

Early Abortion: Comparing Procedures

	Medication Abortion	Uterine Aspiration
How it Works	<ul style="list-style-type: none"> Medication abortion uses two medicines, mifepristone and misoprostol. Mifepristone blocks the action of progesterone, a hormone needed to sustain a pregnancy. Mifepristone causes changes to the uterine lining so that the pregnancy can detach. It also causes the cervix—the opening to the uterus or womb—to soften and dilate (open). Misoprostol is taken after mifepristone and causes the uterus to contract and expel the pregnancy. Misoprostol can be placed inside the mouth between the cheeks and gums or in the vagina. 	<ul style="list-style-type: none"> The cervix—the opening to the uterus or womb—is gently opened with dilators that gradually increase in size. A straw-like tube called a cannula is inserted through the cervix into the uterus. Suction is then used to remove the pregnancy from the inside of the uterus. An aspiration procedure can be done using local anesthesia or intravenous sedation. The procedure usually takes 3-10 minutes.
Advantages	<ul style="list-style-type: none"> High success rate (approximately 95-98%). A person takes the medication and passes the pregnancy at home, which may feel more private or natural. Because they are at home, a partner, loved one, or friend can support a person using medication abortion. Resembles a miscarriage or a heavy menstrual period. Can be used early in pregnancy through 10-11 weeks from the last menstrual period. After nine weeks, a second dose of misoprostol is used to increase the success of medication abortion. 	<ul style="list-style-type: none"> High success rate (approximately 99%). Only requires one clinic visit. Procedure is completed within minutes. Anesthesia or sedation can be used if desired. Can be used early or later in pregnancy. When the procedure is over, a person knows immediately that they are no longer pregnant.
Disadvantages	<ul style="list-style-type: none"> Passing the pregnancy can be painful. Cramping and bleeding are a normal part of the process. About 2-5% of people will need a uterine aspiration after medical abortion for bleeding, retained tissue, or a continuing pregnancy. Bleeding or spotting after medical abortion may last longer than after uterine aspiration, sometimes for more than a month. Depending on how a person is followed, it may take one to more than a month to make sure the medication abortion was successful. The risk of continuing pregnancy is 0.5%. 	<ul style="list-style-type: none"> Involves a procedure in a clinic, office, or hospital where a person has a gynecologic exam and instruments enter the uterus. May seem less private to some people. Partners and loved ones may not be permitted in the procedure room. People may experience complications from the procedure or anesthesia, although complications are infrequent.