

Medical and surgical abortion service delivery requirements

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Legal framework in Britain

Abortion Act 1967

- Abortion not illegal if:
 - conducted by a doctor
 - in an approved place
 - two doctors are of the opinion, formed in good faith, that the continued pregnancy would be of greater risk to health of woman or her existing children than if pregnancy were terminated.
 - Under 24 weeks gestation (few exceptions)

Provision of approval for places for early medical only

Regulation in Practice

Department of Health

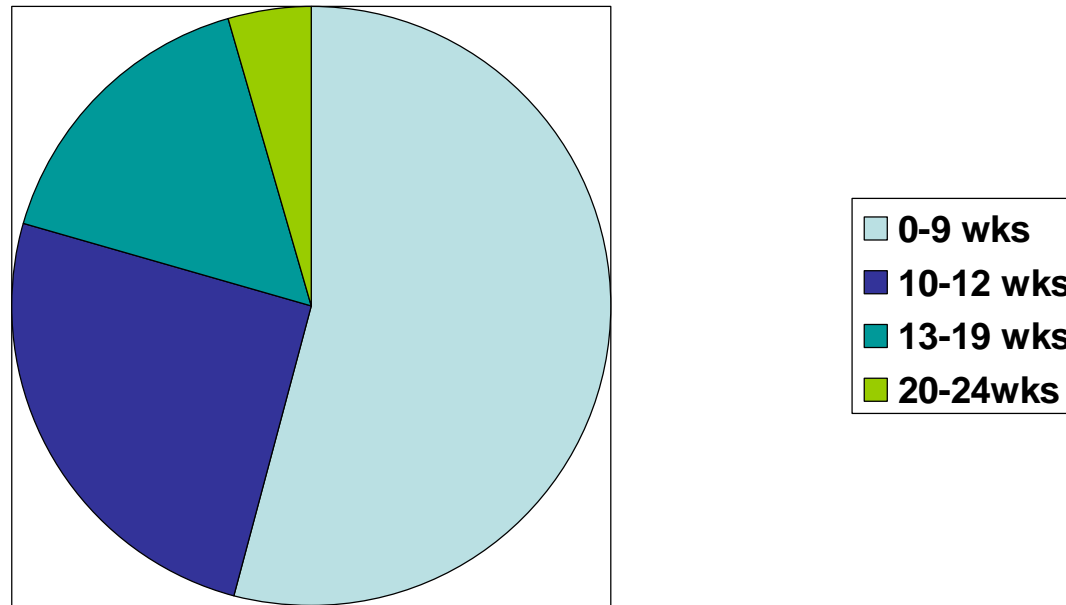
Healthcare Commission

Statutory national minimum standards

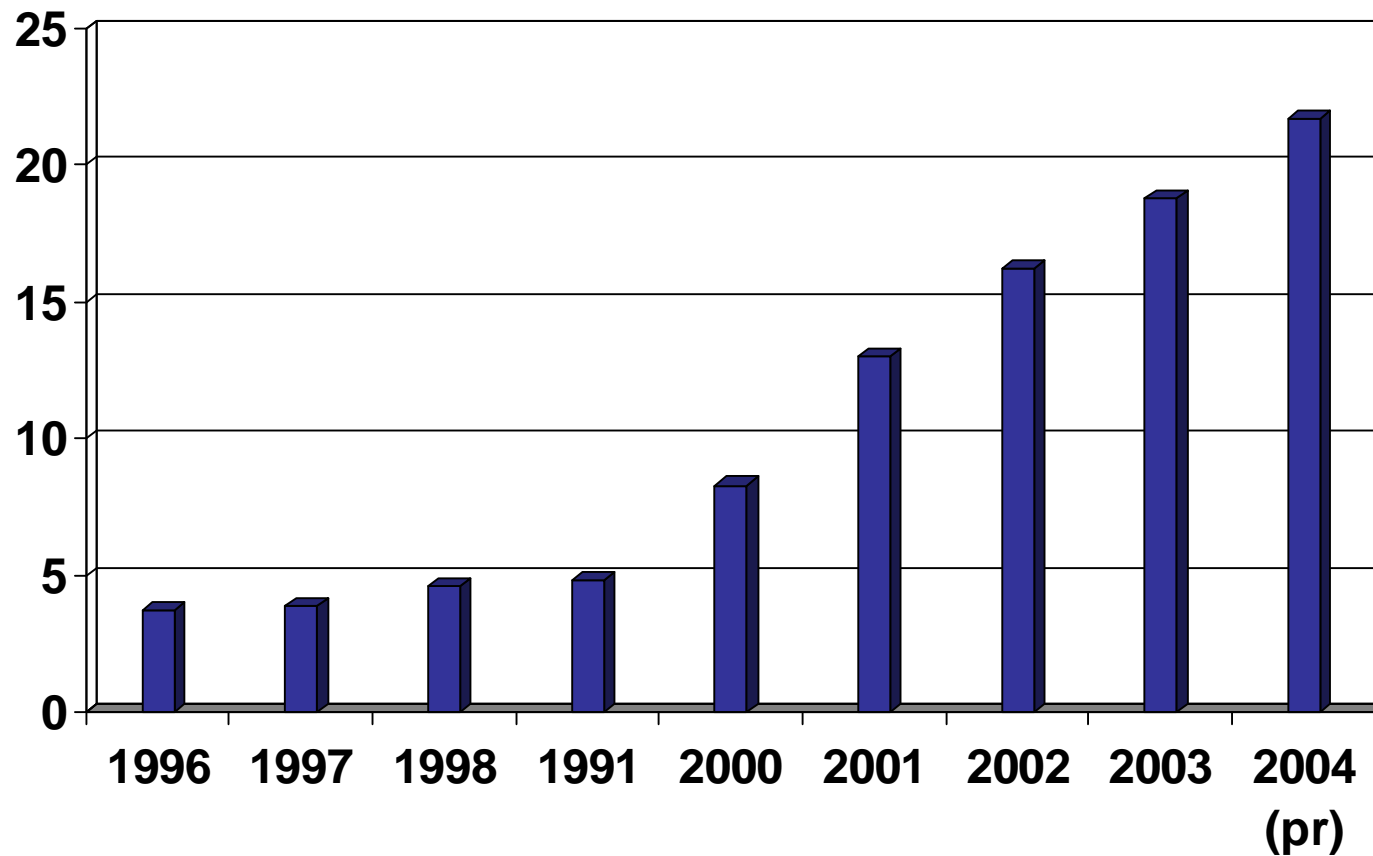
- Core standards
- Acute standards
- Termination of Pregnancy standards

