Patient information

Surgical Abortion
Under general anaesthetic

Introduction

This leaflet tells you what to expect during and after your surgical abortion.

A surgical abortion means you will go to the operating theatre to have the pregnancy removed under general anaesthetic.

Surgical abortion is only available at West Suffolk Hospital up to 12+6 weeks gestation. The operation itself is carried out under anaesthesia so you will be asleep throughout. It only takes a few minutes, and involves opening the cervix (neck of the womb) in order to pass a tube by which the womb is emptied.

Clinic appointment

If you decide you would prefer a surgical abortion, you will be assessed by the doctor in a face-to-face abortion clinic. The doctor will ask you a series of questions about your personal details and medical history. If a surgical abortion is appropriate, you will be asked to sign a consent form.

The nurse in clinic will arrange an appointment with the pre-assessment unit. This appointment involves taking a blood sample and assessing your general health to ensure you are fit for a general anaesthetic and surgery. You will also be given an admission date for the procedure either in Day Surgery Unit or on ward F14.

The blood sample will determine your blood group. If you are rhesus negative blood group (Rh-ve) you will be offered an Anti-D injection to prevent complications in future pregnancies. A leaflet with further information is available about this.

All patients having a surgical abortion need to have a chlamydia screen, this will be completed in the clinic. We will contact you if your swab is found to be positive, however we won't contact you to confirm a negative swab.

Admission to hospital

You must arrange to have a responsible adult to take you home and stay with you for the first 24 hours after your anaesthetic. This is because the general anaesthetic may make you feel tired and affect your judgement.

Fasting instructions:

- You will be told how long before your procedure you will need to fast (stop eating and drinking). This is very important. You must follow the instructions carefully.

- If you forget and do eat or drink anything, then please tell your doctor or nurse as your procedure may need to be postponed for safety reasons. This is because when you are unconscious and your stomach contains food or drink, you may be sick; it could get into your lungs, affect your breathing and cause an infection.

You will be admitted to hospital for the day but you may need to stay overnight, depending on how you feel after your operation. Please bring your nightwear, dressing gown, slippers, toiletries, towel and sanitary pads with you.

What will happen before my operation?

On the day of admission, you must:

- Stop eating and drinking at the time pre-assessment advises you to.
- Remove any jewellery you are wearing (including body piercings), contact lenses, make-up, nail varnish and false nails, if possible. A wedding ring can be left on but will be covered with tape. Have a shower or bath to make sure your skin is clean, to reduce the risk of infection.
- Not use body lotions, deodorants and perfumes.
- Before your operation you will be asked to remove your clothes and underwear and change into a hospital gown. False teeth, hearing aids and glasses can be removed when you arrive at the operating theatre.

Your nurse will insert four misoprostol tablets into your vagina to soften your cervix. This is to reduce the risk of damage to the cervix during the operation.

If you have any second thoughts about the operation you must tell us before we give you the tablets.

You will be taken to the anaesthetic room where you will be given a general anaesthetic.
The procedure itself usually only takes 10-15 minutes and you will be transferred to a recovery area after it is complete.
You will then have time to recover on the ward before being discharged home once you feel well enough.

What we do with the pregnancy remains removed

In the clinic we will discuss what happens with the pregnancy remains. The remains may be sent for histological examination to confirm that there is no evidence of molar pregnancy. If this occurs there may be no pregnancy remains for any further action.
Most people opt for the hospital to take care of this, and the pregnancy remains are disposed of in a sensitive manner. However, you have the option to make alternative arrangements if you wish. The doctor or nurse can discuss this with you.

Complications associated with Surgical abortion

Abortion is a very common and safe procedure and complications are rare, especially earlier in pregnancy. Possible complications include:

- Infection of the womb – around 1 in 100.
- Failure of the procedure (where the procedure fails to end the pregnancy) - less than 1 in 100.
- Retained products of conception (where some of the pregnancy tissue may be left inside the womb) - around 1 in 100.
- Severe bleeding (very heavy bleeding that may require a blood transfusion) - less than 1 in 1000.
- Cervical tear (damage or a small tear to the neck of the womb) – less than 1 in 100.
- Uterine perforation (making a small tear in the womb) – less than 1 in 1000.

If you experience any complications, you may require further procedures such as a repeat vacuum aspiration, laparoscopy (keyhole surgery) or a blood transfusion.

After the operation

You should have someone stay with you for 24 hours as you may feel light headed for some hours after your general anaesthetic.

- You must not drive or operate machinery for 24 hours.
- You should not have sexual intercourse until bleeding stops.
- You may have vaginal bleeding (including some small clots) which will gradually decrease to a brown stain and lasts for 7 - 21 days. This does vary for each woman.
- You may experience period type pains. Take your usual pain killer, paracetamol and/or ibuprofen should be sufficient if they suit you.
- You should use sanitary towels, not tampons, until your next period.

We ask all patients having this procedure to complete a urine pregnancy test in 3 weeks following the surgical abortion. This is to ensure all the pregnancy tissue has been removed. Please call F14 if this is positive.

When should I start using contraception again?

Contraception will have been discussed at your initial clinic appointment, a contraceptive coil can usually be inserted at the time of surgery if requested. If you decided to have the contraceptive injection, this will be given by the nurses before you leave. If you decided to have the progesterone contraceptive pill we ask that you start taking it the following day (please remember you must take this at the same time every day). If you plan to have a coil and this has not been fitted during your surgery or you would like an implant, please call Suffolk Sexual Health on 0300 303 9982, who will be happy to support you with this.

Return to work

It really depends on how you feel and the type of work you do. We do advise you not to go to work the day after your operation.

Physically you can return to work after this, however, emotionally it may take longer to recover. Every woman is different as are her circumstances. If you have someone you can share your feelings with it will help. Counselling is available if you feel you need it.

If you have any queries contact

About the surgery day, contact The Martin Corke Day Surgery Unit on 01284 713958 / 713959 between 7.45am to 8.00pm Monday to Friday.

Concerns following your procedure, contact the gynaecology ward F14 on 01284 713235/6 and speak to the nurse in charge. Please have your hospital number on the discharge letter available.

These organisations offer support and information:

FPA (Family Planning Association): 50 Featherstone Street London EC1Y 8QU
Telephone: 0300 123 7123 : www.fpa.org.uk

Suffolk Sexual Health Service (for contraception and sexual health advice):
Telephone: 0300 303 9982 https://suffolksexualhealthservice.org.uk/

Non-profit-making organisations which provide confidential termination services:

BPAS (**British Pregnancy Advisory Service**)

We are an independent healthcare charity which for more than 55 years, has been advocating and caring for women and couples who decide to end a pregnancy.
Booking line: 03457 30 40 30: www.bpas.org

MSI Choices UK
MSI Reproductive Choices provides contraception and abortion services that enable women all over the world to choose their own futures.
0345 300 8090
www.msichoices.org.uk
Facebook: facebook.com/MSIchoicesUK

Gynae info hub

Information and resources to support your gynaecological health - scan the QR code or go to wsh.nhs.uk/gynaeinfohub

Meeting your needs

We can provide information about our service in different formats and adapt the ways we communicate with you, depending on your needs. Please let us know what your particular needs are and we will do our best to help.

If you would like any information regarding access to the West Suffolk Hospital and its facilities please visit the website for AccessAble (the new name for DisabledGo) https://www.accessable.co.uk/organisations/west-suffolk-nhs-foundation-trust

AccessAble
Your Accessibility Guide