

Late Medical Termination of Pregnancy (9+1 to 16+6 weeks - Tablet method)

PLEASE READ THIS LEAFLET CAREFULLY AND KEEP IT THROUGHOUT YOUR TREATMENT AS IT CONTAINS IMPORTANT INFORMATION REGARDING YOUR PROCEDURE AND AFTERCARE.

A Late Medical Termination of Pregnancy is available from ten weeks and up to sixteen weeks plus six days of pregnancy. If you choose and are found suitable for this procedure, it will involve a further visit to the Bedford Centre for the administration of the first tablet and then, 48 hours later, admission to the Gynaecology Unit for the second medication where you will stay until the procedure is complete.

You will be asked to sign a consent form for the procedure and in doing so, you are showing that you have read, understood and accepted all the information provided.

Your confidentiality will be maintained in accordance with Trust policy, however there are certain circumstances where sharing of information with other health care professionals or organisations is required to protect an individual from harm. Wherever possible we will involve you with the sharing of your personal information.

THE LATE MEDICAL PROCEDURE

What is the procedure?

It is a course of tablets which helps to empty the uterus (womb) by causing bleeding. Afterwards the tablets help the uterus (womb) to return to normal. You will need to remain in hospital until the termination of pregnancy process is complete. This may require an overnight stay in hospital.

First Visit

We advise that you attend the Bedford Centre alone. If necessary- only one support person may attend with you, however, you will be seen by the nurse alone. Children are not permitted on the Bedford Centre.

On your first visit you will be given a tablet called Mifepristone to swallow with water. This drug works by blocking the action of the hormone progesterone which is needed to maintain the pregnancy. You may leave after taking the tablet however you may be advised by the nurse to remain for approximately half an hour if you wish to do so.

Following this tablet and before your next visit you may or may not experience some period type pains and some bleeding. It is also possible you may experience nausea and/or vomiting although this is unusual. If you start to bleed at any time after taking the first tablet (Mifepristone) you must attend or contact the Liverpool Women's Hospital **Gynaecology Emergency Department** on **0151 702 4140**.

If you experience any pain or discomfort that you require pain killers for, you can use Paracetamol / Ibuprofen. If you are going to take Paracetamol / Ibuprofen at home, please read the patient information leaflet in the packet and take as directed. If you are worried about anything concerned with the procedure, there are contact telephone numbers at the end of this leaflet that you can ring for advice.

If your blood group is found to be Rhesus negative, you may require an Anti D injection. If Anti D is required you will be given an information leaflet explaining this and why Anti D is recommended.

Second Visit

You will be requested to attend the ward alone. We ask for your safety that you remain on the ward during your treatment. If you leave the ward against the advice of nursing or medical staff the Trust cannot accept responsibility for your health and welfare.

If possible please have something to eat prior to your admission. You will need to bring with you, toiletries including a towel, packs of press on sanitary towels, several pairs of briefs. Nightdress and any items required for a possible overnight stay. Hot drinks and meals are provided during your stay on the ward. It is important that you do not bring any valuables with you to the hospital. Please do not bring in any electrical equipment that needs to be plugged in.

You will be given tablets called Misoprostol which will need to be inserted into the top of your vagina. This can be done by yourself or a nurse. You will be asked to lie down for 30 minutes to allow the tablets to be absorbed. The tablets will cause the womb to contract to help expel the pregnancy.

Following the first dose of Misoprostol you will be given further doses of these tablets orally every three hours until you have passed the pregnancy. You will experience vaginal bleeding and some period type pains. Medication will be available for pain relief on request.

During your stay you may feel sick, vomit or possibly have diarrhoea, although it is unusual. These are known effects from the Misoprostol tablets you have been given and will not stop the tablets from working. You will remain on the ward until the pregnancy has been passed and are well enough to be discharged. If you have not passed the pregnancy, you will be reviewed by a doctor, and this may involve an overnight stay and possible further medication.

If you still do not pass the pregnancy, we may give a rest from the tablets and recommence them the next day. There is a possibility that you will see the pregnancy. Nursing staff will be available to support you throughout your admission.

Following the procedure, it may become evident that there is some pregnancy tissue remaining and this may require you to go to theatre. The procedure would be performed under general anaesthetic.

We advise you do not drive yourself home but for you to arrange for someone to escort you home and look after you that night, as you may feel unwell or have a heavy bleed. You will have had the opportunity to discuss your future contraception when you attended for your consultation. If you require further information / advice you can contact your GP, local Family Planning Clinic or The Bedford Centre.

Follow Up

You will be advised to do a low sensitivity pregnancy test at home two weeks after your procedure.

It is important that you contact **The Bedford Centre** on **0151 708 9988** ext. **1130** if the pregnancy test is positive. This is so we can make arrangements to see you in the clinic. If you do not contact the clinic we will assume that the test is negative.

POINTS TO BE AWARE OF BEFORE YOU START THE PROCEDURE

It is important before you take the first tablet that you are certain of your decision to proceed with the termination of pregnancy. There are known risks to the fetus from the medication and therefore, we must recommend that once you have taken the tablet(s) that you continue with the termination of pregnancy.

