Chapter 15

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When a woman does something to end a pregnancy, this is called an ‘abortion’. We use the word abortion in this book only to describe an action that is planned. The unplanned, natural loss of a pregnancy we call a ‘miscarriage’.

Deciding to have an abortion is always hard. Some religions teach that abortion is wrong and in many countries abortion is not legal or safe. But there are many reasons a woman may try to have an abortion anyway. Here are some examples:

- She already has all the children she can care for.
- A pregnancy is a danger to her health or her life.
- She has no partner to help support the child.
- She wants to finish school.
- She does not want to have children.
- She got pregnant after being forced to have sex.
- Someone is forcing her to have an abortion.
- The child will be born with serious problems (birth defects).
- She has HIV or AIDS.

➤ Lack of family planning services and lack of information about sex lead to unwanted pregnancy and abortion.

Why Do Some Women Have Abortions?
Unplanned and unwanted pregnancy can happen when...

I didn’t think you could get pregnant the first time.

... the woman and her partner do not know how pregnancy happens.

You cannot use family planning until you are 18 years old and married.

... health workers think some women are too young to get family planning.

No!

... women are forced to have sex.

... family planning is not available, is not used correctly, or it fails.

Emergency Family Planning Methods

A woman who has had unprotected sex within the last 5 days may be able to prevent pregnancy if she acts quickly (see page 226).
A safe abortion is less likely to cause harm than having a baby.

Abortion is very safe when it is done:
- by a trained and experienced health worker.
- with the proper instruments.
- under clean conditions. Anything that goes into the vagina and womb must be sterile (without any germs).
- up to 3 months (12 weeks) after the last monthly bleeding.

Abortion is unsafe when it is done:
- by someone who has not been trained to do it.
- with the wrong instruments or medicines.
- under unclean conditions.
- after 3 months (12 weeks) of pregnancy, unless it is done in a health center or hospital that has special equipment.

Death from unsafe abortion

Around the world, 46 million abortions are done every year. Women survive most of them, even if they are not legal. But unsafe abortions can cause death, or complications like infection, lasting pain, and infertility.

Women have always tried to find ways to end pregnancy when they are desperate. Stay away from the following methods. They are very dangerous.
- Do not put sharp objects like sticks, wire, or plastic tubing into the vagina and womb. These can tear the womb and cause dangerous bleeding and infection.
- Do not put herbs or plants in the vagina or womb. These can burn or irritate badly, causing damage, infection, and bleeding.
- Do not put substances such as bleach, lye, ashes, soap, or kerosene in the vagina or womb. Also, do not drink them.
- Do not take medicines or traditional remedies in large amounts to cause abortion (either by mouth or in the vagina). For example, taking too much of the medicines for malaria (chloroquine) or to stop bleeding after childbirth (ergometrine, oxytocin) can kill you before they cause abortion.
- Do not hit your abdomen or throw yourself down stairs. This can cause injury and bleeding inside your body, but may not cause abortion.

IMPORTANT Never put anything inside the womb yourself or allow an untrained person to do so. This can kill you.
Abortion

Access to safe abortion

When a woman is faced with an unwanted pregnancy, she should be able to get a safe and legal abortion. But laws about abortion differ from one country to another.

Legal abortion. If abortion is legal a woman can walk into a health center or hospital, pay a fee, and have a safe abortion. In countries where this happens, almost no women get sick or die from complications of abortion.

Legal abortion in some cases. In some countries an abortion is only legal for certain reasons, such as:
- if a woman becomes pregnant from rape or incest (sex with a close family member).
- if a doctor says pregnancy would be a danger to a woman’s health.

But abortion is often difficult to get, even for those reasons. Doctors and health workers may not be sure what the law really says. They may be unwilling to do abortions openly, or they may charge a lot of money. Women may not know if abortion is legal or available in their country.

Illegal abortion. If abortion is not legal, both the women who get abortions and those who perform them can be arrested. In most places this does not happen. But where abortion is against the law, more women die from unsafe abortion and unsafe pregnancies. Money that could be spent on women’s health services is spent instead on treating complications of unsafe abortion.

