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## Pregnancy Advisory Service

Many women are faced with an unplanned pregnancy and find it hard to make a decision about what to do. At the Pregnancy Advisory Clinic we are here to help and support you in making this decision. It is not our intention to encourage you into making a particular decision but to help you gain the support, advice and information to make the right decision for you at this particular time.

If you suspect you are pregnant, you need to confirm this with a pregnancy test. You can buy a home test from a pharmacy or you can obtain a test from your GP, Health Centre, Contraception/Sexual Health Clinic or Youth Advisory Service.

If you are pregnant then you have three basic choices:

- Continue the pregnancy and keep the baby.
- Continue the pregnancy and place the baby for adoption.
- End the pregnancy by having an abortion.

It is quite normal to have mixed feelings about being pregnant and about each of the choices open to you; making a decision can be difficult and frightening. In making your decision it is helpful to be clear about your feelings by listing and exploring them.

If you cannot decide, you may find it useful to discuss your options and obtain more information regarding health issues and social support. A referral to the Pregnancy Advisory Service can be arranged for a consultation with the Pregnancy Advisory Nurse Specialist. She will be able to provide you with support and where necessary, arrange referral to other professionals, i.e. Teenage Pregnancy Midwife, Drug Misuse Midwife or Social Worker, to enable you to make a decision about the pregnancy.

If you decide you wish to go ahead with an abortion this is free but you need a referral.

This can be obtained from:

- A GP (if you think your own GP may not be sympathetic or does not make referrals for religious grounds you can go to another doctor).
- Contraception/Sexual Health Clinics/Youth Advisory Service.
- Or you can refer yourself on 01792 200303.

A referral will be sent to the hospital and you will need to telephone 01792 200303 after 24 hours to arrange a telephone appointment for yourself. Please phone Monday to Thursday between 8.00am and 3.00pm. Please ring this number if you no longer require a referral.

If you change your mind before your appointment please telephone to let us know. We can then give the appointment to someone else.

### **What will happen at the specialist appointment?**

The health professional will ask you questions via telephone. An ultrasound scan will be done in some cases (not all) to determine how advanced your pregnancy is (you do not have to watch the screen).

The health professional will then discuss the options available to you and will advise you on the method of termination which will be best suited for you and explain the procedure. The health professional will answer any questions you may have. If you are going ahead with the termination you may be able to have your treatment on the same day if it is available, or you will be given another appointment to return to the hospital to have it performed. This is usually within the next couple of days.

### **Can I change my mind?**

Speaking with the health professional does not mean you have to proceed with a termination. You can change your mind any time up until the procedure is commenced. If you feel under pressure, if you feel upset or unsure about what to do or if you simply need time away from everything to think through your decision, please ask for a further appointment.

We can provide you with support and help you to make your own decision. We can advise you about alternatives to a termination such as adoption or organisations that can support you if you decide to go ahead with the pregnancy. We may also suggest you see a counsellor if you feel this would be beneficial.

## **How is the termination done?**

An abortion is a way of ending an unwanted pregnancy using medicines or a surgical procedure. Both types may be used at different stages of pregnancy. If you are less than 7 weeks pregnant, a medical abortion is more likely to work than a surgical abortion.

The different types of abortion will be discussed with you at your first consultation. You will probably have some pain or discomfort with whatever procedure you choose to have. You will be given appropriate pain relief. You will also have antibiotics to help reduce the risk of infection.

### **Medical Termination:**

**4 weeks to 9 weeks and 6 days.**

You will be provided with 2 different medicines. The first tablet is Mifepristone which blocks the hormones to the pregnancy. The 2<sup>nd</sup> medication (misoprostol) is administered yourself 24-48 hours after the first tablet. You will be given detailed instructions about when and how to use the medication. Misoprostol is a hormone that makes your uterus (womb) expel the pregnancy, usually within 4-6 hours- however, it can take longer than this for some people. You will be provided with pain relief. You may continue to bleed for up to 2 weeks after the procedure. You will be asked to do a pregnancy test 3 weeks after your termination.

