

good

Dealing WITH UNPLANNED PREGNANCY



By KARISHMA KUENZANG

Doctors put together a guide on what to do when you have to opt for an abortion

TWENTY-THREE year old Shalini* thought her period was delayed this August, till she just decided to take a pregnancy test. Many panicked calls later she landed up at a clinic near Malviya Nagar, on the recommendation of a friend's friend. She opted for a surgical abortion, but ended up getting a severe infection. Her parents eventually found out and she was taken to a private hospital, where she had to be treated further.

There are many like Shalini who get stuck with an unplanned pregnancy, panic and refuse to get help from certified doctors or go for a cheaper option. While society has a big role to play due to the social stigma attached to a child conceived out of wedlock, here are some things one should remember while opting for a medical termination of pregnancy (MTP).

Dr. Tripti Saran, senior consultant, obstetrics and gynaecology, DLK Super Speciality Hospital, says, "Abortions impose an unnecessary, avoidable stress to the body. Every medicine can have a side effect and any procedure has some risks. Though the chances are uncommon and with improved technology, surgery and drugs are safer than before, things can still go wrong. When girls delay reporting the pregnancy, that's when things get out of hand."

If a pregnancy drug on for more than 20 weeks, it's legally not allowed to go through with the procedure. The approval of two gynaecologists is required to certify the need for MTP in the second trimester.

Dr. Nisha Saha, principal consultant and HOD, department of obstetrics & gynaecology, Max Super Speciality Hospital, Shalimar Bagh, says, "Most doctors advise termination through Medical Pills if the woman is 6 weeks old with 3-10 per cent chance of failure. If it's been more than seven weeks, then she has to opt for surgical method."

There are three ways to go about an MTP after an ultrasound and blood test has been done to determine the time of conception.

■ **Termination through pills:** Abortion pills can be administered only during 7 to 9 weeks. Dr. Rita Bakshi, founder and chairperson, International Fertility Centre (IFC), says, "The patient is given Mifepristone, which blocks the progesterone to the uterine lining causing it to break down. This prevents the pregnancy from carrying further."

After 36 to 72 hours, Misoprostol tablets are taken orally or inserted vaginally. These pills induce forced contractions and expel out the foetus. This process can go on for days or even weeks.

Dr. Aparna Gupta, consultant, gynaecologist, Paras Bliss Hospital, New Delhi, adds, "After consuming the pills, patient should expect moderate to heavy bleeding with clots. Bleeding is heavy initially. A second ultrasound is done after 14 days to ensure completion of abortion. If it shows that some fragments have retained, then a surgical procedure may be required. Failure rate of this method is 2-10 per cent."

■ **Termination through suction aspiration:** Aspiration, suction aspiration,

COST
A MEDICAL ABORTION COSTS ABOUT ₹2,000 TO ₹3,000

COST
SURGICAL ONE CAN COST ANYTHING BETWEEN ₹5,000 AND ₹30,000

Consent

If a woman is married, her own written consent is sufficient; her husband's consent is not required. If a woman is unmarried and over 18 years of age, she can provide her own written consent.

A guardian's consent is required if the patient is below 18 or mentally challenged.

suction curettage, or vacuum aspiration is conducted between the 6th to 16th week of pregnancy. The doctor first provides medication for pain or sedates the patient.

The cervical area is numbed with local anaesthetic and cervix is held in place with a tenaculum for dilation with absorbent rods of

varying sizes. Once the cervix is dilated enough, the foetus and placenta are suctioned out by inserting a cannula into the uterus. The process takes 10 to 15 minutes but the patient needs to spend a few hours in the hospital for recovery. Antibiotics are administered to prevent infection.

■ **Termination through Dilation & Evacuation (D&E):** This procedure is employed after the 16th week of pregnancy.

The doctor inserts a synthetic dilator in the cervix about 24 hours before the procedure. On the day of the procedure, the cervix and uterus are kept in place using tenaculum and conical rods. The cervix is numbed through medication and a shot may be administered to ensure the death of the foetus before the process, according to Dr. Rita.

She adds, "At this stage a cannula is inserted to start removing the tissue away from the lining. The uterine lining is scraped using a curette to remove any residual tissue. A

Glee actor Naya Rivera spoke about getting an abortion done when she was in her early 20s.



