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# What Every Physician Needs to Know About Abortion Methods

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## First Trimester Abortion Methods

The vast majority of abortions performed in the United States are completed in the first trimester. The CDC estimates that 59% of legal abortions occur within the first eight weeks of gestation, and 88% are performed within the first 13 weeks.<sup>1</sup>

### Manual Vacuum Aspiration (MVA)

- Manual vacuum aspiration is a safe and effective abortion option through ten weeks of pregnancy.
- MVA requires a hand-held vacuum syringe that creates suction without electricity. During the procedure, the cervix is dilated, and a suction catheter is attached to the syringe and inserted vaginally. The uterus is emptied, and tissue is collected in the syringe.
- The actual procedure usually takes between five and ten minutes.

### Suction Curettage

- Suction curettage is performed in the first 13 weeks of pregnancy.
- In this procedure, the cervix is dilated, sometimes using a ripening agent such as misoprostol (which may take several hours to take effect). A suction catheter is inserted into the uterus and connected to an electric vacuum. The pregnancy (or embryo, placenta and gestational sac) is removed by suction.
- This method generally takes between five and ten minutes after the cervix has been opened.

### **Medication Abortion**

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- research protocols, for several additional weeks.
- The most commonly used regimen for medication abortion involves the administration of mifepristone, which blocks the receptors of progesterone, followed six to 72 hours later by misoprostol.
- Misoprostol is a prostaglandin which induces contractions and results in the expulsion of the embryo.

### **Dilation and Curettage (D&C)**

- Dilation and curettage has many medical indications, one of them first trimester abortion. However, this is the least common of first trimester methods.
- In this procedure, the vaginal canal is held open by a speculum. The cervix is dilated using a metal rod, and a curette is then passed through the canal into the uterine cavity. The endometrium is scraped away, and the tissue is collected for examination.
- A D&C usually takes less than ten minutes.

## **Second Trimester Abortion Methods**

About 12% of abortions in the United States are performed at or after 13 weeks.<sup>ii</sup> Only 1.5% occur after 20 weeks.<sup>iii</sup>

### **Dilation and Evacuation (D&E) and Intact Dilation and Extraction (D&X)**

- Abortions performed beyond 13 weeks of gestation generally utilize the combined methods of dilation and evacuation and intact dilation and extraction.
- A termination at this point in pregnancy requires two visits to the hospital or clinic.
- Different physicians follow different regimens for a D&E, but generally during the first visit, sterile, hygroscopic laminaria or a synthetic dilator is inserted into the vagina to dilate the cervix. In the second visit, the physician uses cannula suction and special forceps to remove the fetus and placenta.

- To minimize uterine or cervical perforation from instruments or from laceration by fetal parts, some physicians utilize a procedure known as intact dilation and extraction.
- This procedure is extremely rare, carried out in roughly 0.17% of all abortions in the United States.

### **Labor-Induction Abortion**

- Labor-induction abortions are most often performed to confirm diagnosis of fetal abnormalities incompatible with life.
- Prostaglandin preparations, mainly misoprostol, are the most common methods for inducing labor in a second trimester abortion.
- Other techniques include intra-amniotic hypertonic solutions, such as urea or saline.
- The use of hypertonic solutions typically produces fetal death from osmotic insult and labor follows.
- When urea or saline is used to induce abortion, a needle is inserted through the abdomen, and the amniotic sac is injected with a concentrated salt solution. This results in fetal demise and uterine contractions. Over several hours, the contractions cause the cervix to dilate and the contents of the uterus to be expelled. Saline is rarely used in contemporary management.

### **References**

- i. CDC—Centers for Disease Control and Prevention. (2003, November 28). "Abortion Surveillance—United States, 2000. "Morbidity and Mortality Weekly Report," 52(SS-12).
- ii. Ibid
- iii. Ibid
- iv. Finer L, Henshaw S. Abortion Incidence and Services in the United States in 2000. *Perspectives on Sexual and Reproductive Health*. 2003;35. Available online at: <http://www.guttmacher.org/pubs/journals/3500603.html>

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