Bpas abortion procedures

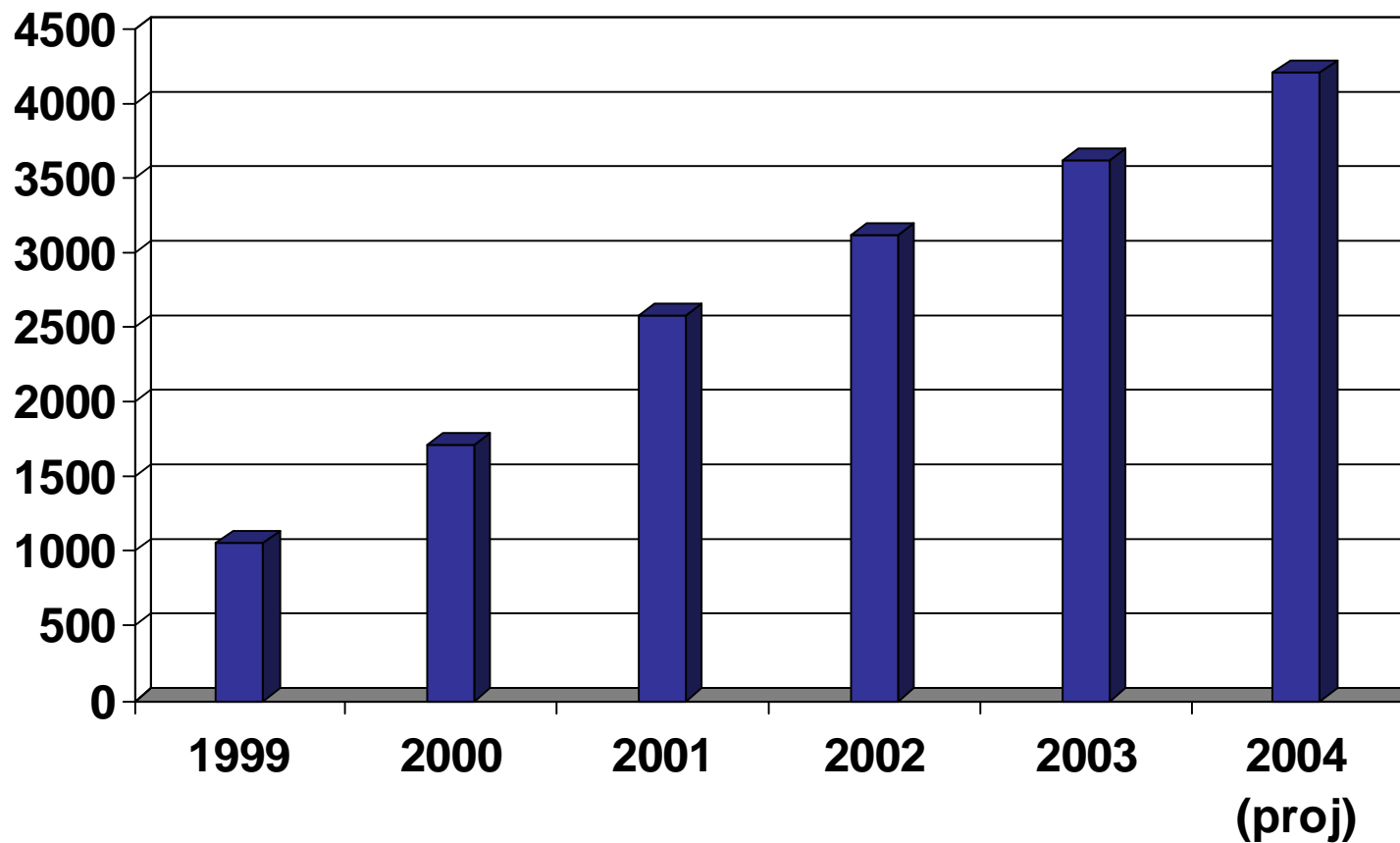
49,000 each year (75% public funding)