Never assume abortion is illegal. Try to find out about the laws in your own country. It may be easier to work around the laws than to try and change them. Even if abortion is illegal, there may be people providing safe abortions. Finding a safe abortion may mean the difference between staying alive and dying.

Even if abortion is illegal, a woman can usually get medical help for complications after an abortion. It is often difficult to tell the difference between abortion and miscarriage, unless something from the abortion has been left in the womb.

Other barriers to finding a safe abortion

Legal or not, it can be hard to get a safe abortion because it is too costly, too far away, or because there are confusing rules, or papers to fill out.

These reasons often make it especially difficult for women who are poor, or who are not familiar with the medical system, to get safe abortions. Unfortunately, in many places, the only women who can easily get a safe abortion are women who can afford to pay a private doctor.
Your decision to have an abortion will often depend on whether safe abortion is available where you live. It also depends on how an abortion or a baby would affect your life.

It may help to think about these questions:

- Will you be able to care for a baby? Do you have enough money to raise a child?
- Is pregnancy a danger to your health?
- Do you have a partner or husband who will help support a child? Can you talk with him about this decision?
- Is your religion or family against abortion? If yes, how will you feel if you have one?
- How will the abortion be done? (See page 248.)
- For how long have you been pregnant?
- Could you have a sexually transmitted infection (STI) or HIV? You may be at more risk of having an STI if you are young, single, and have a new partner, or if you have signs of an STI. If you feel that you are at risk, see page 263 in the STI chapter. You may need treatment before the abortion.
- What complications (problems) can be caused by the abortion? (See pages 251 to 258.) If you have HIV or AIDS, the dangers of an unsafe abortion could be increased.
- Where can you go for emergency care if you have complications? How will you get there?

The information on the next 4 pages may help you decide whether safe methods of abortion are available in your community.

If you are helping someone decide about an abortion:

She needs respectful advice and friendly support. Do not tell anyone else about her decision unless she wants others to know.
A pregnancy can be removed from the womb by a trained health worker in the following ways:

**Abortione by medicine (medical abortion)**

Two medicines, misoprostol and mifepristone, or misoprostol by itself, are used by doctors, health workers, and women to cause abortion. This is called medical abortion. These medicines make the womb contract and push out the pregnancy. The mifepristone is swallowed and the misoprostol is dissolved in the mouth or the vagina. Medical abortion is very effective and very safe. Since nothing is put inside the womb, there is less danger of infection that kills many women who have unsafe abortions. This abortion is safe to do at home up to 10 weeks and is safe in a clinic after that.

**Abortione by suction (vacuum aspiration, MVA)**

The pregnancy is removed by suction using a special tube (cannula) that is put into the womb through the vagina and cervix. This is done without putting the woman to sleep, though sometimes pain medicine is injected into the cervix. When vacuum aspiration is done by hand (manual vacuum aspiration or MVA), the pregnancy is removed using a special syringe. Otherwise, a small electric machine is used.

MVA is simple and safe, and takes only about 5 to 10 minutes. It is usually done in a clinic or health post, or doctor’s office. This kind of abortion is safe to do during the first 14 weeks of pregnancy. After 14 weeks, only use MVA if the woman is in serious danger and you have no other way to help her. MVA causes fewer complications than dilation and evacuation (described below).

In some places MVA is used to bring on late monthly bleeding. The woman may not even know if she is pregnant—just that her monthly bleeding has not come. This is called menstrual regulation. MVA is also used to treat bleeding from an incomplete abortion or a miscarriage. (For more information about MVA see *A Book For Midwives*, published by Hesperian.)

**Surgical abortion (dilation and evacuation, or D and E)**

The pregnancy is scraped out with a curette, a small spoon-shaped instrument that is made especially to go into the womb. Sometimes suction is used as well. First the cervix must be stretched open, which can take some time.

