Termination of pregnancy – Treatment choices

Information for women

This leaflet can be made available in other formats including large print, CD and Braille and in languages other than English, upon request.

If you are considering terminating your pregnancy (abortion), this leaflet will tell you about the different procedures you could be offered and the care you can expect to receive.

Our staff understand that this is an extremely difficult and emotional decision to make and they will support you and treat you with respect throughout.

There is also a counsellor available, someone trained to listen and help you to make decisions, who can offer you support should you need it at any time.

This service is for women who are up to 18 weeks pregnant.

Will my details be kept confidential?

Yes. The clinic has a strict code of confidentiality. Any personal information you give will be carefully protected although, if you are under 16 years we would recommend that you inform your parents or another supportive adult. Information will only be shared with the staff involved in your care. The only reason we would consider passing on confidential information without your permission, would be to protect you or someone else from serious harm.

Generally, you will receive your first clinic appointment within 5 calendar days of your referral, which can be made by yourself, your GP or by a sexual health clinic.

How can my pregnancy be terminated?

Pregnancies can be terminated by either:

- medical termination of pregnancy (MTOP)
- surgical termination of pregnancy (STOP)

Medical termination of pregnancy (MTOP)

This option is available if you are 5 – 18 weeks pregnant.

If you are less than 7 weeks a MTOP is more likely to work than a STOP.\(^1\) If you are over 12 weeks pregnant you will only be offered medical termination.

A medical termination of pregnancy (MTOP) has 2 stages, and means at least 3 visits to the hospital over 3 – 5 days.
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What will happen at my first clinic appointment?

You will see the Pregnancy Advisory Clinic (PAC) nurse who will ask you about your health and social circumstances. They will discuss the different methods of termination of pregnancy with you, as well as the possible risks associated with each. Future contraception will also be discussed and the range of contraceptive methods that can be supplied includes:

- condoms
- contraceptive pill
- contraceptive injection
- contraceptive implant
- intrauterine device (coil)
- intrauterine system (Mirena coil)
- contraceptive patch.

Once you have made your decision to proceed, you will be given additional written information regarding the procedure. A sample of your blood will be obtained to check your blood group and to ensure you are not anaemic. Tests will also be carried out to rule out the presence of Chlamydia and any other sexually transmitted infections for which you have symptoms.

You will be given a further appointment to see the doctor and have a scan. Please attend with a full bladder for the scan.

Second clinic appointment/Stage 1

You will be seen by the doctor who will perform a scan to confirm how many weeks pregnant you are. You will be chaperoned by the nurse throughout this procedure. If you are sure you wish to proceed, your written consent will be obtained and the legal documents completed.

You must be certain before going ahead with a medical termination as the tablet alone could result in miscarriage or abnormality of the baby if the pregnancy is continued. If you are at all unsure about having your pregnancy terminated, please let your nurse know. If you need more time, another appointment will be arranged. You will be given time to make up your mind.

You will be asked to swallow a tablet (Mifepristone) which acts against progesterone, the hormone that supports an early pregnancy.

After taking this tablet you can go home and you will be given a time to attend the ward 48 hours later for Stage 2 of the procedure.
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Stage 2

Up to 9 weeks

You will attend the ward where the PAC nurse will place some tablets called Misoprostol in your vagina. These tablets will make your uterus (womb) start to contract. This can feel like strong period pain or cramps. You will be offered painkillers. In most cases the pregnancy tissue will be passed through your vagina, usually within 4 – 6 hours. If this does not happen, you can usually go home, provided you are not bleeding too heavily, and will be given an appointment to return to the hospital for a scan in 7 days. During this time you may pass your pregnancy tissue at home.

In some circumstances you may be able to go home straight after receiving the misoprostol, on the understanding that you will miscarry at home, and you will need to do a pregnancy test in 3 weeks to confirm you are no longer pregnant and inform staff of the result.

Over 9 weeks

The procedure is the same as described above, but you will be given more tablets to swallow at regular intervals and you may need to stay in hospital overnight.

Surgical termination of pregnancy (STOP)

A surgical termination of pregnancy (STOP) means you will go to the operating theatre to have the pregnancy tissue removed under general anaesthetic. (Anaesthesia is a state of carefully controlled and supervised unconsciousness and means you are unable to feel any pain). You will need to attend a pre-assessment clinic within the hospital to assess your suitability for a general anaesthetic and a date for your admission to hospital will be arranged at that time.

STOP is only available to women less than 12 weeks pregnant. This is because of the increased risk, for example, damage to your cervix (neck of the womb) or uterus (womb), if your pregnancy is more than 12 weeks. You will usually be admitted as a day case patient.

You must arrange to have a responsible adult to take you home and stay with you for the first 24 hours after your anaesthetic. This is because a general anaesthetic may make you feel tired and affect your judgement. You must have access to a telephone in case of an emergency.
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Are there any risks and possible complications related to termination of pregnancy?

There are some risks and possible complications you need to consider before you agree to either a medical or surgical termination of pregnancy. These include:

• **very heavy bleeding at the time of the procedure.** This is rare, but can happen to 1 woman in every 1000 having a termination of pregnancy.²

• **post-termination infection.** This can happen to 1 woman in every 10. You will be offered an antibiotic suppository (a tablet inserted into the rectum (back passage) allows the antibiotic to be absorbed into your bloodstream) before the procedure to reduce the risk of this happening.¹

• **incomplete evacuation of the uterus.** This means that some pregnancy tissue may have been left behind and further tests or treatment will be needed. This occurs in 5 women in every 100 undergoing MTOP and 1 – 2 in every 100 having STOP.²

• **failed termination (on-going pregnancy).** The procedure fails in 1 - 2 women in every 100. If this happens further treatment will be needed.²

• **damage to the cervix (neck of the womb).** This can happen in 1 woman in every 100.² Should this occur it would be repaired with a stitch. The pessaries (tablets inserted into the vagina allows the medication to be absorbed into your bloodstream) given before your operation reduce the risk of this happening.

