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1. INTRODUCTION

You have decided to end this pregnancy. This is your choice and you have the right to make this choice because abortion has been legal in Canada since 1988.

For some women, making this decision is relatively easy. For others, it may be more difficult.

Be assured that your choice will be respected by everyone working at the Centre de santé des femmes de Montréal and that you will be treated with respect and understanding and in a professional way. All that happens here will remain confidential.

Our role is to ensure your abortion takes place under the best possible medical conditions and to provide you with the support you want. Whenever there are alternatives about what to do, you will always be able to choose what seems best for you.
2. STAGES OF PROCESS

2.1 Pre-procedure

When you arrive, you will be given a brochure with information that explains what the abortion will involve, the medications you can choose, possible complications, and recommendations. You will also be asked to complete a form to provide us with necessary medical information. A Centre worker or nurse will then meet with you, either individually or in a small group of two women. She will listen to and answer your questions about what the abortion involves as well as about contraception. If you want, you can also discuss your decision as well as any concerns you may have. The Centre worker or nurse will offer you some pills containing Ibuprofen. This is an anti-inflammatory medication that may help relieve any cramps you might have during or after the abortion. This preliminary meeting is obligatory for all women having an abortion and usually lasts from an hour to an hour and a half (60-90 minutes).

Only women who have an appointment may attend this meeting and no one accompanying them can take part. This is to ensure confidentiality and to offer women a place where they can express themselves openly and freely. Sometimes two women will be seen together by the Centre worker or nurse. This offers women who will be undergoing similar procedures an opportunity to share their experiences and knowledge. The Centre is a community organization run on feminist principles and considers this kind of sharing a way to encourage solidarity between women who are having similar experiences. It is also a way to help break the isolation or taboos they might face. However, no one is ever forced to speak.

2.2 The procedure

Some of the physicians working at the Centre will allow someone accompanying you to remain with you for support when the abortion is carried out. However, this person may be asked to return to the waiting area if the doctor or other health worker thinks it is necessary.

A nurse will make a quick blood draw from your finger and install a catheter in your arm if you chose intravenous medication.
Before the abortion begins, you will be seen alone by the physician. During this brief meeting, you and the doctor will get to know each other and she can also then learn of your medical history. It will also be the time to ask for a prescription for a contraceptive method, if this is needed.

Once this meeting ends, you will go into the room where the procedure will be done and be set up on the exam table. Two nurses will be there: one will be taking care of you and the other will be assisting the physician.

If you want, you can be given some intravenous medication (i.e., through a needle placed in your arm). We offer fentanyl with or without midazolam (Versed®). These are very effective in relieving pain and relaxing women. Please note that if you choose to have this medication, you should not drive a motor vehicle or make any important decisions during the next 24 hours.

The abortion itself takes about 10 minutes to do. The physician will first do a gynecological exam to determine the position and the size of your uterus. She will then do an ultrasound exam to confirm how many weeks pregnant you are.

Next, the physician will insert a speculum to open the vagina so she can more easily see your cervix. At this time, the physician will take a sample of cells that will be tested for two sexually transmitted infections, chlamydia and gonorrhea. After disinfecting your cervix and vagina, she will then inject some xylocaine (a local anesthetic) into the cervix. This injection usually causes no or minimal pain. Once your cervix is anesthetized, the physician will gradually dilate it. You may feel some cramping similar to what can occur when you have your periods while this is happening; the intensity of this varies between women. However, if you previously chose to have some medication, the cramps will be quickly eased.

When the cervix is dilated, the physician will suction out the contents of the uterus. This is followed by a uterine curettage, a scraping with a curette, and then a shorter second suction (aspiration). This is the end of the procedure; you are no longer pregnant.
If your blood type is Rh negative, you will be given an immunoglobulin (Winrho®) to help prevent problems if you become pregnant in the future.

Finally, the physician will examine what was aspirated from your uterus. If you think it would be helpful to see this yourself, we can let you look at the material in the dish, too. For some women, this can help de-dramatize or demystify the abortion. It may also be a part of a mourning process.

2.3 Post-procedure rest

Once the procedure is over, you can get up, get dressed (be sure to have some panties with a sanitary pad already inserted in them with you), and then walk into a separate room where you can either sit in a chair or lie down to rest. If you wish, an adult who has accompanied you can join you there; children will not be admitted in this room. A nurse will monitor your blood pressure and give you an antibiotic to prevent any future infections. You will also be offered a snack (juice and cookies) to help you feel better.

