



Abortion Procedures and Complications

Abortion means the deliberate termination of a pregnancy, with removal of the foetus and placenta from the uterus. It is a surgical procedure which carries some of the same risks to the woman as any other surgical procedure, as well as some unique to the abortion procedure itself.

Anaesthetic choices: There are generally 3 options of anaesthetic for women undergoing an abortion in the first 3 months of pregnancy.

- **Local Anaesthetic:** You will have an intravenous cannula inserted, usually in the arm or the back of your hand. This is done in case there is an emergency requiring intravenous access during your procedure. The local anaesthetic drug is injected directly into the cervix.

The risks of a local anaesthetic include:

- Local reaction to anaesthetic drugs
- Allergic systemic reaction to anaesthetic drugs
- Infection resulting in damage to nerves and/or bleeding

(Ref: Queensland Health publication: About Your Anaesthetic)

- **Local anaesthetic with intravenous sedation:** You will have an intravenous cannula inserted, usually in the arm or the back of your hand. Intravenous drugs will be delivered directly into your bloodstream to induce sedation, not unconsciousness. Local anaesthetic will be injected directly into the cervix.

The risks of local anaesthetic with intravenous sedation include those listed above for local anaesthetic alone as well as the possibility of a reaction to the intravenous drugs used.

- **General Anaesthetic:** You will have an intravenous cannula inserted, usually in the arm or the back of your hand and drugs will be given to induce complete unconsciousness. You may also have a mask placed over your nose and mouth and breathe in drugs. You will have no awareness of the procedure at all.

Some common side effects of a general anaesthetic include:

- Nausea or vomiting
- Headache
- Pain and/or bruising at injection sites
- Sore or dry throat and lips
- Blurred or double vision
- Problems in passing urine

Some less common side effects can also occur and these include:

- Muscle aches and pains
- Weakness
- Mild allergic reaction – itching or rash
- Temporary nerve damage

Some of the uncommon side effects that can also occur include:

- Awareness whilst under anaesthetic
- Damage to teeth or dental work
- Damage to the voice box and chords which make cause a temporary hoarse voice

- Allergic reaction to anaesthetic drugs and/or asthma
- Blood clots in the leg
- Epileptic seizure
- Chest infection (more likely with smokers)
- Damage to nerves and pressure areas

(Ref: Queensland Health publication: About Your Anaesthetic)

For more information on complications and side effects from anaesthesia please consult the Queensland Health website on www.health.qld.gov.au

Abortion Procedures

Up to 12 weeks of pregnancy the most common surgical abortion technique is called 'suction aspiration'. The cervix is first dilated with a series of rods of increasing size. A tube is then inserted into the uterus through the cervix and suction is used to remove the foetus and the placenta from the uterus. Another instrument called a curette is then inserted to scrape the walls of the uterus to make sure nothing is left inside. This procedure generally takes less than 15 minutes to complete.

After 12 weeks of pregnancy a different procedure is used as the foetus is more developed and it is more difficult to remove using the suction method. There are a couple of different methods, but both involve the need to soften and widen the cervix more than in the first 12 weeks of pregnancy. Hormone blocking drugs may be given by mouth or inserted into the vagina to soften the cervix. Alternatively, the cervix may be widened using rods and a product inserted into the cervix. This product will slowly swell over several hours until the cervix is wide enough to allow the abortion to proceed. The abortion procedure itself is usually performed a day or 2 later.

(Ref: Victorian Government Better Health Website, accessed May 2007)

Abortion complications

The complications of abortion include all of those listed above for anaesthetic complications as well as:

- Excessive bleeding and/or the accumulation of blood clots in the uterus requiring a further surgical procedure
- Excessive bleeding that may require a blood transfusion
- Infection
- A tear in the cervix that may require stitches
- Perforation (tearing or puncture) of the wall of the uterus and/or other organs that may heal themselves or may require surgical repair or rarely, hysterectomy (removal of the uterus).
- Infection of the uterus and/or fallopian tubes. Damage to the fallopian tubes increases a woman's risk of experiencing a future ectopic (tubal) pregnancy.
- Incompetent cervix which may impair future fertility,
- Asherman's syndrome (cessation of menstruation and adhesions in the uterus which may impair future fertility)
- Depression, mood disturbance, increased risk of suicide

(Refs: Victorian Government Better Health Website, Accessed May 2007, Planned Parenthood Australia Informed Consent document)

There are many more complications of abortion, both physical and psychological which are being well researched internationally. You may be interested in reading about some of this research at:

www.afterabortion.org