1. What is an Abortion?

Abortion is the termination of pregnancy when fetus and other pregnancy products are expelled from womb before it is sufficiently developed to survive independently. (foetus less than 28 weeks of pregnancy). It may occur without any intervention (spontaneous) or may be induced (by medical or surgical methods).

2. What is Spontaneous Abortion?

Spontaneous abortion occurs without any intervention by any women or doctor. This occurs due to defects in the either fetus or woman reproductive system. These include chromosomal or genetic or defects in the uterine wall which is not able to support a pregnancy.

3. What is incomplete abortion?

Some of the pregnancy tissues have been expelled, while other tissue remains in the uterus. It is important that even if abortion has occurred at home, a doctor must be consulted to ensure that abortion is complete i.e., all pregnancy tissues are expelled.

4. How many women undergo Abortion in India?

It is estimated that 6.4 million abortions take place in India each year. (Abortion Assessment Project
– India: Key Findings and Recommendations)

5. When is it safe to undergo an Abortion?

Medical abortion can be done in case of pregnancy only upto 9 wks. After 9 wks, surgical abortion is the only option up to 20 wks of pregnancy.

6. What is the difference between a medical abortion and a surgical abortion?

Medical abortion is done by using a combination of two pills -Mifepristone and Misoprostol, which end the pregnancy. These pills have to be administered orally. A woman has to swallow a dose of mifepristone. Between five to seven days she returns and inserts suppositories of misoprostol into her vagina. The pregnancy usually ends at home within four hours. The embryo and other tissue that develops during pregnancy are passed out through the vagina. This method has high success rate upto 95%.

Surgical abortion is done with the help of a suction vacuum aspirator under local anesthesia. This consists of removing the fetus or embryo, placenta, and membranes by suction using a manual

syringe. Dilation and curettage(D&C), the second most common method of surgical abortion, is a standard gynecological procedure performed for a variety of reasons, including examination of the uterine lining for possible malignancy, investigation of abnormal bleeding, and abortion. From the 15th week of gestation until approximately the 26th, other techniques are used. Dilation and evacuation (D&E) consists of opening the cervix of the uterus and emptying it using surgical instruments and suction. Premature labor and delivery can be induced with prostaglandin.

First-trimester procedures can generally be performed using local anesthesia, while second-trimester methods may require deep sedation or general anesthesia.

7. Difference between I-Pill and Abortion Pill?

I-pill is a single-pill emergency contraceptive that offers the woman, an effective way to prevent an unplanned pregnancy after having unprotected sex. The pill prevents conception. Other emergency contraceptive pills are Unwanted 72, Emergency Goli which are available over-the-counter. I-pill is ineffective if the pregnancy is established, it is therefore NOT an abortion pill.

The abortion pill is a medicine that ends an early pregnancy. It should be taken only after the pregnancy is confirmed. Abortion pills are available in combination of pills **Mifepristone** and **Misoprostol**. These prevent the pregnancy from advancing and should be strictly taken under medical supervision.

8. Are abortion pills available over-the-counter?

Yes. The abortion pills are legally available only on prescription from a gynecologist. Administering these pills without expert guidance can be life threatening and lead to complications.

9. Are abortion pills effective?

Yes. Abortion pills are safe only when judiciously used (within 9 weeks) under a doctor's guidance. In case of an incomplete abortion, the woman <u>may</u> need to undergo surgical abortion.

10.When can a woman undergo an abortion?

- Abortion is legal for a woman if;
 - a. the pregnancy endangers her life,
 - b. causes grave injury to her mental or physical health,
 - c. might result in a child with physical and mental abnormalities,
 - d. is the result of rape including marital rape
 - e. Result from contraceptive failure. Contraceptive failure is legal grounds for abortion only for married women, but it does legalize abortion on demand.

11.Is abortion legal in India?

- Yes. The Medical Termination of Pregnancy (MTP) Act, enacted in 1971 legalizes abortion in India up to 20 weeks if it fulfills the following conditions:
 - Performed by a registered medical practitioner as defined in the MTP Act
 - Performed in a place approved under the Act
 - Other requirements such as gestation period, consent and opinion of registered medical practitioners are fulfilled.

Abortion can be legally performed up to 12 weeks gestation on prescription by one medical doctor and abortion performed up to 20 weeks gestation with concurrence of two medical doctors.

12. Does a woman require a written consent of her husband to get an MTP done?

A woman can give her own consent if she is above 18 years of age, she does not require the consent of her husband

13. Whose consent is needed if a woman is below 18 years of age?

▶ In such cases the woman will require a written consent from her parent/guardian.

14.Is abortion confidential in India?

Yes. The health facility is required to maintain admission register recording all details of the woman accessing the abortion services. The Medical Termination of Pregnancy Act, 1971 makes provision for the admission register to be a secret document and the information contained therein is not be disclosed to any person, except under the authority of law.

15. Where can a woman access the abortion facilities?

Abortion services can be accessed at any of the hospitals established or maintained by the Govt. In private health settings, one can access abortion services at a health care facility approved by Govt or a District Level Committee constituted by the Govt for termination of pregnancy.

16.Do women seek abortions only to terminate a pregnancy when the fetus is female?

- > No. Most women who opt for an abortion do so under following circumstances;
 - They cannot afford another child
 - contraception has failed
 - they are unmarried,
 - they have been raped

Estimates indicate that two to four percent of all abortions in the country are son selective abortions. According to estimates for 2001-2008, 4.6 percent of all female births did not occur because of pre-natal sex selection.

17.Are all second-trimester abortions sex selective? Why do women seek abortions in the second trimester?

Not all second-trimester abortions are sex selective. In fact, while sex determination takes place mostly in the second trimester of pregnancy, 80 to 90 percent of reported abortions in India take place in the first trimester. In India, some women delay pregnancy termination until they are in the second trimester for reasons other than sex selection. Cases of delay in abortion seeking are common amongst poor, young, and unmarried women in particular, who are often poorly informed on many fronts: they

may not understand the signs of pregnancy, the possibility or legality of obtaining an abortion, the importance of seeking early abortion (in the first trimester) and the location of safe services.

18.What can be the consequences of restricting access to abortions for women?

Restriction on safe abortion services will have long-term consequences on the health of women – especially if they are poor and less educated – and may also violate their human and reproductive health rights (Ganatra 2008). Evidence shows that if women do not have access to safe abortion services they often turn to unsafe options (WHO, 2007). Placing limitations on second-trimester abortions and/or increasing unnecessary reporting requirements for abortions will discourage providers from offering abortion services. Any immediate actions to curb access to abortions by government will add to the already widespread belief that abortion in India is illegal, pushing women to risk their lives, when they are in need of early and safe abortion services.