Most women remain at the Centre to rest for about 30-60 minutes; a nurse will determine when you seem ready to leave. We recommend that you have someone go with you when you return home. This is actually required by some doctors if you have chosen to take fentanyl with or without midazolam (Versed®).
3. RISKS AND POSSIBLE COMPLICATIONS

Each year for the past 30 years, thousands of women in Quebec have had abortions, and the procedure we use is known as being the safest approach. Nevertheless, as with all medical interventions and all drugs, there remains a possibility of some complications. **Those associated with abortion are very rare and, if something happens, it’s generally something easy to treat. In order of frequency, these rare complications can include:**

**Infection:** Despite all the precautions taken, a woman may still develop an infection of the uterus or (Fallopian) tubes.

*If you develop one or more signs of an infection (see below), call us or consult a physician immediately. Infections that are treated with antibiotics at their very beginning generally do not have any lasting effects.*

Some of the signs of an infection include:

- **Persisting lower abdominal pain of moderate to high intensity** that is not relieved by taking an analgesic (ibuprofen or acetaminophen).
- **Increased temperature** (over 38°C or 101°F) that lasts for several hours. It’s important that you take your temperature if you feel feverish; it’s possible to feel warm without actually having an increased temperature.
- **Smelly discharges.**

**Haemorrhage:** This is not likely to occur during an abortion done with suction and curettage. In any event, we have medications to use that will rapidly stop any abnormal bleeding.

*If at some time after the abortion you develop a sign of heavy bleeding (i.e., you need to change a sanitary pad every hour for 5 consecutive hours, or you need to use 2 sanitary pads every hour for 3 consecutive hours), go immediately to the Emergency Room of a local hospital. The blood loss will be stopped using medication or by doing another curettage.*
Incomplete abortion: Sometimes placental tissues or membranes may remain in the uterus despite the medical quality of the abortion. In these circumstances, either a medication or another dilation and curettage is needed.

Perforation of the uterus: This is rare and, in general, has no consequences. Healing is most often spontaneous without the need for any surgical intervention. However, a physician may suggest hospitalization so you can be observed.

Allergic reactions to Medications: Please be sure to tell us of any medicine(s) to which you are allergic or have some intolerance. Just as can any medication available in a pharmacy, those we use can cause reactions. However, we can provide whatever is needed should this happen.

Risk of Infertility: If a complication of an abortion is not treated, later problems with fertility are possible. This commonly happened in the past when abortions were illegal and had to be hidden; today this risk is almost non-existent.

Although the risks noted above are generally rare, we will review these with you for legal reasons and to ensure you are fully informed when you sign the consent form required for all medical interventions.

If you experience any complication after your abortion, please be sure to call to tell us about it.

Contra-indications to abortion. At our Centre, we will never do anything that might be a risk to your health or safety. Therefore, some women with specific problems will be referred to a hospital for their abortion when appropriate.
4. AFTER THE ABORTION, in the following days…

4.1 Recommendations

On your return home

- Eat whatever you like.
- Return to your usual daily activities starting the next day.
- Avoid all very intense physical activity for 3-4 days.
- Avoid all drugs and alcohol for 48 hours after the abortion.
- Rest if and when you feel the need.

To lower the risk of infection, for one week:

- Use sanitary pads and NOT tampons...
- Do not use vaginal deodorants or a vaginal douche.
- Avoid sexual relations with penetration.
- Do not take baths or go swimming in pools, spas or lakes.

4.2 Bleeding

The amount of bleeding after an abortion varies from one woman to another and even between abortions of the same woman.

- Usually, bleeding begins immediately after the abortion or within the next 3-4 days.
- Some women have no bleeding at all, and this is also normal.
- For some women, bleeding may be heavy for several days and then last as long as 3-4 weeks; it rarely continues for longer than this.
- Clots and brownish discharges are also normal.
- Bleeding can seem heavier when you get up in the morning, when you go to the bathroom, or if you are very physically active.
- Very heavy bleeding can be caused by intense physical activity, lifting of heavy objects, drinking alcohol, or taking certain medications that contain aspirin.
- Women who are used to using tampons may have the impression that they are bleeding more than usual when they use a sanitary pad.
4.3 Cramps

It is normal to have cramps after an abortion although some women who are not used to them may be worried when they occur. Cramps can be relieved by taking an analgesic such as ibuprofen (Advil®, Motrin®)* or acetaminophen (Tylenol®, Atasol®) that are sold in all pharmacies. Two pills every 4-6 hours are recommended. Aspirin should be avoided.

