Surgical Abortion
# Surgical Abortion

What are the differences between surgical and medical abortions?

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<tr>
<th>How it works</th>
<th>Surgical abortion</th>
<th>Medical abortion</th>
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</table>
| **How it works** | • A doctor will gently open your cervix (the opening to the uterus or womb) with dilators that gradually get bigger.  
• A cannula (straw-like tube) is inserted through the cervix into the uterus.  
• Suction (like a vacuum) is used to remove the pregnancy from the uterus.  
• The procedure usually takes 3-10 minutes. | • You take two medications. The pregnancy will end and the uterus will push out the tissue (like a miscarriage).  
• The first pill stops the pregnancy. The second pills are taken 24-48 hours (1-2 days) later, at a convenient time for you. |

<table>
<thead>
<tr>
<th>Advantages</th>
<th>Surgical abortion</th>
<th>Medical abortion</th>
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</table>
| **Advantages** | • Very low risk of continuing pregnancy (less than 1 in 100).  
• High success rate (about 99%).  
• Only needs one clinic visit.  
• Procedure is finished within minutes.  
• Sedation can be used if you wish.  
• Can be used early or later in pregnancy. | • High success rate (95-98%).  
• The pregnancy is expelled (pushed out of the body) within 24 hours of using misoprostol in 90% of women.  
• It is more private, since it is done at home.  
• You can choose to have someone with you for support.  
• Can be used very early in pregnancy.  
• Similar to a natural miscarriage or a heavy menstrual period. |
<table>
<thead>
<tr>
<th>Disadvantages</th>
<th>Surgical abortion</th>
<th>Medical abortion</th>
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<tbody>
<tr>
<td>• Medical instruments enter the uterus.</td>
<td>• Uterine cramping may be very painful.</td>
<td>• About 2-5% of women will need a uterine aspiration procedure (D&amp;C) after medical abortion.</td>
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<td>• May feel less private.</td>
<td>• Bleeding after medical abortion may last longer than after uterine aspiration.</td>
<td>• You may see blood clots and pregnancy tissue.</td>
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<tr>
<td>• You can’t have someone with you for support, as partners and loved ones are not allowed in the clinic.</td>
<td>• Needs 2 clinic visits.</td>
<td>• You may not know if the abortion was successful until the follow-up appointment 1-2 weeks later.</td>
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<td>• Risk of continued pregnancy is 1 in 20.</td>
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**What is a surgical abortion?**

A surgical abortion uses suction to remove pregnancy tissue during a very short procedure, as described in the table above.

**Am I eligible for a surgical abortion?**

A surgical abortion may be performed if your pregnancy is up to 15 weeks and 6 days from the first day of your last menstrual period.

**What happens during a surgical abortion?**

**If your pregnancy is between 6 to 12 weeks:**

- The doctor will gently open your cervix (the opening to the uterus or womb) with dilators that gradually get bigger.
- Once the cervix is open, the doctor will insert a hollow straw-like tube (called a cannula) which is attached to an aspirator. This machine uses gentle suction (like a vacuum) to clean out the contents of the uterus, including the fetus and placenta.
• The doctor will then use a spoon-shaped instrument (called a curette) to check the walls of the uterus for any tissue that may remain. The procedure takes about 5 to 10 minutes.

If your pregnancy is between 13 weeks to 15 weeks and 6 days:
• You will be given a medication called misoprostol before the procedure. Misoprostol softens the cervix and makes dilation (opening the cervix) easier.
• Misoprostol takes 1½-2 hours to work. After this, you will have the procedure described above, which will last about 5-15 minutes.

What are the possible risks?
• Infection may occur in 0.1-2% of cases. You will be given antibiotics to help prevent this.
• There is a very low risk (less than 1 in 1000) of:
  › injury to your uterus
  › remaining tissue requiring a second aspiration
  › excessive bleeding

Please see the pamphlet, After Your Procedure, for more information: www.nshealth.ca/patientinformation/1509

What are your questions? Please ask. We are here to help you.

In Nova Scotia you can call 811 to talk with a registered nurse about your health care questions 24/7.

Looking for more health information?
Find this pamphlet and all our patient resources here: http://library.nshealth.ca/PatientGuides
Contact your local public library for books, videos, magazines, and other resources.
For more information, go to http://library.novascotia.ca
Connect with a registered nurse in Nova Scotia any time: call 811 or visit https://811.novascotia.ca
Learn about other programs and services in your community: call 211 or visit http://ns.211.ca

Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment.
Please do not use perfumed products. Thank you!

Nova Scotia Health Authority
www.nshealth.ca

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