Early Medical Abortion at Home (EMAH)

Please take your time to read this leaflet and ask any questions before you choose home medical abortion.

Some people prefer to have their abortion in the familiar and private surroundings of their own home.

EMAH may be an option for people less than 9 weeks and 6 days pregnant on the day of the first tablet.

Home abortion is not suitable for everyone and hospital treatment is available for anyone who needs or wants it.

EMAH without an ultrasound scan

Most people will need or want to come to clinic for a scan to confirm that they have an early pregnancy developing in the uterus. The scan may also show if there is a twin pregnancy or that the pregnancy has ended naturally.

In certain situations we are able to offer early medical abortion at home to people who do not want a clinic appointment.
This means relying on information discussed in the telephone or video consultation rather than an examination or ultrasound scan.

If you do not have a scan we will not know:

- If you had a false positive pregnancy test and are not actually pregnant
- If the pregnancy has stopped developing naturally ‘silent miscarriage’
- If it is a twin pregnancy
- If it is actually an ectopic pregnancy
- Or if the pregnancy is much further on than expected.

The information from your telephone consultation makes it very likely that the pregnancy is less than 10 weeks and is developing in the uterus.

What should I know about ectopic pregnancy

An ectopic pregnancy is where the pregnancy develops outside the uterus. Abortion medicines will not treat an ectopic pregnancy.

An ectopic pregnancy can cause serious internal bleeding. If you have any of the following symptoms you must get emergency medical advice:

Faintness or loss of consciousness

Severe pain in the lower abdomen lasting more than an hour and not helped by painkillers. (Some pain is expected on the day of abortion).

Shoulder tip pain

Diarrhoea (although this can often happen on the day of abortion)

I want to go ahead with EMAH without a scan. What happens next?

We will contact you before you take any medication to talk through the procedure in detail and arrange for you to collect the EMAH medication pack.

Choose a date to complete the abortion when you can be at home all day and night with an adult to support you.

- Arrange to be off work or college that day.
- If you have children get help with childcare that day. You should not be responsible for children on the day you complete treatment.
- Buy paracetamol and ibuprofen
- Buy absorbent pads.
  Use pads not tampons throughout the treatment until the bleeding stops.
- A hot water bottle/heat pad may be helpful.

We will supply a pack containing medication.

- Mifepristone (Step one tablet to swallow)
- Cyclizine (antisickness tablet to swallow)
- Misoprostol (Step two tablets to place in the vagina or under the tongue)
- Dihydrocodeine (strong painkiller to swallow if needed)

Take this home and keep it in a safe place out of reach of children or animals and at room temperature.

The pack contains a vaginal swab for you to do to check for infection with chlamydia, gonorrhoea and trichomonas. These infections are more common in people under 25 or anyone who has had a new partner or more than one partner in the last year. Other people can have infection too so we offer this test to everyone. Untreated infection may lead to pelvic inflammatory disease which may cause longterm pain and fertility problems.

Please send the swab back as soon as possible and definitely before the abortion. Call us if you have any difficulties or queries.

Step one- Starting the abortion

Swallow the first tablet called mifepristone to start the process.
Only take this tablet if you are sure you want to end the pregnancy.

If you take this first tablet you need to go ahead with the second part of treatment to complete the procedure 36 to 48 hours later.
Complications are more likely if there is a shorter or longer gap.

If you are sick within 1 hour of taking the tablet it may not work properly. Please call the number on the back of the leaflet if this happens so we can organise another tablet.

Most people do not feel any different after the first tablet and you can plan to carry on with normal activities that day and the next day.

Some people have light vaginal bleeding after the first tablet.
Some people have abdominal cramps, you can take painkillers such as ibuprofen or paracetamol or a heat pad may help.
If you have light bleeding go ahead with Step Two misoprostol tablets as planned.

If you have very heavy bleeding – such as 2 pads an hour for 2 hours - or you think you have passed the pregnancy please phone the ACCESS nurse weekdays or the gynaecology ward nights/weekends for advice.

Mifepristone 200mg tablet taken by mouth

Date .....Time …....