• **Uterine perforation (making a hole in the womb).** This is rare but can happen to 1 - 4 in every 1000 women having STOP and 1 in every 1000 having MTOP.¹ If this happens a laparotomy (open operation involving a cut in your tummy) would be needed to check for, and repair, any organs, such as the bowel.

• **rupture of Caesarean section scar.** This happens very rarely but would require an urgent laparotomy, as above.

• **risks linked with general anaesthetic.** You will be given a leaflet explaining in detail about a general anaesthetic, and your anaesthetist will discuss these with you.
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- **psychological (mental) distress.** This is common before and immediately after a termination. Only a small number of women have long-term distress.\(^1\) If you do feel upset, it often helps to talk to someone. Please ring your counsellor or PAC nurse. (See contact numbers).

- **deep vein thrombosis - DVT (blood clots in the leg veins) or Pulmonary embolism – PE (blood clots in the lungs).** You will be given a leaflet "Reducing the risk of a venous thromboembolism (blood clots) while you are in hospital and after you have been discharged" which explains about this in detail.

- **future pregnancies.** There is no evidence that following a medical or surgical termination of pregnancy women suffer from subsequent ectopic pregnancy (pregnancy outside the womb), placenta praevia (low lying placenta) or infertility.\(^2\) However, abortion is associated with a small increase in the risk of subsequent preterm birth, which increases with the number of abortions.\(^3\)

Contact numbers

**University Hospital of North Tees**

**Unit Counsellor**
telephone: 01642 624236
Monday - Friday, 9.00am - 5.00pm

Non-urgent messages can be left on the answering machine.

**Pregnancy Advisory Clinic**

telephone for advice: 01642 624320
Appointment line only: 01642 624233
Monday – Friday, 8.00am – 4.00pm

**Women’s Health Unit**

telephone: 01642 624597
24 hours a day, 7 days a week

**University Hospital of Hartlepool**

**Unit Counsellor**

telephone: 01642 624236
Monday - Friday, 9.00am - 5.00pm

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Pregnancy Advisory Clinic
Appointments and advice: 01429 522751

Women’s Health Unit
telephone: 01642 624597
24 hours a day, 7 days a week

Further information is available from:

Royal College of Obstetricians & Gynaecologists
27 Sussex Place
Regents Park
London.
NW1 4RG
telephone: 0207 772 6309
or via the website at www.rcog.org.uk

NHS Choices
Telephone: 111 (when it is less urgent than 999)
Calls to this number are free from landlines and mobile phones.
or via the website at www.nhs.uk

Specialist Stop Smoking Service
(incorporating Middlesbrough, Redcar and Cleveland, Stockton and
Hartlepool)
telephone: 01642 383819
Monday - Friday, 9.00am - 5.00pm

Useful addresses

Sexual Health Teesside
telephone number: 0300 330 1122

North Ormesby Health Village
11A Trinity Mews
North Ormesby
Middlesborough
TS3 6AL

Redcar Primary Care Hospital
West Dyke Road
Redcar
TS10 4NW

Hartlepool One Life
Park Road
Hartlepool
TS24 7PW
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Lawson Street Health Centre
Lawson Street
Stockton-on-Tees
TS18 1HU

**C-Card scheme** (free condoms for under 24 year olds)
Most local pharmacies in Teesside area

**Sexual Assault Referral Centre (SARC) Teesside**
Helen Britton House
telephone: 01642 516888

**HIV Support Services**
Terence Higgins Trust
telephone: 0808 802 1221

**Domestic Violence Services**
Harbour
telephone: 03000 20 25 25
www.facebook.com/harboursupportservices

**My Sister's Place**
123 Borough Road
Middlesbrough
TS1 3AN
telephone: 01642 241864
hello@mysistersplace.co.uk

**References**
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This leaflet has been produced in partnership with patients and carers. All patient leaflets are regularly reviewed, and any suggestions you have as to how it may be improved are extremely valuable. Please write to the Quality Assurance Team, University Hospital of North Tees or email: patientinformation@nth.nhs.uk

Comments, Concerns, Compliments or Complaints

We are continually trying to improve the services we provide.

We want to know what we’re doing well or if there’s anything which we can improve, that’s why the Patient Experience Team is here to help.

Our Patient Experience Team is here to try to resolve your concerns as quickly as possible. If you would like to contact or request a copy of our PET leaflet, please contact:

telephone: 01642 624719
Monday – Friday, 9.00 am – 4.00 pm
Messages can be left on the answering machine and will be picked up throughout the day.

freephone: 0800 092 0084
Mobile: (can use text): 0779 506 1883
Email: patientexperience@nth.nhs.uk

Out of hours if you wish to speak to a senior member of Trust staff, please contact the hospital switchboard who will bleep the appropriate person.

telephone: 01642 617617
24 hours a day, 7 days a week

The Patient Experience Team is available to discuss your concerns in person Monday – Friday, 1.30 pm – 4.30 pm. The office is based on the ground floor at the University Hospital of North Tees.

Data Protection and use of patient information

The Trust has developed a Data Protection Policy in accordance with the Data Protection Act 1988 and the Freedom of Information Act 2000. All of our staff respect this policy and confidentiality is adhered to at all times. If you require further information please contact the Information Governance Team.

telephone: 01642 833551 or email: information.governance@nth.nhs.uk

University Hospital of North Tees, Hardwick, Stockton-on-Tees. TS19 8PE
University Hospital of Hartlepool, Holdforth Road, Hartlepool. TS24 9AH

Telephone: 01642 617617 Fax: 01642 624089