The D and E takes about 15 to 20 minutes, but is more painful and costs more than vacuum aspiration. It is usually done in an operating room, and the woman is often given medicine to make her sleep.
Before using medicines for abortion

- Know the name and correct dose of medicine or medicines you are using. Never use a medicine you are unsure of. If it is safe, try to discuss using medicines for abortion with a health worker you trust before using these medicines.
- Using medicines for abortion is the best choice before 10 weeks (70 days) of pregnancy. Start counting after the first day of your last monthly bleeding. You can use medical abortion after that, but the doses may be different and you will have more bleeding, cramping, and nausea. It is safest to do this in a clinic.

Medicines used for abortion

Mifepristone is available in some countries where abortion is legal. But in many countries it is not available.

Misoprostol is used for stomach ulcers, and is available in many countries. It is often used alone to cause abortion, although it is more effective when used with mifepristone (see page 508). When misoprostol is used by itself, it is less effective and takes longer.

The signs of pregnancy (see page 67), usually disappear after 48 hours. If you continue to feel pregnant, go to a clinic or hospital to be checked.

Danger signs after medical abortion

- Heavy vaginal bleeding – soaking more than 2 large pads in 1 hour for 2 hours in a row. Get to a clinic or hospital right away.
- Fever that begins a day after the last misoprostol dose and lasts several days may be a sign of infection (although this is rare with abortion using medicines). See a trained health provider.

For complete instructions on how to take medicines for abortion, see page 508.

If you have no access to safe abortion, contact Women on Web, www.womenonweb.org. They may be able to help.

Also see ‘Complications of Abortion’, page 251.

IMPORTANT Make sure you are no more than one hour from a clinic where you can get care for a miscarriage if you have heavy bleeding, especially if you are more than 9 weeks pregnant. Bleeding and cramping from a medical abortion are very similar to a miscarriage and it is difficult for a doctor to know the difference.
How to tell if an abortion will be safe

It is not always easy to tell if an abortion will be safe. Try to go to the place where the abortion will be done, or ask someone who has been there these questions:

- **Have you heard of women getting sick or dying from having an abortion here?** If so, go somewhere else.

- **Who will do the abortion and how were they trained?** Doctors, nurses, health workers, and traditional birth attendants can all do abortions. However, abortions done by someone who is not trained in safe abortion methods and how to prevent infection can be very dangerous.

- **Is the room where the abortion will be done clean and neat?** If it is dirty and messy, probably the abortion will be also.

- **Is there a place for washing hands?** A health worker who has no place to wash his or her hands cannot do a clean, safe abortion.

- **Do the instruments look like the ones in this chapter on page 244, or do they look like something found or made at home?** Instruments made at home can cause injury and infection.

- **How are the instruments cleaned and made free of germs?** Instruments should be soaked in strong disinfectant or boiled in water to kill germs that cause infection.
An abortion is more dangerous if:

- your last monthly bleeding was more than 3 months ago.
- your pregnancy is starting to show.

The longer you have been pregnant, the greater the chance of complications after abortion. For your safety, an abortion after more than 3 months of pregnancy must be done with special equipment in a clinic or hospital.
Safe abortions, especially abortions by suction (MVA), are done in both health centers and hospitals. Surgical abortion (D and E) is usually done in a hospital. An abortion by medicine can be done at home before 10 weeks, or at a health center or hospital that also has equipment to do MVAs and D and Es, and health workers trained to do them. For more information about how these abortions are done, see page 244.

When you go to a health center or hospital for an abortion, you should be welcomed and treated with respect. A counselor should talk with you about your decision and explain how the abortion will be done and what the risks are.

The information below tells what to expect from a safe abortion. An abortion that is very different from this could be dangerous.

- You should be asked about the time of your last monthly bleeding and whether you might have an STI (see page 263).
- A health worker should do a medical exam. This includes feeling carefully in your vagina and on your belly for the size of your womb.
- During both abortion by suction and by surgery, you will feel strong pains in the lower belly. But soon after the abortion is over, the pains will become less strong.
- After the abortion, your genitals should be cleaned, and then you should be taken to rest. A health worker should be there to check you for about an hour.
- Someone should tell you what to do after the abortion, the danger signs to watch for, and who to contact if you have a complication.