Step two- Completing the Abortion At Home

This should happen 36 to 48 hours after swallowing the mifepristone.

We strongly recommend that you have an adult with you that day and night. You should not be responsible for children that day.

Have a light breakfast and then take painkillers such as ibuprofen and paracetamol and a cyclizine antisickness tablet from the pack.

FIRST dose of misoprostol 4 tablets (800mcg)

Place all 4 tablets inside your vagina or under your tongue

Date .....Time…….

We recommend that you put the tablets in the vagina.
Stay lying or sitting down for 30 minutes. It does not matter if the tablets come out after that, the active medicine will have been absorbed.

You are more likely to feel sick if you put the tablets under your tongue but if you prefer to do this then keep the tablets under your tongue for 30 minutes.
Your tongue and throat feel dry or irritated but do not eat or drink for 30 minute. After 30 minutes you can swallow any tablet that is left with a drink of water/juice. The medicine will be in the bloodstream by then and will still work if you vomit.

SECOND dose of misoprostol 2 tablets (400 mcg)

Take this 4 hours later even if you think you have passed the pregnancy

Date ..... Time……

If there is no bleeding you can place 2 tablets in your vagina.

If you are bleeding place 2 tablets under your tongue for 30 minutes.

They may make your tongue and throat feel dry or irritated. Do not eat or drink in this time.

After 30 minutes you can swallow any tablet that is left with a drink of water/juice.

What happens after taking misoprostol?

Misoprostol makes the uterus contract and pass the pregnancy. The uterine contractions may start quite soon after you take the tablets or may not begin for 2 or 3 hours.

Everyone experiences the process differently. Most people say it feels like strong period pain or early labour pain. Many people have backache and a strong pelvic pressure sensation.

You can expect to have heavier bleeding than a period with large clots.

Some people have nausea, vomiting and diarrhoea or feel shivery.

Keep well hydrated and eat light meals or snacks.

You can take more ibuprofen or paracetamol up to the recommended safe dose if needed.

Some people need to take the dihydrocodeine painkiller. This can take 20 minutes or so to start working.

Some people find they are more comfortable walking around or soaking in a warm bath rather than lying in bed.

We advise you to stay at home until the pregnancy has come away.

Usually the pregnancy will come away after 4 to 6 hours but it may be quicker or slower than that.

You may see or feel the soft pregnancy tissue coming away. The pregnancy itself is less than 3cm long. You can flush any clots or tissue down the toilet.

The bleeding and cramps should become lighter after the pregnancy has come away.

There is a small chance of very heavy bleeding. Please get medical advice if you soak 2 pads an hour for 2 hours or if you are worried.

This may be the ACCESS nurse, the gynaecology ward, out of hours NHS 24 service or even emergency ambulance 999 depending on the time of day and what is happening.

(Contact numbers at the end of this leaflet)

What should I expect afterwards?

You may have abdominal cramps for 2 to 3 days. You can take more of the painkillers if needed.

You can expect to have bleeding like a heavy period for up to 2 weeks and may pass some clots. The bleeding may take another week or two to stop completely.

Pregnancy sickness usually gets better within 2-3 days.

We advise that you wait until the bleeding has stopped before having sex.

Most people have their next period 4-6 weeks after treatment.
If you start the combined contraceptive pill or patch you can expect some irregular bleeding in the first 2-3 months and a withdrawal bleed during your week off.

If you start a progestogen only method such as the progestogen only pill, injection or implant you may have irregular bleeding for 3-4 months or your periods may stop completely.

What about my test results from clinic?

Results are usually ready in a few days and we only contact you if action is needed. This will be a phone call or text from a withheld number.

Please pick up the call / call back as soon as possible.

You may need antibiotic treatment.

Untreated infection could lead to pelvic inflammatory disease which may cause long term pain and fertility problems.

We can advise about tests and treatment for your partner if necessary.

Contraception

You could become pregnant again as soon as 5 days after the procedure.

If you choose a pill, patch or ring for contraception we will give supplies or prescription and recommend that you start this **the day after** your procedure.

