Fact Sheet

Pregnancy Advisory Centre SURGICAL ABORTION

A surgical abortion takes approximately 15 minutes with a light general anaesthetic. It is important to remember that clients will need to fast on the day of the procedure and have a support person available to transport them home and care for them overnight.

All clients having a surgical abortion have a pre-treatment with medication to soften the cervix to reduce the risk of bleeding and cervical damage. For early pregnancies one tablet will be required and for a later pregnancy sometimes a combination of medication and/or cervical dilators are used to ensure the procedure is safe.

What to expect?

Clients having a surgical procedure can expect to be at a health facility on two separate days. On the first day you will have a consultation with a health worker and doctor to explain the procedure in detail and discuss any health or emotional concerns you may have. If needed counsellors are available to provide further support on request. The doctor will perform an ultrasound scan, obtain your consent, explain any risks and give you an operation appointment, date and a time you will need to fast from.

NB: it is really important that you are fasted from the time the doctor advises you. Fasting means nothing to eat, drink suck, or chew so that a safe procedure can be completed. If adequate fasting has not occurred, this can delay or cancel your procedure.

Pre-treatment:

All clients having a surgical procedure are given a pre-treatment directly to the cervix to reduce the risk of bleeding and cervical damage. Misoprostol is the medication prescribed for the pre-treatment. Depending on the stage of the pregnancy the dosage of medication to take will differ.

Misoprostol is also given at the end of the surgical procedure to reduce bleeding and

cramping.

Misoprostol should only be taken if you are certain about your decision to have an abortion.

What to expect after the procedure:

Cramping and **pain** may occur after the operation and can continue for a few days. The pain is similar to a normal period pain and can be relieved with your regular period pain medication, and/or a heat pack.

Bleeding: can vary from little or no bleeding to moderate bleeding immediately after the procedure. Bleeding can continue for 2-3 weeks. Your first period can occur within 4-6 weeks and can be slightly heavier with more cramping than usual.

NB: avoid using tampons or having sexual intercourse for 7 days after the procedure to minimise the risk of infection.

Follow up care and support:

You can visit your general practitioner 2 weeks after the procedure to check that you have no concerns or complications following the surgical procedure. You can phone the Centre to seek further advice after the procedure if necessary.

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The following table provides a comparison of what you can expect for each of the procedures. Please do not hesitate to ask the health worker to explain anything

Medication abortion for a pregnancy less than 9 weeks (PBS) or 10 weeks (non PBS)	Surgical abortion
Can be used from 4 weeks after last period.	May not be available before 6 weeks from last period.
Most effective for a pregnancy of less than 10 weeks.	Most effective for a pregnancy of more than 7 weeks.
Resembles a natural miscarriage.	Involves inserting a tube into the uterus to remove the contents.
Abortion process lasts one to two days.	The operation procedure is completed within 10–15 minutes.
Clients can expect to be at the PAC for at least 2 hours on the day of consultation.	Clients can expect to be having two clinic visits and be at the health facility for up to five hours on the day of operation procedure.
The abortion usually happens at home and support is required at home.	The abortion operation happens in a health facility. Overnight support is required after an anesthetic.
May be painful for 2-3 hours or more after using misoprostol.	May be mildly painful afterwards when the uterus contracts.
Longer period of bleeding up to several weeks.	Shorter period of bleeding.
Anaesthesia is not needed. Pain medication will be provided for you.	Pain medication, light sedation and anaesthesia are required for the procedure.
Severe complications are rare.	Severe complications are rare.

For more information

Pregnancy Advisory Centre 707 Port Road Woodville Park SA 5011 Telephone: 7117 8999 https://www.sahealth.sa.gov.au/pregnancyadvisorycentre





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