

INDUCED ABORTION



This page is designed to inform you of the procedure and possible issues that may concern you if you decide to have an induced abortion. The decision to have an abortion is not an easy one, it is extremely important to have as much information as possible before you choose to go ahead.

What are my options if I am pregnant?

If you find that you are pregnant you may choose one of three options:

- You could decide to continue with the pregnancy and keep the baby,
- You may continue with the pregnancy and give the baby up for adoption, or
- You may choose to have an induced abortion.

An induced abortion is the procedure undertaken by a doctor to terminate a pregnancy. A spontaneous abortion is otherwise known as a miscarriage.

Is abortion legal in WA?

Abortion was legalised in Western Australia in June 1998, however, the operation must be performed by a registered medical practitioner at a clinic or hospital. By law you must have a written referral from a medical practitioner to have an abortion. You must be offered pre and post abortion counselling.

What are my options for counselling?

The option of counselling is designed to help women make the best decision for them and to support them in their decisions. Counselling should be option-based and nonbiased. You do not have to have counselling in order to have the operation. Preoperative counselling can help in discussing the risks of a termination of pregnancy and can establish a relationship for postoperative counselling if required.

How long do I have before I have to make a decision?

Terminations are available up to 16 weeks but are preferably performed prior to 12 weeks. In special circumstances abortions may be later. It is important that you feel comfortable in discussing with your doctor or counsellor the physical and psychological implications associated with abortion.

Surgical Abortion

About 90% of induced abortions occur at between six and twelve weeks (first trimester) into the pregnancy. The procedure involves the insertion of a tube into the uterus (womb) via the vagina and cervix (the opening of the uterus). The foetus and the lining of the uterus are then removed with a gentle sucking action. This method is called vacuum aspiration. The whole procedure generally takes about ten to fifteen minutes.



Will I be awake?

Abortions are performed either under general anaesthetic or using an anaesthetic technique called 'twilight sleep', which means that you will sleep through the entire operation. You will need to rest afterwards regardless of the type of anaesthetic.

Are there any risks involved in the operation?

There are risks involved in any operation, however "the overall risk of experiencing a complication during or soon after an abortion has been estimated at nine women in 1,000" (Health Department of WA, 'A Summary of Medical Risk of Induced Abortion and of Carrying a Pregnancy to Term')

Medical Abortion

This is the use of medications for pregnancy up to seven weeks only, which are administered at both a clinic and at home. A following appointment is booked for two weeks after the initial appointment to confirm the abortion is complete.

Some other risks of termination of pregnancy:

Pelvic infection is the most common complication but the incidence of this has been minimised with the introduction of routine administration of antibiotics in WA centres. Another common complication is excessive bleeding, though the frequency of this risk has decreased significantly over the past few decades and is now regarded as being quite minor. Perforation of the uterus is uncommon. If you experience prolonged heavy bleeding, fever or pain after the operation, seek medical advice as this may be a cause for concern.

How will I feel after the procedure?

Reactions vary from person to person, this means that it is perfectly normal for you to feel relieved, sad, guilty, confident, 'back to normal' or depressed. In situations where the pregnancy is terminated due to foetal abnormality or if you felt pressured into making the decision to have an abortion, it is more likely that you will experience more serious emotional problems. In addition there may be physical, religious and ethical issues that need to be considered when making this decision. As such, you may find that you need to have more than one counselling session before (and after) you make a decision. This counselling is designed to enable you to voice any fears or misgivings you may have and possibly prevent any serious emotional consequences.

What will the termination cost?

If you are an Australian resident, Medicare will pay a percentage of the price, but costs vary.

Where can I go?

You can go to your doctor or women's health centre for a referral. See the list on the last fact sheet page for contact details.



What about after the abortion?

Rest

It is important that you rest for at least a day after an abortion. It is important that you bring someone to drive you home as you will have had an anaesthetic.

Cramps

You may experience cramps for 12 - 24 hours after the operation. These cramps are normal and can be relieved by taking two Panadol / Naprogesic / Naprosyn (or an equivalent medication) every four hours. A medical abortion will produce cramping which is more severe than normal menstrual discomfort, however painkillers will be more effective if taken at the onset of pain.

Bleeding

Your bleeding will vary after the abortion but can be likened to heavy menstrual flow which should taper off gradually over 10 - 14 days.

Check-up

It is important to see your doctor two weeks after the operation for a check-up.

Infection

To minimise the possibility of infection:

- Take showers not baths for two weeks after the abortion;
- Don't go swimming or use a public spa;
- Don't have intercourse for two weeks after the abortion; and
- Use pads, not tampons, until the first menstrual period after the operation (This could take six weeks).

Can I get pregnant after an abortion?

Yes, you will remain fertile after an abortion and as such, you should consider contraceptive options prior to the termination. The contraceptive pill is usually dispensed along with antibiotics after the abortion. Implanon can be inserted post term. Studies also show that having an abortion will not increase the risk of ectopic pregnancy, spontaneous abortion, premature labour or low birth weight in any subsequent pregnancies.



Who can I talk to?

There are a number of organisations able to provide pregnancy counselling:

Women's Health Services

Medical and clinical services, counselling, information, workshops, referral and outreach.

100 Aberdeen Street

Northbridge WA 6003

Phone: (08) 9227 8122

FPWA

Sexual Health Specialists

70 Roe Street

Northbridge WA 6003

Phone: (08) 9227 6177

Toll free: 1800 198 205

Website: www.fpwa.org.au

The Roe Street Centre for Human Relationships

Counselling service run by FPWA

Phone: (08) 9228 3693

Quarry Health Centre

Low cost counselling for under 25s - individuals, couples and families.

7 Quarry Street

Fremantle WA 6160

Phone: (08) 9430 4544

OR Contact your local doctor.



For more information on this subject or any other **women's health** or **mental health issue** please contact us on (08) 9227 8122, or toll free on 1800 998 399

For information on issues specific to **Indigenous health** or for **drug and alcohol** related issues please contact us on (08) 9227 9032, or toll free on 1800 246 655