In addition, someone should discuss family planning methods with you. You can start using a method the day of the abortion. You should be given an appointment to come back for a check-up in 1 or 2 weeks.

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**What to Expect during a Safe Abortion**

- **Drink plenty of liquids the day before you have an abortion.** This will help you recover more quickly.
After an abortion, signs of pregnancy, like nausea and sore breasts, should disappear within a day. If it was a medical abortion, breasts may stay sore for a week or two. If signs continue, you could still be pregnant, either in your womb or in one of your tubes (ectopic pregnancy, see page 73). This is an emergency. See a health worker right away.

You may feel a little tired and have some cramps or pains for a day after the abortion. You will have some bleeding from the vagina for as long as 2 weeks. But after the first day it should be no more than a light monthly bleeding. Your next normal monthly bleeding should start about 4 to 6 weeks after an abortion. It might take longer if you were more than 5 to 6 months pregnant.

If you had no one to talk to before the abortion, it may help to talk to someone now. Talking about your feelings with someone you trust can make you feel better.

**How to care for yourself after an abortion:**

- To prevent infection, take 200 mg of doxycycline 1 hour before a suction or D and E abortion. (But if you are breastfeeding, it is better to take 500 mg of metronidazole or 1 g of azithromycin.)
- Do not have sex or put anything into your vagina for at least 2 days after bleeding stops.
- If you have cramps or pains, rest and use a hot water bottle on your abdomen. Or take paracetamol or ibuprofen (see page 482).
- To lessen pain and bleeding, rub or massage your lower abdomen often. This helps the womb to squeeze down to normal size and lessen bleeding.
- Drink plenty of liquids to help you recover faster.
- You can go back to your usual activities as soon as you feel well, usually within a day.

**Danger signs**

If you have any of these signs, get medical help fast:

- Heavy bleeding from the vagina (see page 251)
- High fever (see ‘Infection’, page 255)
- Severe pain in the abdomen (see ‘Internal Injury’, page 258, and ‘Infection’, page 255)
- Fainting and confusion (see ‘Shock’, page 254)
- Bad-smelling discharge from the vagina (see ‘Infection’, page 256)
Family Planning after an Abortion

After an abortion it is possible to get pregnant again right away, so talk with someone about family planning and start using one of these methods as soon as possible. Because hormonal methods of family planning take time to start working, use a condom for the first 10 days:

- **The Pill:** You can start taking pills on the same day as the abortion. Do not wait more than one week.

- **Intra-Uterine Device (IUD):** If there is no risk of infection, a trained health worker can put in an IUD right after the abortion.

- **Injections:** The first injection should be given on the day of the abortion, or up to one week after.

- **Implants:** Implants can be put in just before or just after the abortion, or up to one week later.

- **Female sterilization:** If your pregnancy was less than 3 months, you can be sterilized during the abortion or right after it. It is very important that you make this decision carefully. **Sterilization is permanent.**

- **Male sterilization:** Sterilization for a man can be done any time and is permanent. This decision must be made carefully.

- **Condoms:** You and your partner can use condoms as soon as you have sex again. Condoms also protect against STIs, including HIV.

- **Spermicide:** You can use spermicide as soon as you have sex again. Do not use spermicide if you have HIV, or if you have many sex partners.

- **Diaphragm:** If there was no infection or injury, you can be fitted with a diaphragm after the abortion.

- **Natural methods (mucus and counting days):** These methods do not work until your normal monthly bleeding returns.

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➤ A woman who has just had an abortion most likely did not want to become pregnant. This is a good time to offer her information about family planning methods and how to get them.

➤ For more information on all these methods, see the chapter on “Family Planning.”
A woman with any of the danger signs after abortion (see page 249) needs medical help fast! She should go immediately to a health center or hospital where she can get the care she needs. Most of the time the womb must be emptied completely using vacuum aspiration (MVA) or a D and C. In the meantime, the information on the next 8 pages may help if transport is not available immediately or if medical care is very far away.

