your uterus to contract and push out the pregnancy tissue.

**How far along can the pregnancy be?** It can be up to seven weeks from the first day of your last period.

**How long does it take for the abortion to be complete?** Most women need two visits including the required one-week follow-up but a few will need three or more visits. It can be unpredictable when the pregnancy will pass, although 80 percent are done within one week. Bleeding usually starts 1-12 hours after using the misoprostol and may be heavy for 4-8 hours and then continue more like a period for up to a few weeks. There is about a 20 percent chance of a delayed reaction, which can make the process take longer.

**How painful is it?** It varies from mild to very strong cramping, usually at its worse for 4-8 eight hours or more after you have taken the misoprostol and the pregnancy is passing. You will receive medications to take at home to help manage pain. Milder cramps may continue for several days to several weeks.

**How much will I bleed?** Heavy bleeding and clots are common during the abortion process for four to eight hours or more. Afterwards, bleeding like a period is common for an average of 10-17 days.

**Can the abortion fail?** One to two percent of the time the pregnancy will continue to grow and a surgical abortion is necessary. About 20 percent of women have a delayed reaction to the misoprostol and require more time for the pregnancy to come out, and 4-5 percent of them will opt for or need a surgical abortion.

**What are the possible complications?** Methotrexate and misoprostol have been formally studied and used safely. The risk of excessive bleeding or serious infection is very low. Some women may be allergic to the medications.

**What are common side effects?** Medication side effects include nausea, vomiting, diarrhea, headache, dizziness, fever or chills. Many women have no side effects.

### Surgical Abortion

**How does it work?** A doctor uses gentle suction to remove the pregnancy and blood from inside the uterus.

**How far along can the pregnancy be?** It can be as early as five weeks from the first day of your last period up to 14 weeks at Everywoman’s Health Centre. Abortions after this time are available at other clinics.

**How long does it take for the abortion to be complete?** Most women only require one visit. The actual procedure takes only four to eight minutes.

**How painful is it?** Some women experience mild to very strong cramping for a few minutes during the abortion procedure and for several minutes after. Medication, including conscious sedation during the procedure, will be offered to help manage pain. Milder cramps may continue for several days.

**How much will I bleed?** There is often not much bleeding immediately after procedure. Some women begin to bleed three to seven days afterwards and bleeding can continue for several weeks.

**Can the abortion fail?** There is about a one in 300 chance of needing the procedure repeated because of blood clots forming or tissue remaining in the uterus.

**What are the possible complications?** Surgical abortion has been formally studied for over 25 years. Injury to the uterus is very rare in the first trimester. Excessive bleeding is very rare. Infection or needing a re-suction happens in less than one percent of cases.

**What are common side effects?** Some women have dizziness, nausea or vomiting.

**Are there emotional issues specific to this method?** Some women feel anxious in a medical setting or with the idea of surgery.

**Can it treat an ectopic (tubal) pregnancy?** No, but the ultrasound done before a surgical abortion often detects a possible ectopic pregnancy.
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**Are there emotional issues specific to this method?** Some women are anxious waiting for the abortion process to complete. Viewing the pregnancy tissue can also be difficult for some.

**Can it treat an ectopic (tubal) pregnancy?** Methotrexate is the best treatment for early ectopic pregnancies with the supervision of a doctor.

**What are the advantages of this method?**
- Effective and safe for very early pregnancies.
- Avoids anesthesia, instruments or vacuum aspiration, unless it fails (however, blood work and a vaginal ultrasound are required and an injection is also needed if your blood type is RH negative).
- Induces a miscarriage-like process, so if you need someone in your life to think it is a miscarriage, this may be the best option.
- Being at home instead of a clinic during the actual abortion may seem more comfortable and private (although overall, more visits to the clinic are usually necessary with a medical abortion).

**What are the disadvantages of this method?** It takes days and sometimes weeks to end a pregnancy. It is not completely predictable – there is more uncertainty about when you will bleed and pass the pregnancy. Bleeding can be very heavy and last longer than with a surgical abortion. Cramping can be very severe and lasts longer than with the surgical abortion. At least two to three visits are required, sometimes more. It fails much more often than surgical abortion and takes longer to complete.

**Who should not use this method?** If it is more than seven weeks from your last period, you are on blood thinners, or have an allergy to the medications, blood clotting problems, active liver or renal disease, severe anemia, uncontrolled seizures or inflammatory bowel disease.

**How much does it cost?** If you have BC medical (MSP), medical abortion is covered in British Columbia. However, there is usually a cost of about $100 for the medications (this can sometimes be covered by extended health plans). If you do not have BC medical it is $500 for the abortion and medications. There may also be extra fees (for example, for blood tests when necessary).

### Surgical Abortion

**What are the advantages of this method?**
- Quick, predictable, and over in a few minutes
- Highly successful. Effective and safe for very early pregnancies as well as when done later in a pregnancy.
- Less bleeding and cramping for less time.
- Performed by a doctor with support of medical and counseling staff on site.
- If you need to conceal a pregnancy-abortion altogether, this may be the best option.
- Involves less medications than a medical abortion.

**What are the disadvantages of this method?**
A doctor must insert instruments inside the vagina and uterus. Anesthetics and drugs to manage pain during the procedure may cause side effects (serious problems are rare). There are possible complications, although they occur in less than one percent of cases. It may not be done as early in the pregnancy as with a medical abortion, depending on the doctor or clinic (however, Everywoman’s Health Centre does do abortions for very early pregnancies). It cannot end an ectopic pregnancy.

**Who should not use this method?** Some medical conditions or allergies to anesthesia may require that a surgical abortion happen in a hospital setting.

**How much does it cost?** If you have BC medical (MSP), surgical abortion is fully covered in British Columbia. If you do not have coverage it is $500 plus any additional fees (for example, for blood tests when necessary).

### Both Methods

**Can I still have children later in life?** Abortion does not affect future pregnancies and fertility returns immediately unless there is an extremely rare, serious complication.

**How will I be affected emotionally?** Most women do not regret their decision or have serious depression after an abortion. In fact, the majority of women feel a sense of relief afterwards, although it is normal to have a variety of feelings as you would about any important life decision. Often mixed or difficult feelings subside within a few weeks. It is important to have support throughout the process. If you are feeling unsure or conflicted about your decision, or having difficulties after an abortion, counselling may help and will be made available to you at the clinic.