- The treatment you will be given involves taking two different types of tablet. The first is Mifepristone, followed by Misoprostol. Both of these drugs are widely available but their use in combination is outside their product licence. Whilst we are obliged to inform you of this, we should at the same time reassure you that there is much research and clinical experience of the use of these two drugs in this way.
- It is recommended that you do not smoke or drink any alcohol once the procedure has commenced.
- There is a possibility that you may see the pregnancy (fetus).
- Due to the unpredictability of the procedure we recommend you inform us of any travel plans arranged.
- Whilst you are in the hospital you will be asked to sign a consent form to allow the Trust to take responsibility for the communal cremation of your pregnancy loss. Alternative arrangements can be made, if you require further information please ask a member of staff.
- Breast feeding should be avoided during the procedure – please inform a member of staff for more advice.

RECOGNISED RISKS OF LATE MEDICAL TERMINATION OF PREGNANCY

- Blood transfusion – this is possible but not probable less than 1 in 1000 however, it does depend how much blood you lose during the procedure.
- Excessive bleeding (haemorrhage) 1 in 1000, if you feel that your bleeding is excessive you should seek urgent medical care from the Emergency Room at the Liverpool Women's Hospital or your local Accident and Emergency Department.
- Retained pregnancy tissue requiring further treatment 1 in 100. You may experience irregular or continuous bleeding and/or abdominal pain. You will need to seek medical advice from your GP or the Emergency Room. If this occurs, treatment options will be discussed with you.
- Infection up to 1 in 10 – if you notice any abnormal, offensive discharge, general feeling of being unwell, high temperature / fever, you should contact your GP. If left untreated this can lead to a more severe infection known as pelvic inflammatory disease.
- There is a small risk of less than 1 in 1000 that your womb may become damaged during the procedure, including uterine rupture in pregnancy's greater than 13 weeks. This may require a further procedure under anaesthetic and on very rare occasions may result in a hysterectomy. Women who have had previous caesarean section are more at risk and therefore are managed with reduced doses of Misoprostal.
- Emotional / psychological distress – as an individual, it is difficult to predict whether you will experience any emotional problems immediately after or in the future, following a termination of pregnancy. If you are not coping, we would suggest that you either contact your GP or Liverpool Bereavement Services on 0151 236 3932 so that counselling or support can be arranged.
- There is a small risk of less than 1 in 100 in the failure to end the pregnancy.
- Risk of death is very rare.

We give you this information regarding the risks not to alarm you but we feel you would wish to know so that you can make an informed decision.

CARE FOLLOWING LATE MEDICAL TERMINATION OF PREGNANCY

1. You must be accompanied home by a responsible adult, who will remain with you over night and who is aware of the treatment you have had.
2. Due to the nature of the procedure, we advise that you do not drive yourself home following your discharge from the ward (second visit).
3. You are advised not to travel long distances, especially by air, until you have performed your home pregnancy as advised following the procedure and are well. However, if you do decide to travel, we strongly recommend you inform your travel insurance company that you are undergoing a procedure.

4. It is advisable, once you have been discharged from the ward (second visit) that you do not undertake any strenuous activity i.e. lifting, carrying heavy loads and exercise such as sports activities until your bleeding has settled.
5. You may need some time off work. If you require any further information or have any concerns, please discuss with a member of the nursing team.
6. You are advised to have a bath/shower daily whilst you are bleeding (you do not need to add anything to the bath water). If having a shower it is important that you do not apply the jet of water directly to the vagina (douching) as this may increase the risk of infection.
7. You are advised to avoid sexual intercourse until your bleeding has stopped as you may be at risk of infection. Using condoms may help to reduce the risk of infection. You can get pregnant before your next period if adequate contraception is not used.
8. Your next period should occur 4 – 6 weeks following the procedure; however this can be affected by the method of contraception you are using. The bleeding on this period may be heavier than you are normally used to.
9. Bleeding following the procedure is very individual. It can last for up to 3 weeks as a continuation of the procedure, this is not a period. It is not unusual for the bleeding to stop and start during this time. With this bleeding we advise you to use sanitary towels not tampons.
10. You may experience 'period type' pains (cramping) following your discharge from the ward and pain relief can be taken as advised (second visit).

If you should develop any of the following, contact the Emergency Room at the Liverpool Women's Hospital or contact your local Accident & Emergency Department:

- Heavy and continuous bleeding that soaks through 2 or more pads in an hour for a period of 2 hours. However if at any time you feel unwell please contact the Gynaecology Emergency Department at the Liverpool Women's Hospital for advice
- Severe repeated or continuous abdominal pains - if not eased with the tablets you have taken for pain relief.
- Violent shivering attacks / chills
- High temperature
- Offensive (smelly) vaginal discharge

During the procedure if you require advice for any of the above list or any other concerns the **Gynaecology Emergency Department** is open 24 hours a day on **0151-702-4140**.

If you require any further advice regarding this method of abortion you can contact The **Bedford Clinic** on **0151-708-9988** extension **1130** between 08.30 and 16.30h.

This leaflet can be made available in different formats on request. If you would like to make any suggestions or comments about the content of this leaflet, then please contact the Patient Experience Team on 0151 702 4353 or by email at pals@lwh.nhs.uk

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