**HEAVY BLEEDING FROM THE VAGINA**

Heavy bleeding is the most common problem after an abortion. It is usually caused by pieces of the pregnancy that are left in the womb. The womb cannot squeeze itself shut and keeps bleeding. This is called an incomplete abortion. If the pieces are removed, often the bleeding will stop. Sometimes the bleeding is caused by a torn cervix which must be stitched for the bleeding to stop.

A woman is bleeding too much if she soaks more than 2 heavy pads or cloths in one hour for 2 hours in a row. A slow, steady trickle of bright red blood is also dangerous. When this happens, a woman may quickly lose a dangerous amount of blood. If it is not possible to get medical help immediately, try to stop the bleeding.

**To stop the bleeding**

A woman who is bleeding too much may be able to help her womb squeeze shut with massage. She can do this herself or have someone else do it. Rub or massage the lower belly very hard while lying down or squatting.

If there are pieces of tissue stuck in the womb or cervix, she may be able to push them out herself by squatting and bearing down as if passing stool or giving birth.

Even if these treatments seem to work, get medical help as soon as possible. The woman will need antibiotics and may still need to have her womb emptied completely.


**EMERGENCY HELP FOR TOO MUCH BLEEDING**

Health workers and others trained in giving a woman a pelvic exam may be able to follow these steps to try and stop the bleeding until the womb can be emptied.

**IMPORTANT**  Because the entrance to the woman’s womb is open, putting anything inside her vagina is very dangerous. She can get a serious infection. Only do this if the bleeding is so heavy the woman’s life is in danger.

1. Wash your hands and the woman's genitals with soap and clean water.

2. Put a clean latex or plastic glove or a very clean plastic bag on one hand. The gloved hand should not touch anything before it goes into the woman's vagina.

3. Have the woman lie on her back with her feet and knees apart. Help her relax.

4. If you have a sterile speculum (you can get the right instruments from an IUD kit if you have one), put it into the vagina so you can see the opening of the womb. If you can see tissue or clots or lumps of blood there, try to get hold of them with sterile forceps or clamps and gently remove them.

5. If you do not have a speculum, reach inside the woman's vagina with your gloved hand, first with 1 finger, and then with 2 fingers.

6. Feel for the cervix. It will feel more firm and smooth than the skin around it. It looks like this and is about this size.

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*Use sterile forceps to remove any tissue you see at the opening of the womb.*
7. Move your finger across the opening and feel for bits of the pregnancy that may be sticking out of the opening. They will feel like soft meat. Gently try to remove them. If the pieces are too slippery, take your hand out and wrap 2 fingers with sterile gauze, or a clean cloth that has been boiled in water, and try again to remove them.

8. After you have removed the pieces, put your gloved hand into the woman’s vagina with two fingers under the womb. With your other hand, rub or massage her belly to help stop the bleeding. Her womb should be between your 2 hands.

9. Give the woman an injection of ergometrine (0.2 mg) in a large muscle, such as her buttock or thigh. Then give her one 0.2 mg pill or injection of ergometrine every 6 hours for 24 hours. Or you can use misoprostol: give 600 mcg by mouth or insert 600 mcg into the rectum (wear gloves).

10. Give antibiotics to prevent infection immediately (see page 256). She is at high risk of infection because the womb is open to germs.

11. If she is awake, give her fluids to drink. If she is unconscious, see the next page.

12. Take her to a hospital right away, even if you think you have removed the tissue and the bleeding has stopped. She still needs to have her womb emptied completely. If the bleeding does not stop, continue to rub or massage her lower belly while taking her to the hospital.

**When there is no health worker to help**

If you are bleeding too much after an abortion, and you have tried the steps on page 251, you can also try to remove tissue stuck in your cervix by yourself.

