

## **Medical Abortion (Instructions for the Patient, Pregnancy Duration Under 10+0 Weeks, At Home)**

- It is important that the decision to terminate the pregnancy is your own, personal decision and that you have carefully considered it.

### **At the Clinic**

- You will receive an oral mifepristone tablet (Mifegyne®). This medication increases uterine sensitivity to contractions and softens the cervix. Bleeding and menstrual-like lower abdominal pain may begin shortly after taking this medication.
- The decision to terminate the pregnancy must be certain before taking the first medication, as the abortion cannot be reversed after taking the tablet.
- If you vomit within two hours of taking the tablet, part of the medication may not be absorbed. In that case, promptly contact your abortion clinic at 014 2660141, Monday to Friday, 8:00 AM–2:00 PM.
- Mifepristone tablet (Mifegyne®) taken on \_\_\_\_\_ / \_\_\_\_\_ at \_\_\_\_\_
- A sick leave certificate is usually issued for 2 days starting from the administration of Misoprostol (Cytotec®).

### **Taking Medication at Home**

- A support person should be present or quickly reachable.
- Remember to drink plenty of fluids during the abortion and wear loose-fitting clothing.
- Side effects of the abortion medications may include nausea, diarrhea, dizziness, and headache. Bleeding can be heavy and abdominal pain severe.
- Take 800 mg ibuprofen and 1 g paracetamol 30 minutes before administering the abortion medications for pain relief. If you have been prescribed other pain or anti-nausea medications, take them as instructed.
- Insert 4 tablets of misoprostol (Cytotec®) deep into the vagina in the morning, 2 days after taking the mifepristone tablet (Mifegyne®) at the clinic. First, empty your bladder, then lie down and insert the tablets vaginally. After insertion, remain lying down for 1 hour to prevent the tablets from falling out. After that, you may move freely.

- If you experience heavy bleeding, place the tablets under your tongue (2 tablets at a time, 20 minutes apart). Misoprostol (Cytotec®) causes uterine contractions and expulsion with bleeding.
1. Misoprostol tablets (Cytotec®, 4 pcs) taken on \_\_\_\_\_ / \_\_\_\_\_ at \_\_\_\_\_
    - For additional pain relief, you may use paracetamol 1 g 1–3 times a day and ibuprofen 600–800 mg 1–3 times a day. Anti-nausea medication can also be used up to three times a day if needed. Have these medications ready at home.
    - After taking misoprostol (Cytotec®) and stronger painkillers (e.g., Panacod, Tramal), breastfeeding should be paused for 3–4 hours.
    - If significant bleeding has not started within 3 hours of the first misoprostol tablets (Cytotec®), insert 2 additional tablets vaginally or under the tongue.
  2. Misoprostol tablets taken on \_\_\_\_\_ / \_\_\_\_\_ at \_\_\_\_\_
    - Contact the centralized sexual health unit after the second dose of misoprostol (Cytotec®) if bleeding does not start within 3 days by calling the maternity clinic phone service, Mon-Fri 8 AM–2 PM, phone 014 2660141.
    - Contact healthcare if, after the abortion:
      - o You develop a fever over 38°C
      - o You have severe or worsening lower abdominal pain
      - o Bleeding is very heavy, heavier than a normal menstrual period and/or you pass clots
      - o Bleeding continues heavily for more than 3 weeks
    - If you have questions or need further instructions related to the abortion, contact the centralized sexual health unit via the maternity clinic phone service, Mon-Fri 8 AM–2 PM, phone 014 2660141.
    - For urgent matters that cannot wait until the sexual health unit is open, contact the gynecology and obstetrics emergency service at 014 269 1204 or the regional emergency service at 116117.
    - In an emergency, call 112.

#### Aftercare

- Bleeding typically lasts about two weeks, but individual variation is large. Bleeding is usually heavier during the first days.
- Menstruation will resume approximately 4–7 weeks later and may be heavier than usual.

- To reduce the risk of infection, use sanitary pads during bleeding, avoid baths, hot tubs, swimming, and intercourse without a condom. Maintain good hygiene by washing with water during daily toilet visits and changing pads at least every eight hours. Sauna use is not recommended during the heaviest bleeding days.

### **Starting Contraception**

- It is important to use contraception. Pregnancy can occur again before the next period.
- Birth control pills, vaginal rings, patches, or mini-pills should be started on the evening of the misoprostol administration day or at the latest the following morning.
- Hormonal or copper IUDs can be inserted once the abortion is confirmed.
- The contraceptive implant can be inserted during or after the abortion.
- Condoms are the only contraceptive method that also protects against sexually transmitted infections.

### **Confirming the Abortion**

- Medical abortion is successful in about 95% of cases. Approximately 5% of pregnancies may continue or terminate incompletely. In these cases, the abortion can be completed by repeating the medication or by surgical curettage.
- The abortion should be confirmed by a urine pregnancy test. Perform the test 4 weeks after the abortion before the follow-up appointment.
- If the abortion is done at 4–5 weeks of pregnancy, the status is checked one week after the abortion. You will receive a referral for blood tests from your healthcare provider.
- Follow-up appointment scheduled: \_\_\_\_\_ / \_\_\_\_\_ at \_\_\_\_\_

### **Coping**

- Although most feel relief once the abortion is over, termination of pregnancy can be emotionally difficult.
- If needed, seek help from your local health center, mental health services' first line, or other mental health and crisis support services.

### **Local Support Contacts:**

- Health centers and mental health Ensilinja, [www.Hyvaks.fi](http://www.Hyvaks.fi)
- Social and crisis emergency service: 014 266 0149
- Crisis center Mobile: 044 7888 470 (Mon–Thu 8 AM–8 PM, Fri 8 AM–5 PM)

### **National Support Contacts:**

- MIELI, valtakunnallinen kriisipuhelin 09 2525 0111 (24/7)
- Mielenterveystalo.fi

This patient instruction is based on the Finnish Current Care Guidelines for pregnancy termination  
([www.kaypahoito.fi](http://www.kaypahoito.fi))