

What is medication abortion?

Medication abortion is the method of safely and effectively inducing a miscarriage using FDAapproved abortion pills. Medication abortion can be used to end a pregnancy up to 10 weeks from the first day of your last menstrual cycle.

Most often, a pregnant person takes two different medicines 1-2 days apart. The first is a 200 mg tablet of mifepristone (brand name Mifeprex) which blocks the hormone progesterone. The second is a multi-tablet dose of misoprostol (brand name Cytotec) taken 24-48 hours later which increases uterine contractions. The two medications are recommended by the World Health Organization and are 99% effective when taken together this way.

Alternatively, a pregnant person may take misoprostol only, *following a different dose and schedule*. Misoprostol alone is up to 90% effective.

What to expect:

- You will experience **bleeding or spotting** that can be darker than a normal period and last for several days; you may experience light bleeding for several weeks
- You will feel **cramping** (uterine contractions) within a few hours of taking misoprostol; the further along your pregnancy is, the heavier your cramps and bleeding will be
- You may have nausea, diarrhea, hot flashes, slight dizziness, and/or mild fever (lower than 100.4° F)
- You may see **blood clots** or tissue that looks gray
- Your cervix will soften to allow tissue to leave your uterus more easily so avoid putting anything into your vagina—including penetrative sex—for up to 2 weeks to help prevent infection

- Your pregnancy hormone hCG will go back to normal 4-6 weeks after an abortion and your pregnancy symptoms will fade with it; wait at least 3 weeks after an abortion before taking a pregnancy test to avoid a false positive
- Your **first menstrual cycle will return in 4-8 weeks** and could be heavier than your previous ones
- You could ovulate within 1-2 weeks of a complete abortion—before your period cycle returns—so take precautions when having vaginal-penile sex



Seeking further assistance

How safe is medication abortion? Every year, more people die from taking Tylenol than have *ever* died in the US from taking mifepristone, and serious complications are rare.

But if you have any of the following, contact your health care provider immediately:

- foul-smelling discharge
- fever lasting longer than 24 hours or higher than 102.2° F
- very heavy bleeding, severe pain, or nausea/vomiting that lasts longer than 24 hours
- increased bleeding or blood that is bright red
- persistent cramping or pain that cannot be relieved through over-the-counter medication.

Medication abortion and naturally occurring miscarriage are medically *indistinguishable*, with the same risks and treatments. There is no test to determine if you have taken abortion pills.

If your abortion is incomplete, your doctor may use medication, aspiration, or dilation and curettage to help remove the remaining contents of the uterus.

Don't want to go to a clinic? Visit

these websites for more information on your medication abortion options: <u>AbortionPillinfo.org</u>, <u>PlanCPills.org</u>, and <u>AidAccess.org</u>.

What's the difference between the abortion pill and the morning after

pill? Emergency contraception (including the morning after pill) is taken within a few days of unprotected sex to *prevent* pregnancy. It will *NOT* terminate an existing pregnancy.

Some forms of emergency contraception, like levonorgestrel (brand name Plan B) can purchased over the counter or through sites like Amazon and Walmart.com. Other forms, like ulipristal acetate (brand name Ella) are available by prescription. The copper IUD can also be used as emergency birth control if inserted within 5 days of sex.

Frequently asked questions:

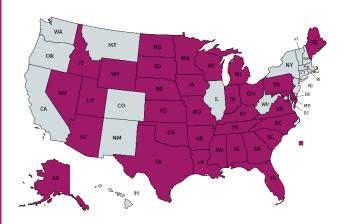
Can I still get pregnant later? Yes. Medication abortion does not increase your future risk of infertility or miscarriage.

What if I take the first medicine (mifepristone) but not the second one (misoprostol)? You might have a complete abortion, you might have a missed abortion in which the fetus is no longer viable but remains in your uterus, or your pregnancy might continue.

There is no evidence that an abortion can be "reversed" through techniques like dosing with progesterone, and we don't know how risky such techniques might be for the pregnant person.

Other facts

 Mifepristone (originally called RU-486) was first developed in France in 1980 and approved for use in Europe throughout the '90s. It was approved by the FDA for use in the US in 2000 and is now legally prescribed in 60+ countries.



Barriers to Access

- 34 states require licensed physicians to prescribe mifepristone, even though the World Health Organization recommends that nurse practitioners and physician assistants be trained to administer medication abortion
- 26 states prohibit ACA insurance plans from covering abortion
- 17 states require a physician to be physically present when taking mifepristone, which makes it harder for rural patients to access care
- Multiple states require clinics to give patients false or inaccurate information
- The FDA requires clinics that offer mifepristone to pre-register as abortion providers and prevents mifepristone from being purchased through pharmacies
- The FDA updated its guidelines for mifepristone in 2016, lowering the recommended dose and extending how late into pregnancy it can be used.
- Medication abortion has been used safely by over 2.75 million women in the US since 2000.

Contact us!



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