Also useful to relieve cramps:

- Applying a hot water bottle or heating pad to the lower abdomen.
- Gentle physical activity, such as walking.

4.4 «Third day » syndrome

Although infrequent, this condition often happens between the 3rd and 5th day after an abortion when you might have heavy cramps, bleeding, or see clots. It is not a complication and usually lasts only a few hours. It can be relieved by:

- Resting.
- Applying heat to the abdomen.
- Taking an analgesic (2 pills every 4-6 hours) such as ibuprofen (Advil®, Motrin®)* or acetaminophen (Tylenol®, or Atasol®). All are available in all pharmacies. Avoid aspirin.
- Once the clots have passed, the cramps will decrease.

* If you are allergic to aspirin, do not take ibuprofen (Advil®, Motrin®) and instead use acetaminophen (Tylenol®, Atasol®).
4.5 Other discomforts

After an abortion, hormone levels decrease.

Frequently, women may:

• Be constipated
• Feel as if the abdomen is bloated for several days
• Have swollen (engorged) breasts

Every woman is different. Some will have no problems at all after an abortion; others may have more difficult experiences without having any complications.

If you are at all concerned, you can call us Monday to Friday at 514-270-6114 between 8:30 AM and 4:30 PM. At all other times, call Info-Santé at 811 where you can speak with a nurse.

4.6 Symptoms of pregnancy

• Vomiting: if nausea occurs, it goes away quickly, usually 24-48 hours after the abortion.
• Sensitive breasts: this can last for about one week after an abortion.

If these symptoms last for more than 7 days, call us.

• Pregnancy test: this can remain positive for up to 4 weeks after an abortion. This is normal, since it can take this long for the body to eliminate pregnancy hormones. Getting a pregnancy test 4 weeks after an abortion may be recommended for some women (available in pharmacies or in 1$ stores)

Some women experience what seem to be symptoms of pregnancy after an abortion. If they occur, they usually last only a short time.
4.7 Next periods

Your next period is likely to begin about 4-8 weeks after the abortion. There is a chance you may become pregnant during this time if you have sexual relations without using some method of contraception.

4.8 Take care of yourself

Your emotions

Many women often feel relieved after an abortion but they may still feel sad, disappointed, guilty, alone, or have a sense of loss.

Many women or couples also experience a period of mourning. Sadness is a healthy emotion and will subside with time.

A woman may also feel she is now more mature or more responsible; she may even feel proud about having made an important decision for herself.

This experience can also be a time for many women to review their lives, to learn more about themselves, and to gain confidence.

If you would ever like to talk with someone about what you are feeling – either now or later – don’t hesitate to do so. Your emotional health is as important as your physical health, and it is sometimes helpful to talk with someone in whom you have confidence. You can phone us if you would like an appointment at the Centre or if you’d like a referral to another professional resource.

Your sexuality

After a pregnancy termination you may find that your sexual activity has changed. For example, you may not feel like making love for a while. Take the time you need for your desire to return. Again, have confidence in yourself.
5. IN PREPARATION FOR THE DAY OF YOUR ABORTION

You will spend about 2-3 hours at the Centre.

If you are working or going to school, make arrangements to be absent for the day so you can rest after the procedure. You will probably be able to carry out your usual activities starting the next day.

Important to remember

- Wear comfortable clothes including a tee-shirt or another top with short sleeves.
- Be sure to bring your Quebec medical insurance card, a temporary certificate, or your PFSI document (programme fédéral de santé intérimaire). Unless you have one of these with you, you will have to pay for the abortion (in cash or by Visa).
- Bring some sanitary pads and underwear in which to attach them (no "g-strings").
- If you are asthmatic, bring your medications (pumps).
- Gum is prohibited in the room where the abortion is done.
- All phones must be closed (yours as well as that of any person who accompanies you).
NOTE: It is very important that you arrive at the Centre at the time set for your appointment. If this is not possible, please let us know by calling 514-270-6114.

Your appointment is:

________________________________________________________________________

at ___________________________ o’clock

at 2101 Sherbrooke East

Notes:

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We thank the Clinique des femmes de l’Outaouais for letting us adapt their brochure for our use. Text adaptation: Isabelle Tardif, Sylvie André and Anne Marie Messier. Translation: Abby Lippman.
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