

WOMEN'S RIGHT TO KNOW

Abortion Risks

The risk of complications for the woman increases with advancing gestational age.

Below are descriptions of the risks that have been associated with abortion.

- **Pelvic Infection:** Bacteria (germs) from the vagina or cervix may enter the uterus and cause an infection. Antibiotics may clear up such an infection. In rare cases, a repeat suction, hospitalization or surgery may be needed. Infection rates are less than 1 percent for suction curettage, 1.5 percent for D&E and 5 percent for labor induction.
- **Incomplete abortion:** Fetal parts or other products of pregnancy may not be completely emptied from the uterus, requiring further medical procedures. Incomplete abortion may result in infection and bleeding. The reported rate of such complications is less than 1 percent after a D&E; whereas, following a labor induction procedure, the rate may be as high as 36 percent.
- **Blood clots in the uterus:** Blood clots that cause severe cramping occur in about 1 percent of all abortions. The clots usually are removed by a repeat suction curettage.
- **Heavy bleeding:** Some amount of bleeding is common following an abortion. Heavy bleeding (hemorrhaging) is not common and may be treated by repeat suction, medication or, rarely, surgery. Ask the doctor to explain heavy bleeding and what to do if it occurs.
- **Cut or torn cervix:** The opening of the uterus may be torn while it is being stretched open to allow medical instruments to pass through and into the uterus. This happens in less than 1 percent of first trimester abortions.
- **Perforation of the uterus wall:** A medical instrument may go through the wall of the uterus. The reported rate is one out of every 500 abortions. Depending on the severity, perforation can lead to infection, heavy bleeding or both. Surgery may be required to repair the uterine tissue, and in the most severe cases a hysterectomy may be required.
- **Anesthesia-related complications:** As with other surgical procedures, anesthesia increases the risk of complications associated with abortion. The reported risks of anesthesia-related complications is around one per 5,000 abortions.
- **Rh Immune Globulin Therapy:** Genetic material found on the surface of red blood cells is known as the Rh Factor. If a woman and her fetus have different Rh factors, she must receive medication to prevent the development of antibodies that would endanger future pregnancies.

Long-Term Medical Risks of Abortions

Early abortions that are not complicated by infection do not cause infertility, nor do they make it more difficult to carry a later pregnancy to term. Complications associated with an abortion or having multiple abortions may make it difficult to have children.

Women who have had a first full-term pregnancy at an early age have reduced risks of breast, ovarian and endometrial cancer. Furthermore, the risks of these cancers decline with each additional full-term pregnancy. Pregnancies that are terminated afford no protection; thus, a woman who chooses abortion over continuing her pregnancy would lose the protective benefit. If you have a family history of breast cancer or clinical findings of breast disease, you should seek medical advice from your physician before deciding whether to remain pregnant or have an abortion. It is always important to tell your doctor about your complete pregnancy history.

Emotional Side of an Abortion

You should know that women experience different emotions after an abortion. Some women may feel guilty, sad or empty, while others may feel relief that the procedure is over. Some women have reported serious psychological effects after their abortion, including depression, grief, anxiety, lowered self-esteem, regret, attachment, flashbacks and substance abuse. These emotions may appear immediately after an abortion or gradually over a longer period of time. These feelings may recur or be felt stronger at the time of another abortion, or a normal birth, or on the anniversary of the abortion. Counseling or support before and after your abortion is very important. If family help and support are not available to you, it may be harder for you to deal with the feelings that appear after an abortion. Talking with a professional counselor before having an abortion can help a woman better understand her decision and the feelings she may experience after the procedure. If counseling is not available to the woman, these feelings may be more difficult to handle. Many pregnancy-resource centers offer pre- and post-abortion counseling services; these centers are listed in the resource directory.