

Cardiff & Vale UHB - Department of Gynaecology

Outpatient Early Medical Abortion (EMA)

Patient Information Leaflet

This information sheet provides information about the practical steps of abortion treatment at home. The advice you receive from your nurse or doctor together with the information here are designed to keep you safe throughout this process.

1) Overview

What is an EMA?

It is a commonly used safe abortion treatment during the first 10 weeks of pregnancy, or less than 70 days after the last period.

What does this involve?

Two different medicines are taken 24-48 hours apart. This medication will lead to you expelling the pregnancy which is very similar to having a natural miscarriage.

What are risks of EMA treatment at home?

EMA is very safe and unlikely to lead to health problems in future.

The risk of pregnancy complications is present each time a woman is pregnant.

Complications are less frequent and less serious if a pregnancy ends early.

If you are worried about suffering a complication, please get in touch with the Pregnancy Advisory Service (PAS) team.

The pregnancy complications relevant for EMA treatment are listed here:

- **Infection of the womb** – occurs in up to 1 in every 10 abortions; it can usually be treated with [antibiotics](#).
- **Some of the pregnancy remaining in the womb** – occurs in up to 1 in every 20 abortions; further treatment may be required if this happens.
- **Continuation of the pregnancy** – occurs in less than 1 in every 100 abortions; further treatment will be needed if this happens.
- **Excessive bleeding** – occurs in about 1 in every 1,000 abortions; severe cases may require a [blood transfusion](#).
- **Early pregnancy abnormality**
 - **ectopic pregnancy** – occurs in less than 1 in every 1000 women who are otherwise well and without risks for ectopic pregnancy. This rare complication of early pregnancy is dangerous and will need further follow-up or treatment.
 - **molar pregnancy** – occurs in less than 2 in 1000 women who are otherwise well. This rare complication of early pregnancy will need further follow-up and treatment.

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TREATMENT INSTRUCTIONS FOR EMA AT HOME

1) THE FIRST MEDICINE

A single tablet ('Mifepristone') to be swallowed whole with water

If you suffer sickness and vomit within 1 ½ hours after taking Mifepristone the treatment is best to be repeated. Please contact the clinic in that case.

Few women may start to miscarry after this first tablet and before using the second medication. If this happens, please continue treatment with the second medication anyway.

2) THE SECOND MEDICINE

Timing for the second medicine (four tablets Misoprostol) depends on your circumstances. It is most effective if taken between 24 to 48 hours after taking the first (Mifepristone) tablet.

Make sure there is time and space available at home as well as someone to look after you. Pain relief such as Ibuprofen or Paracetamol is useful in case of painful cramps.

Eat and drink as normal but do not take alcohol.

Misoprostol tablets do not work well if swallowed. They work best if absorbed through a mucosal surface like the inside of your mouth or your vagina. There are two alternative ways to take Misoprostol:

1. Buccal or sublingual route: Place the four tablets in your cheeks beside the gums – 2 at the top and two at the bottom. You can also place all four tablets under your tongue. If they are not dissolved after 30 minutes you can swallow them with water.
2. Vaginal route: Insert the 4 tablets into the vagina using your finger. If you prefer you can use the small sachet of lubricating gel supplied to make this easier. The tablets should be inserted as high as possible into the vagina in order to get them close to your cervix. If the tablets are correctly placed they cannot fall out if you want to move around but you should try not to go to the toilet for an hour after insertion in order to allow them sufficient time to dissolve.

After using Misoprostol, it is good to spend the time before your miscarriage starts to relax.

3) YOUR MISCARRIAGE

Your miscarriage will usually start an hour or two after Misoprostol. It will seem very much like a natural miscarriage with the following symptoms:

- Period-type lower abdominal cramping
- Bleeding from the vagina
- Small clots of blood mixed with stringy-looking tissue will pass from the vagina

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The pain and bleeding will ease when the miscarriage process is complete which happens within 6 hours for most.