If you choose the implant we can fit this in the clinic before you go home or arrange an appointment.

If you choose the injection we will discuss the best timing with you.

If you choose to have an IUD (coil) we will arrange an appointment for fitting or further discussion. The IUD can be fitted from 2 weeks after the procedure. We will offer you contraceptive pills to use until it is fitted.

What Should I Do After The Abortion?

Medical abortion works for about 99 out of 100 pregnancies under 9 weeks and 96 out of 100 between 9 and 10 weeks.
Some people need further treatment because the pregnancy is continuing or has not come away.

Contact the ACCESS team after a week if you have less than 4 days of bleeding, you still 'feel pregnant' or have sore breasts and sickness.
We will arrange a scan to see what is happening.

If you have had the expected bleeding **you must still do a low sensitivity pregnancy test 14-16 days after your abortion** to make sure that the pregnancy has ended.
This special pregnancy test and instruction leaflet are included in your pack.
You can't buy these tests over the counter.

If the test is positive or unclear, you **must contact the ACCESS team** and we will arrange an ultrasound scan to see what is happening.

When Should I Get Medical Advice?

There is a small chance of heavy bleeding or infection after any abortion. Less than 4 in every 100 people need further treatment because not all the pregnancy tissue has come away.
Around 1 in every 1000 people having an abortion need a blood transfusion.
Less than 1 in 10 have an infection needing antibiotic.

Get medical advice as soon as possible if you have:

- Heavy bleeding -for example soaking 2 pads an hour for 2 hours
- a high fever or chills
- pelvic pain that gets worse after the abortion day
- bad smelling discharge

This may be the ACCESS nurse, the gynaecology ward, NHS 24 or even a 999 emergency ambulance depending on the time of day and what is happening.

Let the clinical team know that you did not have an ultrasound before the abortion. There is a possibility that the pregnancy is ectopic or further on than expected.

If you change your mind

Please phone and let us know if you do not go ahead with the abortion. It is not legal to keep the medication for future use by you or anyone else and we would discuss how to return it. We would also need to update your clinic and GP records.

Other support available

It may take time to come to terms with your feelings. A lot will depend on your reasons for having the abortion. Some people feel sad, some feel relieved. Many will feel a mixture of both.

Talking to friends and family may help but they may seem too close.

Please phone the ACCESS nurses if you or your partner would like to talk things over.

You can also contact Abortion Talk www.abortiontalk.com

☎ 03330 909 266 7-10pm Mon,Tue, Wed, Thur

Useful telephone numbers

ACCESS nurses - Aberdeen Community Health & Care Village
☎ **01224 655679**
Mon-Thurs 0830-16:30 Fri 0830-16:00

Call here first The nurse may not be able to answer immediately if they are with another patient but leave a message and they will call you back as soon as possible.

Gynaecology Ward - Aberdeen Royal Infirmary – if you live in Aberdeen City or Shire
☎ **01224 550542**
24 hours, 7 days a week- **call evenings or weekends** when the ACCESS service is closed

Ward 3 Dr Grays Hospital – if you live in Moray
☎ **01343 567220**
24 hours, 7 days a week- **call evenings or weekends** when the ACCESS service is closed

ACCESS clinic coordinator
☎ **01224 655535**
Monday to Friday, 9am to 2pm.

NHS 24 - ☎ **111**

Data protection and Privacy Assurance

Information about your clinic visit and clinic/hospital treatment is recorded on the secure NHS Grampian Clinical system (Trakcare) and the Scottish Sexual Health system (NASH). It is recorded in your hospital paper records if you attend hospital.

We ask if we can also contact your GP directly about the abortion.

Some information about abortion procedures must be recorded to meet the requirements of the Abortion Act 1967 and the Abortion (Scotland) Regulations 1991. This is sent in confidence to the Information Services Division of NHS National Services Scotland (ISD). This is used to monitor and plan service delivery.

The NHS Grampian abortion database collects information for research and to plan and monitor service development.

All personal data is processed and stored securely in accordance with the General Data Protection Regulation (GDPR) 2018