First wash your hands and genitals well with soap and clean water. Then squat and bear down, as in childbirth or passing stool, and follow the instructions above in steps 6 and 7. After you have removed any pieces, massage your lower belly (see page 251). You should still get medical help, even if the bleeding becomes less.
**Shock**

Shock is a life-threatening condition that can result from heavy bleeding. Bleeding inside the body can also cause shock.

**Signs:**
- very fast heart rate, more than 100 beats a minute for an adult
- pale, cold, damp skin
- pale inner eyelids, mouth, and palms
- fast breathing, more than 30 breaths a minute
- confusion or unconsciousness (fainting)

**Treatment if she is conscious:**
- Lay the woman down with her feet higher than her head.
- Cover her with a blanket or clothes.
- If she can drink, give her sips of water or rehydration drink.
- Help her to stay calm.
- If you know how, start a fast intravenous drip (IV) with a wide needle, or start rectal fluids.

**Treatment if she is unconscious:**
- Lay her on her side with her head low, tilted back and to one side, and her feet high.

- If she seems to be choking, pull her tongue forward with your finger.
- If she has vomited, clean out her mouth immediately. Be sure her head is low, tilted back and to one side, so she does not breathe vomit into her lungs.
- Do not give her anything by mouth until she has been awake for one hour.
- If you know how, start a fast IV drip with a wide needle. If you do not, start rectal fluids (see page 541).

Do not wait for a health worker. Take the woman for medical help or to a hospital right away. She needs medical help fast!
Infection

If there is infection, it is more likely to be a mild infection if the abortion was done sooner than 3 months (12 weeks) after the last monthly bleeding.

Serious infection is an infection that has spread into the blood (sepsis). A woman is more likely to have a serious infection if the abortion was done later than 3 or 4 months from the last monthly bleeding, or if there was an injury to the womb during the abortion. Sepsis is very dangerous and can also cause shock.

Infection can happen because:

• an unclean hand or object was put inside the womb.
• pieces of the pregnancy were left inside the womb and they have become infected.
• the woman already had an infection when she had the abortion.
• a hole was made in the wall of the womb.

Signs of mild infection:

• slight fever
• mild pain in the abdomen

Treatment for mild infection:

To keep mild infection from becoming serious, treat it immediately with the medicines listed on page 256. A woman needs more than one medicine because infections after abortion are caused by several different kinds of germs.

If the medicines listed on pages 256 and 257 are not available, see the “Green Pages” for others that will work. A woman who is breastfeeding should use the first treatment for womb infection after childbirth listed on page 97.
Abortion

Medicines for infection after abortion

**Treatment:**

Give one of these combinations of medicines (give all 3 medicines):

- ceftriaxone .................... 250 mg IM ..................................................... 1 time only
- and doxycycline .......... 100 mg by mouth ........................................... 2 times a day
  *(avoid using doxycycline if you are breastfeeding)*
- and metronidazole ...... 500 mg by mouth or by IV .................................. 3 times a day

**OR**

- ampicillin ..................... 2 g (2000 mg) IV or IM the first time only,
  then 1 g (1000 mg) IV or IM each other time ........................................ 4 times a day
- and gentamicin .......... 80 mg IV or IM ..................................................... 3 times a day
- and metronidazole ..... 500 mg by mouth or IV ........................................ 3 times a day

**OR**

Give 2 medicines:

- clindamycin ................. 900 mg IV ..................................................... 3 times a day
- and gentamicin ........ 80 mg IV or IM ..................................................... 3 times a day

**IMPORTANT** If the woman is not improving within 24 hours of starting the first medicines, she needs to go to a hospital right away.

Stop giving medicines by injection or IV when the signs of infection have been gone for 48 hours. Then start giving medicines by mouth with plenty of water.

**When signs have been gone for 48 hours**

Give 2 medicines:

- doxycycline ............... 100 mg by mouth ........................................ 2 times a day for 10 days
  *(avoid taking doxycycline if you are breastfeeding)*
- and metronidazole ....... 500 mg by mouth ........................................... 3 times a day for 10 days
TETANUS
A woman with an infection or bleeding from an injury after abortion can get a tetanus infection, especially if a dirty object or instrument was put into her womb. She needs a tetanus toxoid vaccination immediately (see page 515).

