



YOUR OPTIONS
THE BEST DECISION IS AN INFORMED DECISION

ABORTION

Considerations Prior to Any Type of Abortion

- It is important to get tested for STIs and complete any necessary treatment.
- It is important to have an ultrasound to ensure the pregnancy is inside the uterus (an ectopic pregnancy is a medical emergency), and to determine the viability of the pregnancy.
- Scarring or other injury during an abortion may prevent or place future pregnancies at risk. Abortion may be linked to subsequent preterm births.
- Post-Abortion Syndrome (PAS) - defined as the stress reaction experienced after an abortion. PAS is a sub-category of Post-Traumatic Stress Disorder (PTSD). Symptoms of PAS may include: guilt, anxiety, numbness, depression, flashbacks, and suicidal thoughts.

Abortion Pill

Timing: within 10 weeks of last menstrual period

Abortion Pill Medications

- MIFEPREX is taken first. Mifeprex blocks progesterone interrupting pregnancy development and prompting detachment of implanted embryo.
- MISOPROSTOL is taken up to 48 hours later. Misoprostol induces contractions to empty the uterus. A follow-up appointment is recommended to ensure the abortion has gone to completion.

General Caution

- The FDA has approved Mifeprex for use up to 70 days (10 weeks) from LMP. Deviations from the approved regimen increase the risk of harmful complications.
- This type of abortion occurs in private. You may not be expecting to see the end results of your pregnancy.
- Not advised for women who have anemia or an IUD in place.
- Obtaining the abortion pill over the internet is not advised as important safeguards to protect your health, including FDA approval, are not strictly enforced. Also, should a question or concern arise, immediate medical care may not be available.

What to Expect: Side Effects and Complications

- Strong cramping with vaginal bleeding
- Common side effects: nausea, weakness, fever/chills, vomiting, headache, diarrhea and dizziness
- Reach out to your abortion provider or go to the ER if you have concerns, excessive bleeding, or if you are experiencing flu-like symptoms in the days after treatment.

Abortion Pill Reversal

- It may be possible to reverse the effects of these medications
- Call (877) 558-0333 or chat online at AbortionPillReversal.com

Fetal Development: Last Menstrual Period (LMP) - 10 weeks

- Heart begins to beat
- Brain, spinal cord, and nerves develop
- Face takes shape with eyes, nose, ears & upper lip
- All limbs form with bones along with fingers & toes, internal reproductive organs are forming
- Movement begins

1st and 2nd Trimester Procedural Abortion

Procedures vary with gestation and provider

- Approximately 6-16 wks: Vacuum Aspiration or Suction Curettage
- Approximately 13-20 wks: Dilation and Evacuation (D&E)
- The cervix is dilated (opened) using medication or dilators (rods) before the procedure starts. This may require a visit to your health care provider the day before your procedure.
- On the day of the procedure, the cervix may be dilated further if necessary.
- A suction device and instruments are used to remove the pregnancy. No incision is needed.
- Your provider should ensure you are comfortable during the procedure, this may include anesthesia and/or pain medication. Antibiotics may be given to help prevent infection.
- If there are no complications, you may go home the day of your procedure. Soreness or cramping is expected for a few days afterward. A prescription for pain medication may be offered or over-the-counter pain medication may be advised.
- Bleeding and spotting may last for several weeks.

Side Effects & Complications

- Abdominal pain and cramping
- Nausea, vomiting, diarrhea
- Vaginal bleeding
- Headache, dizziness

Fetal Development: 11 Weeks to 16 Weeks, 6 Days

- Profile well-defined and eyes are open
- Fingerprint ridges start forming from the friction of touch
- Fingernails and irises in the eyes develop
- External genitalia are forming
- Kidneys produce urine
- Teeth are forming

Follow your discharge instructions and call your abortion provider with any concerns after your procedure. Go to the ER or a nearby hospital if you need to be seen immediately.

Induction Abortion Procedure - Approximately 21 Weeks to Full Term

Procedure

- A lethal dose of digoxin is injected into the fetus's heart or amniotic fluid to cause a fatal heart attack.
- The cervix may be treated with medication for 2-3 days to prepare it for delivery of the deceased fetus
- Pitocin may be given to induce labor and a vaginal delivery

Fetal Development: 17 Weeks - 20 Weeks, 6 Days

- Joints are developed
- You begin to feel movement - flutters turn into kicks and jabs
- Eyebrows and lips fully formed
- Senses are developing such as smell, vision, touch/pain, taste, and hearing (including hearing your voice)

A premature baby may be viable outside the womb, with specialized neonatal intensive care, between **22 to 24 weeks**.

SOURCES

- U.S. FOOD & DRUG ADMINISTRATION
<https://www.fda.gov/media/72923/download>
- AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS
<https://www.acog.org/womens-health/faqs/induced-abortion>
- HEALTHGRADES
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- CENTERS FOR DISEASE CONTROL AND PREVENTION
<https://www.cdc.gov/std/pid/stdfact-pid.htm>
- SOUTH CAROLINA LEGISLATURE
<https://www.scstatehouse.gov/CommitteeInfo/SenateMedicalAffairsCommittee/Shuping%20Long-lasting%20distress%20after%20Abortion.pdf>
- POST ABORTION STRESS SYNDROME
<https://www.psychologytoday.com/us/blog/somatic-psychology/201010/post-abortion-stress-syndrome-pass-does-it-exist>

DISCLAIMER: This fact sheet is designed to be an informational tool only. It is not intended to provide medical or legal advice or replace care from a qualified medical practitioner.