IN CASE YOU HAVE NOT STARTED BLEEDING

Use the last two tablets of Misoprostol if you have had no bleeding, or have had bleeding less than a period, 3 hours after taking your initial dose of four Misoprostol tablets.

- Take the last two Misoprostol tablets and place them under your tongue to dissolve.
- If they are not completely dissolved after 30 minutes you can swallow them with water.
- Please contact the clinic if no pain or bleeding occurs within 24 hours

4) AFTER YOUR TREATMENT

- **Bleeding:** whilst the uterus (womb) lining is healing and regenerating, there will be bleeding from the vagina. In most treatments, the vaginal bleeding finishes within a week but some women can bleed for 10-14 days. If bleeding continues to be heavier than your normal period, lasts longer or appears very smelly please get in touch.
- **Pain:** You may have lower abdominal cramps for a day or two. Please take pain relief such as Paracetamol or Ibuprofen as required. You must get in touch if you are worried or the pain doesn't settle with these treatments.
- **Feeling emotional:** It is not uncommon to feel sad or more tearful after treatment. It may help to have someone you trust around, such as a friend, family member or your partner to support you. You can also contact the clinic or your GP if your sadness becomes overwhelming or unmanageable.

SERIOUS COMPLICATIONS ARE RARE -Please remember to be aware of the signs and symptoms of an early pregnancy abnormality.

THE SYMPTOMS LISTED HERE CAN BE A SIGN OF A SERIOUS PROBLEM IF YOU NOTICE THEM YOU MUST GET IN TOUCH WITH THE CLINIC OR YOUR GP IMMEDIATELY

- Feeling very unwell
- Fainting or losing consciousness
- Severe abdominal pain and / or pain in your shoulders
- A high temperature
- Continuous bleeding heavier than your normal period
- Offensive vaginal discharge

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5) CONFIRMING TREATMENT IS COMPLETE

It is important to check that your treatment has worked. **Please do the Check-HCG test provided 3 weeks after your treatment.** The test shows whether the pregnancy hormone beta-HCG has cleared from your body to confirm your treatment is completed.

If your test does not work or remains positive, please get in touch with us on the number below.

- **CONTRACEPTION:** If you wish to review the most suitable method of contraception available, this is a good opportunity to do so. You may already have been given contraception in clinic. If you have a supply of pills these should be started a day or two after your Misoprostol.
- **SEX:** Once your bleeding has stopped, when you feel ready you can have sex. Your fertility will return seven days after your treatment.
- **WORK:** Most women are fit to return to work one or two days after their treatment.
- **PERSONAL HYGIENE:** You can have showers or baths. Please do not use internal protection such as tampons, moon cups or sponges during this time of bleeding to reduce the risk of infection.
- **FURTHER INFORMATION:** Plenty of helpful information about sexual health, fertility and abortion can be found on-line. However, searching for terms like 'abortion' may open websites with upsetting and incorrect statements. Please use those below for reliable info

[Abortion Talk talkline number and information | Abortion Talk](#)

<https://www.brook.org.uk/your-life/abortion/>

<https://www.contraceptionchoices.org/>

<https://www.maristopes.org.uk/>

<https://www.bpas.org/>

<https://www.nhsdirect.wales.nhs.uk/LifestyleWellbeing/Sexualhealthabortion/>

[Welcome to Sexual Health Wales | Advice & Testing STIs Infections \(friskywales.org\)](#)

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CONTACT DETAILS FOR CARDIFF & VALE PAS:

Telephone: Nurse Practitioner's office 02920335164 (CRI)

Please leave a message and you will be called back. Messages are usually picked up every Monday/Tuesday and Friday.

E-mail: Pas.Uhw@wales.nhs.uk

Out of hours or if it is a more urgent matter:

Please call the Gynaecology ward on 029 21843857 (24/7)

A Nurse or a Doctor will reply to you directly