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August 2008 Volume 78, Issue 2, Pages 155–161

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Predictors and perception of pain in women undergoing first trimester surgical abortion

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PlumX Metrics

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Abstract

Background

The aim of the study was to evaluate pain and predictors of pain in women undergoing electric (EVA) or manual vacuum aspiration (MVA) for first trimester surgical abortions and to examine how perceptions of pain differ among participants, advocates (participant support person) and physicians.

Study Design

In this randomized controlled study, women presenting for first trimester abortion underwent standardized EVA or MVA. Participants completed questionnaires, visual analog scales (VAS) and Likert scales for pain. Logistic and linear regression models were used to analyze the data.

Results

Nonwhite women and women who preoperatively expected more pain reported higher procedure-related pain scores. Vacuum source, previous history of abortion, comfort with decision to have an abortion and partner involvement did not affect participant pain scores. In the multivariable analyses, no single factor predicted procedure-associated pain. The advocates perceived that more educated women had less pain. Physicians felt longer procedures and a woman's fear of pelvic examinations caused more pain. Physicians believed women had less pain than the participants reported themselves ($p < .001$). Only physicians thought that EVA was less painful than MVA ($p < .01$).

Conclusion

Distinct factors other than vacuum source affect the perception of abortion-related pain. Understanding these factors may help inform counseling strategies aimed at ameliorating pain perception during first trimester abortions.

Keywords:

[Abortion](#), [Pain](#), [Vacuum](#), [Aspiration](#), [Manual](#), [Electric](#)

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August 2008 Volume 78, Issue 2, Pages 155–161

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