### **Medical Termination:**

**9 weeks & 6 days to 17 weeks & 6 days.**

For this procedure you will take the same medicines as you would for an early medical termination (see above). At this stage, however, abortion can take longer and you may need to have additional misoprostol and extra pain relief. If you have a medical termination at a gestation of between 9 weeks & 6 days, and 17 weeks & 6 days, you will be cared for in hospital by an experienced team of nurses and doctors. Most people who choose this method only need to stay in hospital for one day. On rare occasions, an overnight stay may be necessary.

## **Surgical Termination:**

### **7 weeks to 12 weeks**

For this procedure you will have a general anaesthetic (put to sleep).

After you have been admitted, you will be given a medicine called Misoprostol that will soften the cervix before the procedure. This makes the procedure safer. Once you are asleep, the cervix (entrance to the womb) will be gently stretched open until it is wide enough for the contents of the uterus to be removed with a suction tube.

After you wake up from the anaesthetic you may feel a little tearful. But this and any period-like discomfort you have should soon pass.

Surgical termination is a safe procedure, but all operations carry a small risk. With this method there is a small risk that the womb is injured during the procedure or that infection may be introduced. If the womb is injured or infected it may be necessary to have further treatment. Usually, however, the termination is over in a single procedure without complications.

Most people are able to go home a few hours after the procedure. You will need adult supervision for 24 hours and will not be able to drive for 48 hours.

## **Manual Vacuum Aspiration:**

### **5 weeks to 10 weeks**

This is a similar method to surgical termination, however, you will **not** be put to sleep. Before the procedure starts, you will be given 2 tablets (misoprostol) to melt between your gum and cheek, or under your tongue. You will be given a local anaesthetic (around your cervix) to make the procedure more comfortable. The cervix (entrance to the womb) will be gently stretched open until it is wide enough for the contents of the uterus to be removed with a suction tube. This method can be painful during the suction procedure. You will be given a pain killer before the treatment starts, and as requested throughout your stay.

The procedure takes around 10 minutes and recovery time afterwards is very quick.

With this method there is a small risk that the womb is injured during the procedure or that infection may be introduced. If the womb is injured or infected it may be necessary to have further treatment. Usually, however, the termination is over in a single procedure without complications.

Most people can go home within an hour or two after the procedure.

## **After the Termination**

Whichever method is used you may bleed for up to two weeks, although this will not be heavy. Small clots can be normal. If you experience any problems please contact the numbers provided directly.

You are more likely to get problems in the 2 weeks after the abortion than at the time of the procedure itself.

- Up to 1:100 women develop an infection after an abortion.
- The uterus may not be emptied completely of its contents (retained products) and further treatment may be needed. This happens in 2:100 women.

## **How will I feel?**

For many women there is no easy decision about having a termination of pregnancy. If it seems clear to you that you ought to go ahead, it is very likely that you will also feel some regret and upset as well.

So although you may experience relief when the procedure is over, you may find yourself feeling quite low and tearful for a while afterwards. This reaction is quite common and will normally pass given time. If it does not, it may be because you find it difficult to discuss your feelings with anyone, or it may be that there is no one around to give you support at home.

If this is the case please do not hesitate to telephone 01792 200303 Monday-Thursday 8.00am until 3.00pm to make an appointment.

A sheet is attached to this leaflet to inform you of our counselling services.

## **What about future contraception?**

You should start using contraception straight away. This will be discussed with you at the clinic. We will provide your choice of contraception before you are discharged.

## **Blood Groups**

If you are found to be RhD Negative, you will be offered an anti-D injection after your termination only if you are over 9 weeks & 6 days pregnant and choose a medical termination, or at any gestation if you choose a surgical procedure. This can be explained in more detail at your appointments. You can find out more information on

this in “Routine antenatal anti-D prophylaxis for women who are RhD Negative: information for patients.”  
(National Institute for Clinical Excellence)  
<https://guidance.nice.org.uk/ta156/publicinfo/pdt/english>

## **Fertility**

If there were no problems with your abortion, it will not affect your chances of becoming pregnant in the future. Abortion does not increase your risk of miscarriage, ectopic pregnancy or low-lying placenta in future pregnancies. However, you may have a slightly higher risk of premature birth.

## **Telephone Contact Details**

To make, cancel or change an appointment

Telephone: 01793 200303

8.00am – 3.00pm Monday to Thursday