

Using Only Misoprostol for an Abortion

Adapted from *Medical Abortion Training for Providers*

Protocol recommended for pregnancies up to 13 weeks, counted from the first day of the last menstrual period.

Contraindications

Almost anyone can safely have an abortion with pills, including pregnant women, girls, and any other pregnant people of all ages and sizes; those who are pregnant for the first time or already have children; those who are breastfeeding, have had a previous abortion or C-section; and those who have stable health conditions like HIV, diabetes, or asthma. There are only a few contraindications to using the abortion pills.

Do NOT use misoprostol if:

The abortion seeker is allergic to misoprostol or other prostaglandins.

Other conditions to screen for before a medication abortion:



Ectopic pregnancy

abortion pills will not terminate an ectopic pregnancy, and emergency care is needed.



Bleeding disorders or severe anemia

an abortion with pills is still safe, but these conditions slightly increase risk and may require closer monitoring.

If an IUD is in place:

An IUD is not a contraindication to using the abortion pills; however,



The risk of ectopic pregnancy is higher with an IUD; and



it is safer to have it removed before using the abortion pills.

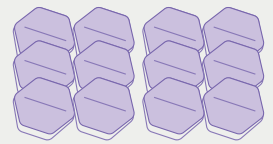


A new IUD can be inserted as soon as the medical abortion is confirmed to be complete.

For an abortion with only Misoprostol

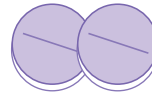


2 ibuprofen



12 misoprostol

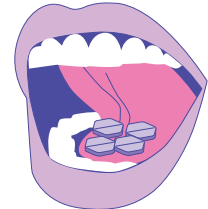
- 1** Take two ibuprofen pills (400 mg each) or 1000 mg acetaminophen if allergic.



- 2** Wait 30 minutes.



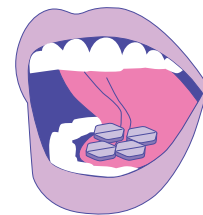
- 3** Place four misoprostol pills (200 mcg each) under the tongue (sublingually) and keep them there for 30 minutes before swallowing the remnants with water.



- 4** Wait three hours.



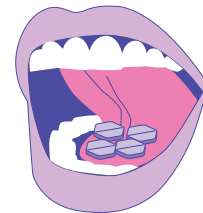
- 5** Place another four misoprostol pills (200 mcg each) under the tongue the same way as before.



- 6** Wait three hours.



- 7** Place another four misoprostol pills (200 mcg each) under the tongue again.



After taking the misoprostol, a **sanitary pad** suitable for heavy flow should be worn.



The person should not speak or eat for the 30 minutes.



After 30 minutes, they can **drink some** water and swallow whatever is left of the pills.



Misoprostol should be taken the same way for any additional doses.



Bleeding and cramping should begin within three hours of taking the four misoprostol pills.

Using 12 misoprostol pills is strongly recommended. While proceeding with only eight pills is possible if 12 are unavailable, be aware that this will reduce effectiveness, particularly for pregnancies between 10 and 13 weeks.



If the person experiences nausea and anti-nausea medication is available, it can be taken when nausea starts or with the pain reliever, before taking the abortion medication.

Expected symptoms

To ensure a positive and comfortable medication abortion experience, clearly inform the person about what to expect during and after the procedure.



Bleeding

usually starts within **three hours of taking misoprostol**, is heaviest four to **six hours later**, and typically slows within **24 hours**, though patterns vary. Seeing large blood clots or tissue is expected. Some people may spot or bleed for up to four weeks, which is also normal.



Cramping

Typically starting 30 minutes post-misoprostol, signifies uterine contractions expelling the pregnancy. Cramping pain, ranging from mild to severe, usually peaks four to eight hours after administration.



Everyone must always receive pain medication

Dispensed with misoprostol. **Nonsteroidal anti-inflammatory drugs** (NSAIDs), like **ibuprofen** (400-800 mg every 6-8 hours, at a max of 3200 mg/24 hours) or **diclofenac sodium** (50 mg every 12 hours, at a max of 150 mg/24 hours), are highly effective. Paracetamol is ineffective alone and should be avoided unless an NSAID allergy exists; it can be used as a supplement to NSAIDs (at a max of 4000 mg/24 hours) for breakthrough pain.



Nonmedical methods

Such as **resting comfortably and applying a heating pad or hot water bottle** to the abdomen, can also ease cramping.

Common side effects

A medication abortion commonly causes minor, temporary side effects, mostly due to the misoprostol, which usually resolve within 24 hours. There are no long-term effects.

Nausea/Vomiting:

lasts two to six hours post-misoprostol.



Manage with **anti-nausea medication** (e.g., metoclopramide) and by **staying hydrated** and eating small, light meals.

Dizziness:

Common post-misoprostol.



Manage by eating **small meals, staying hydrated, and lying down**.

Diarrhea:

Often mild to moderate.



Resolves within a day.

Fever/Chills:

Temporary, peaking one to two hours after misoprostol and usually ending within eight hours.



(Pain medication can help, but monitor maximum daily painkiller intake). Advise seeking emergency care if a fever of 38°C (100.4 F) persists the day after taking misoprostol.

Warning signs

Complications from an abortion with pills are rare. However, it is important that the pregnant person is aware of early warning signs so that they can seek appropriate care.

Nonemergency Warning Signs (seek care ASAP):



No/little bleeding.

It could mean a failed abortion or an ectopic pregnancy (pills don't work on ectopic pregnancies).



Continued pregnancy symptoms:

This could indicate a possible failed abortion.

Emergency Warning Signs (Seek immediate care):



Hemorrhage: For example, soaking two or more pads/hour for two consecutive hours.



Severe abdominal pain the day after taking misoprostol.



Severe illness with/without fever, or persistent severe nausea, vomiting, or diarrhea for more than 24 hours.



Fever: of 38°C (100.4°F) or higher, or a fever that continues the day after taking misoprostol.



Foul vaginal odor or discharge.

Most issues are resolved with limited provider intervention. If seeking medical care, it is not necessary to disclose the use of abortion pills. The person can say they are having a miscarriage, as complication management is the same.

Postabortion care

After a medication abortion, most people do not need a follow-up visit if they feel well, are no longer experiencing pregnancy symptoms, and are not bleeding heavily.

- ✓ **Pregnancy tests:** Can remain **positive for up to four weeks** after a successful abortion due to lingering hormones. An ultrasound can be performed earlier to confirm if appropriate bleeding and cramping haven't occurred and/or pregnancy symptoms are not gone.
- ✓ **Self-care:** Encourage abortion seekers to listen to their bodies. Normal activities can be resumed when comfortable and if there are no complications.
- ✓ **Returning to routine:** Most people return to work or school within one or two days after the last misoprostol dose. More time off may be needed for people who do heavy physical labor or are fatigued.
- ✓ **Sexual activity:** Can be **resumed when comfortable**, but the person seeking an abortion must be informed that fertility returns almost immediately.
- ✓ **Next period:** Typically occurs within six weeks and may be slightly heavier than usual.

Remember that it takes more or less two weeks to complete an abortion with pills.

If the person seeking abortion care has questions or needs to talk to someone, the **safe2choose.org** counseling team will be happy to support them.