



Medication Abortion in Primary Care Residency Clinics: Expanding Women’s Options

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INTRODUCTION

The purpose of our study was to evaluate the impact and feasibility of a medication abortion-only practice in residency clinics. We reviewed the proportion of women who choose medication abortion in our clinics that offer medication abortion services only and the outcomes of these abortions.

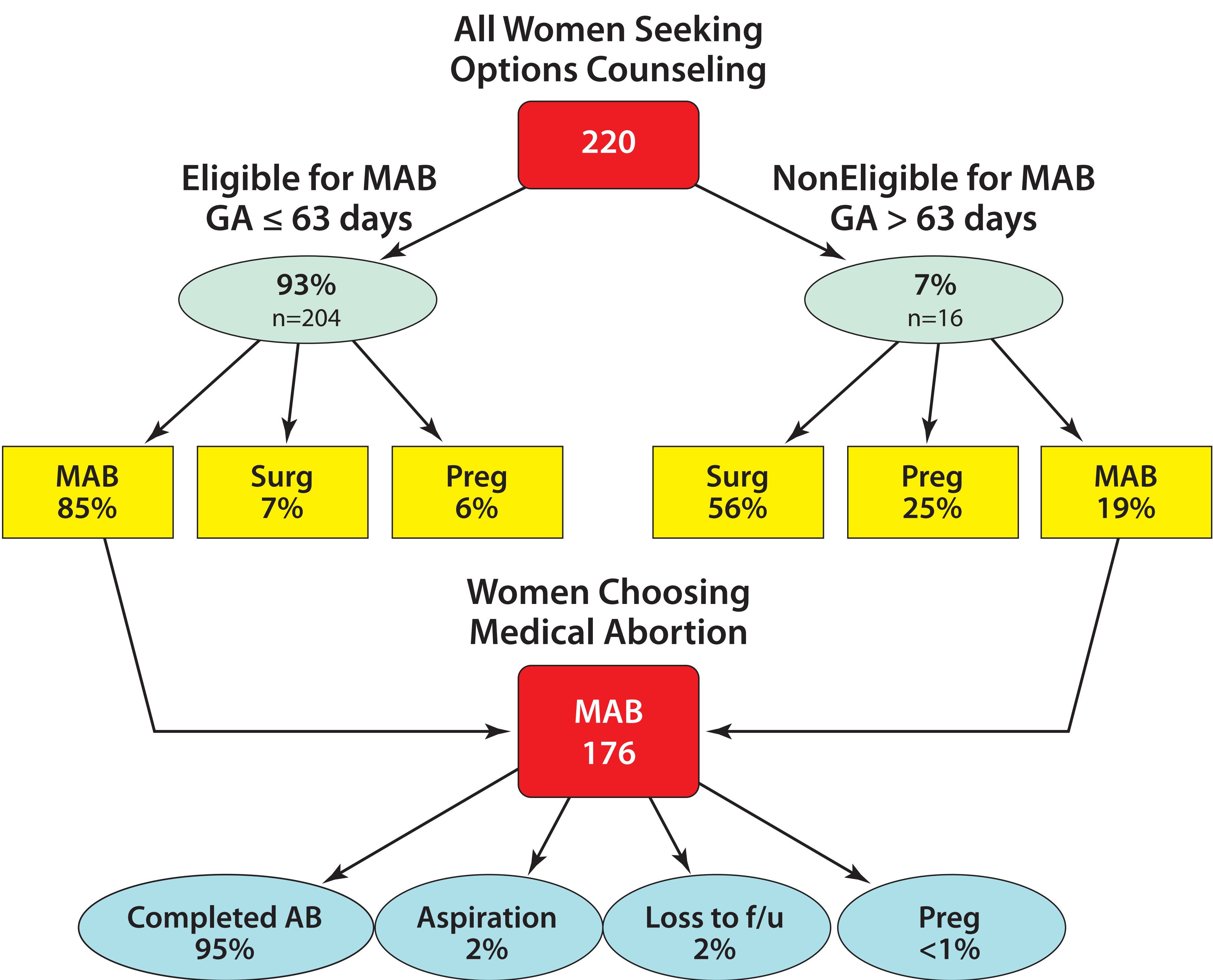
METHODS

In 2002, UNM Family Medicine and Obstetrics/Gynecology clinics initiated pregnancy options counseling and medication abortion services with mifepristone/misoprostol up to 63 days gestational age. All patients receive:

- Dating ultrasound
- Options counseling
- Offer on-site medication abortion if eligible
- Referral to community abortion provider for surgical abortion if ineligible or preferred

A retrospective chart review of all patients referred to UNM Family Medicine and Obstetrics/Gynecology clinics for options counseling during 2002-2005 was performed. Information abstracted included demographics, gestational age, and pregnancy decision. Of the women who chose medication abortion, we recorded the number of clinic visits, proportion of completed abortions, and complications. The data were collected and analyzed using Epi-Info and SAS.

RESULTS



- 220 women presented for options counseling.
- 204 women (93%) were 63 days or less gestational age (GA), eligible for medication abortion.
 - 173 (85%) chose medication abortion
 - 15 chose surgical abortion
 - 13 women chose to keep the pregnancy.
- Among women over 63 days GA:
 - 3 chose medication abortion
 - 9 chose surgical abortion
 - 4 chose to continue the pregnancy.

- Of the 176 women who chose medication abortion:
 - 168 (95%) had a completed abortion at the follow up visit by history, ultrasound and/or quantitative HCG.
 - Four required MVA to complete the abortion
 - One experienced emesis 30 minutes after ingesting mifepristone and decided to continue the pregnancy
 - Three were lost to follow up.

Options Choices by Gestational age

	Medication abortion	Uterine aspiration	Cont preg	P value
< 7 weeks	136 88%	8 5%	7 5%	.03
7-8 weeks	37 (74%)	7 14%	6 12%	

CONCLUSION

Most women referred to our practice were eligible for and chose medication abortion. Women <49 days gestation were more likely to choose medication abortion compared to those 50-63 days gestation. (p=0.03). Improved access to abortion services throughout the country might occur if providers who are reluctant or lack the training to provide surgical abortion were willing and trained to provide medication abortion.