SIGNS TO WATCH OUT FOR

- Missed periods
- Breast tenderness
- Fatigue
- Frequent urination
- Nausea
- Dizziness
- Food cravings and aversions
- Sensitivity to aromas
- Morning sickness
- Heartburn and constipation
- Mood swings and irritability
- Higher body temperature
- Lower back pain
- Discharge
- Implantation bleeding
- Bloating and weight gain
- Stretching sensation in the lower abdomen

final suctioning is carried out to ensure everything is removed. The process takes 15 to 30 minutes and the foetal remains are examined to ensure completion of the procedure. Antibiotics are administered at the end to prevent any infection."

Like with every medical procedure, MTP also comes with risks. It is important to know that MTP through abortion pills may have a direct link to premature births in subsequent pregnancies. Dr. Madhuika

HEALTH

Tweak your diet & fitness regime

SURGICAL ABORTION IS AN INVASIVE PROCESS AND IT TAKES A BIG TOLL ON THE BODY. EXCESSIVE BLEEDING OR BLEEDING FOR LONGER THAN TWO WEEKS IS PROBLEMATIC AND SHOULD BE REPORTED TO THE DOCTOR. HERE ARE SOME TIPS TO HELP YOU RECOVER FASTER.

- Drink as much fluid as you can.
- Take some time off of work and rest up.
- Refrain from exercise for a couple of weeks.
- Do not go for swimming and do not soak in the tub for two weeks.
- No heavy lifting for two weeks.
- Refrain from sex or using tampons for at least 15 days after the procedure.
- Eat a lot of proteins, which help in recovery and building up new blood cells.
- Whole grains are a rich source of fibre and essential nutrients.
- Four to five servings of fruits and vegetables are a must add on to the foods you must consume after abortion.
- Loss of blood during and after abortion may lead to anaemia, and so, iron-rich diet is essential for regaining health.
- Pregnancy tends to decrease the calcium in body, and loss of pregnancy may lead to its deficiency. It is important to bring these levels back to normal with proper diet.
- Avoid white rice, white sugar, pasta, carbonated beverages, cakes, pastries and other sweet treats, fatty milk and meats including fried foods and full cream dairy products, junk food and soy products like tofu, soy nuggets, soy milk.



Sinha, senior consultant, Obstetrician and Gynaecology, adds, "If the pills are taken too early, tubal pregnancies may be missed or the pregnancy may continue. Another risk is incomplete abortion if taken at a later gestation." Termination through abortion pills can cause cramping, nausea, vomiting, diarrhoea, excessive bleeding and infection. Women with anaemia, bleeding disorders, liver or kidney diseases, seizure disorders, acute inflammatory bowel disease or those who use an intrauterine device (IUD) should avoid this procedure.

Dr Apurva says, "Main risks involved with surgical method are retained products (mainly if the procedure is done blindly), injury to the uterus and Asherman's Syndrome (walls of the uterus stick together causing infertility)." Termination through suction aspiration can cause cramping, nausea and sweating. Heavy or prolonged bleeding, blood clots, damage to the cervix, and uterine perforation, infection due to the remaining tissue or an STD or bacteria that was introduced to the uterus might lead to fever, pain, abdominal tenderness and cause scar tissue.

If a pregnancy drags on for more than 20 weeks, abortion isn't allowed

Some of the rare risks of termination through D&E include damage to uterine lining or cervix, uterine perforation, infection and blood clots.

Dr Apurva points that they also get patients who've consumed the MTP pills without consulting a doctor, which leads to pelvic infections. "If the right technique is not used, chances of uterine perforation and mechanical damage to the mouth of the uterus are high. This may lead to infertility and even endanger patient's life. If sterility is not ensured, patient has a risk of infections."

Quacks have no knowledge of the female anatomy or regard for hygiene. Dr Rita says, "Quacks insert sticks or rods in the uterus or bladder to induce abortion, which can injure the woman." Dr Tripti shares, "Septic abortion is one of the leading cause of maternal mortality in our country. I've seen cases wherein a woman dies due to septic abortion. A 'broomstick' was recovered from her vagina. I've also had a patient come in with her gut hanging outside the vagina."