INJURY INSIDE THE BODY (INTERNAL INJURY)
An internal injury from an abortion is most often caused by a sharp object that makes a hole in the womb. The object may also cause damage to other internal organs, such as the tubes, ovaries, intestines, and bladder.

When a woman has internal injuries she may have severe bleeding inside her abdomen but almost no bleeding from her vagina.

Signs (she will have some or all of these):
- her abdomen feels stiff and hard with no sounds or gurgles inside
- very bad pain or cramps in the abdomen
- fever
- nausea and vomiting
- pain in one or both shoulders

Treatment:
- Immediately take the woman to a hospital or clinic where she can have surgery. An injury inside the body must be repaired right away by a surgeon or it can lead to infection, shock, and death.
- Do not give her anything by mouth—no food, no drink, not even water—unless it will take more than 12 hours to get to a health center. Then give water only in small sips. Or let her suck on a piece of cloth soaked in water.
- If she has signs of shock, treat her for shock (see page 254). Make sure nothing is blocking her mouth and that she can breathe.
- Give her the medicines for infection (see page 256). If possible, give her a tetanus toxoid vaccination (see page 515).
Fainting or Loss of Consciousness

Fainting can be a sign of shock after abortion, either from heavy bleeding, severe injury to the internal organs, or infection. For signs and treatment of shock, see page 254. If a woman faints but wakes up very soon afterward and does not have signs of shock, give her plenty of liquids to drink and watch her carefully.

Emotional Support After a Pregnancy Ends

A woman may have strong feelings after an abortion, even if she knows she made the right decision for herself and her family. Some women feel a mixture of relief, sadness, grief, guilt, shame, anger, and even love. It is also common for women to feel sad and grieve when a pregnancy ends. These feelings are normal, but having to hide them and pretend nothing happened can make them worse. Many women find it helpful to talk with other women who have had the same experience (see pages 423 to 425).

Usually, a woman who is having serious health problems because of an abortion did not get good care. An abortion provider who did not do a safe abortion also may have been disrespectful or unkind. The abortion may have been very painful or frightening for the woman. When abortion is illegal, a woman may be afraid of being punished.

Creating a ritual to reflect on what happened can also help women let go of the experience and move on with life. For example, burying or burning an object related to the abortion can symbolize closure. In some communities, a woman may plant a tree or visit a sacred place and make offerings.
Here are some things any woman or group of women can do in a community to help prevent illness and death from abortion:

- Educate men, women, and the community about how family planning can help prevent the need for abortion. Get training to provide family planning services to women in your community.
- Educate women and girls in your community about the dangers of unsafe abortion.
- Visit the people in your community who do abortions to make sure they are doing them safely.
- Learn about the complications of abortion and what to do for them. Find out where are the safe places to take a woman in your community for emergency treatment of complications.
- Find out who could transport a woman who needs emergency care. If there is no emergency medical transport, is there someone in the community with a car or truck? Store extra containers of fuel (gas or petrol) for emergencies.
- Keep some of the medicines from page 484 in a village pharmacy or clinic to treat emergency abortion problems.

If you are a health worker, here are some more suggestions:

- Try to get trained to do MVA, so you can treat women with abortion complications. Perhaps someone can train health workers at your local hospital. Do not do abortions unless you have been trained and have the instruments to do them safely.
- Organize health workers in your community to talk with health authorities about the risks of unsafe abortion. Even where abortion is not legal, treatment for abortion complications should be available to save women’s lives.

> Encourage women who are sick to seek help after an abortion, not to hide from it.

**Treat women who need your help with kindness**

Many women who seek help after abortion are refused treatment or treated very badly. Some are made to feel ashamed or are given no care as ‘punishment’ for what they have done. Whatever your own beliefs, try not to judge women who have had an abortion, but rather care for them with compassion. Many of us could have an unwanted pregnancy at some time in our lives. Treat others as you would want yourself or your daughter to be treated.