	Comparison of Early Abortion Options		
Medication Abortion		Aspiration (Surgical) Abortion	
Mifepristone & Misoprostol	Methotrexate & Misoprostol	(Suction o	or Vacuum)
	How far along in the pregnancy can I be?		
Health Canada Approved up to 7 weeks of pregnancy (49 days on the date you take the mifepristone). "Off Label" (evidence-based protocol, but not approved by Health Canada) up to 9 weeks of pregnancy (63 days on the date you take the mifepristone).	"Off Label" (evidence-based protocol, but not approved by Health Canada) up to 7 weeks of pregnancy (49 days on the date you take the methotrexate).	Up to 12 weeks 0 days (on the date of the procedure). Note: The appointment at the clinic is a consultation and pre-op. You will be booked for the actual hospital procedure at a later date.	
· · · · · · · · · · · · · · · · · · ·	How much does it cost?		
The medication costs about \$300.	The medication costs about \$85.	The procedure an	d related costs are
The medication is covered by some health process (ie. physician services) are	covered by Saskatchewan Health.	covered by Saskatchewan Health.	
	How effective is it?		1
99% effective in ending the pregnancy at <7 weeks.	95% effective in ending the pregnancy	97% effective if done before 7 weeks gestation.	99% effective if done between 7-12 weeks gestation.
95% effective in ending the pregnancy between 7-9 weeks.	Methotrexate may be used to treat ectopic (tubal) pregnancy		
Does not treat ectopic pregnancy	w de liveeu heu ferelene the programu i		
	ow do I know how far along the pregnancy is are by considering a number of factors, inclu		ooks from the first
	f your uterus on clinical exam, blood tests and	-	eeks nom the mist
	What will happen?		
Your health history and plans for future con- you are due. Depending on your medical risl	nent is made to explore your pregnancy optic craception are also discussed. A clinical exam c factors, you may also need to see a specialis	i is done, which may in st. You may also see a The procedure take	clude a pap test if counselor if needed.
This is a multi-step, non-surgical process that takes place at home.		hospital. The actual procedure takes about 10	
The drug mifepristone is taken first and blocks the hormone progesterone which is needed for the pregnancy to continue. 24-48 hours later the drug misoprostol is used and causes the body to pass the pregnancy tissue.	The drug methotrexate is taken first and stops the growth of the pregnancy. 3-7 days later the drug misoprostol is used and causes the body to pass the pregnancy tissue. A second dose of misoprostol may be needed.	minutes. Your provider will put medical instruments in your vagina and uterus to remove the pregnancy. You will be at the hospital for around 4 hours.	
You must follow up 1 week later for lab work and to receive the results from your provider to make sure the abortion is complete. A follo How much will I bleed?		A follow-up visit is r	not routinely needed.
Heavy bleeding with clots is common after you take the misoprostol. Lighter bleeding may continue on and off for 2-4 weeks.		Most women have light bleeding for 1-7 days. Bleeding may continue off and on for a few weeks.	
	Do I have to follow a special diet?		
You may eat and drink normally.	Avoid vitamins and foods high in folic acid from the date of the methotrexate until the date of the misoprostol.	You can have nothing to eat after midnight the evening before your surgery. Clear fluids are permitted up to 1 hour prior to registration at hospital.	
	Does it Hurt?		
Moderate to very strong cramps occur off an during and after the abortion.	Intravenous medication is given to help with pain and relaxation during the abortion. Although you are awake during the procedure, you may not remember it clearly.		
Pain medication (naproxen, ibuprofen, or a heating p	You may have mild to strong cramping after the abortion: pain medication (naproxen, ibuprofen or acetaminophen), a hot water bottle or heating pad help.		

Medication Abortion	Aspiration (Surgical) Abortion			
(all protocols)	(Suction or Vacuum)			
Can I use tampons?				
Use pads (not tampons) until your bleeding has stopped, AND				
until your doctor confirms with lab results the abortion is complete	for one week after the procedure			
What about sex?				
Avoid vaginal intercourse until the bleeding has stopped and your provider has confirmed with your lab results that the abortion is complete.	Avoid vaginal intercourse for one week after the procedure and the bleeding has stopped.			
You can become pregnant after the abortion and before your next period. Follow your doctor's advice about when to start your chosen birth control method.				
If you choose an IUD (intrauterine device), it can be inserted after the abortion is complete.	If you choose an IUD, it can be inserted at the hospital immediately following the aspiration procedure.			
Use condoms to prevent sexually transmitted infections.				
Know your options for emergency contraception if you happen to have unprotected sex: -Plan B (the morning after pill) taken within 72 hours of sex: you can get this from your pharmacist.				
-Copper IUD (intrauterine device) inserted by your doctor or nurse practitioner within 5 days of sex.				
Call your provider immediately if you have:				
Very heavy bleeding : Bleeding that soaks 2 pads per hour for 2 hours in a row. Infection signs: fever more than 38 degrees C (100.4 degrees F) for more than 6 hours. Foul smelling vaginal discharge. Severe abdominal pain that is not helped at all with the pain medications your provider has told you to take.				
	pesn't work?			
If the medication abortion doesn't work, the fetus may be damaged or deformed because of the medication. Another dose of misoprostol may be used to complete the procedure. If this is ineffective, you will then require an aspiration (surgical) abortion to remove the pregnancy.	If the surgical procedure doesn't work, you must have a repeat aspiration.			
	ill I feel?			
emotions depends on how you have dealt with your feelings counselling can be helpful, both before and at Can I still ha Yes. Neither type of abortion lowers your chances o Is it Both medication and aspiration abortions are very safe in Canada	 less common, but may also occur and are normal. The range of about your pregnancy choices. If these feelings are difficult, fter you make the decision that is best for you. we children? of getting pregnant or staying pregnant in the future. safe? a. Both are at least 10 times safer than continuing a pregnancy to encoded 			
term. What are the pros and cons?				
PROS	PROS			
Some women feel it is more natural, like a miscarriage. Being at home instead of at the hospital may be more private. Non-surgical: no anaesthesia side effects and no instruments in your body. You can choose to have someone with you, or you can be alone.	It is free (with Provincial Health Card, excluding Quebec). It is a brief procedure. You see less bleeding than you would with a medication abortion. It can be done later in the pregnancy than a medication abortion. Medical professionals are with you prior to, during, and after the procedure.			
CONS	CONS			
There is a cost for the medication. It is a multi-step process and it takes longer to complete the abortion. Bleeding can be very heavy. You may see clots and tissue. Cramps can be severe. Side effects from medication may include headache, nausea, vomiting, dizziness, and fever.	Surgical: a doctor inserts medical instruments inside the uterus. There is a very rare risk of damage to the uterus (may heal on its own or need additional surgery to repair). Anaesthetic and medications may cause side effects. You must not drive or make important decisions for 24 hours after the procedure due to medication side effects. The woman has less control over the abortion procedure and			
You must have a telephone, transportation in case of an emergency, and follow through with the entire process. Cannot be done as late in pregnancy as an aspiration abortion.	who is with her. The vacuum aspirator may seem noisy.			