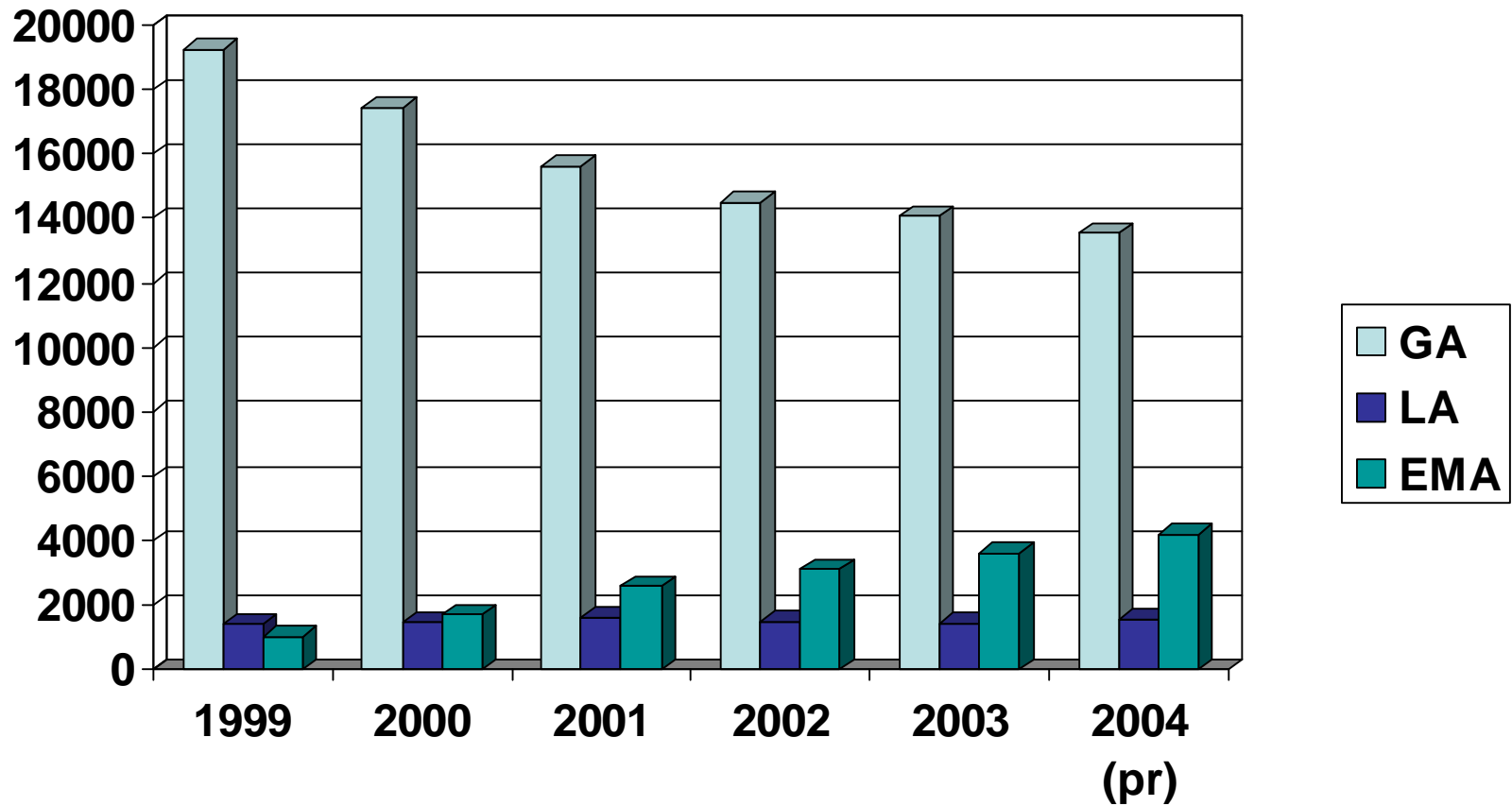
% abortions < 9wks using EMA



Number of EMA procedures



Type of procedures < 9wks



Service requirements

Pre treatment assessment

- Confirm pregnancy/gestation
- Confirm abortion intention/counselling needs
- Confirm meets legal requirements
- Confirm appropriate procedure

Issues

- Different premises/Different day?
- Scanning or pregnancy testing?
- Counselling requirements?
- Importance of method choice?

Vacuum aspiration under GA

- Assessments
 - BMI < 40
 - Bloods Hb, ABO, Rhesus, Sickle
 - Heart & Lungs
- Fully equipped surgical facilities
- No critical care – transfer within 10 mins
- High human resources impact

GA human resource commitment

Theatre

- Anaesthetist
- Anaesthetic assistant
- Treatment doctor
- Registered nurse
- Healthcare assistant

Recovery

- Registered nurses at ratio of 2:3
- Healthcare assistant

Issues

- Resource intensive
- Anaesthetic risks
- A “big deal”

MVA

- Assessments
 - Bloods Hb, ABO, Rhesus, Sickle
- Day care units equipped with resuss equipment
- Entonox for additional pain relief
- No critical care – transfer within 10 mins

Issues

- Reluctance of clinicians/support staff
- Medical v. non-medical setting
- Local anaesthetic or not
- Conscious sedation or not

EMA

- Assessments
 - Bloods Hb, ABO, Rhesus, Sickle
 - Exclude ectopic
- Provided in daycare units that provide EMA
- Resources: registered medical practitioner + nurse
- 24/7 telephone support

Issues

- Requirement to scan
- Need for telephone contact
- Good communication skills/written info

Why clients choose GA

Sample 179 clients surveyed at consultation

66 (53%) wanted to be unaware

36 (29%) wanted a single visit

17 (14%) convenience

10 (8%) travelling issues

Making EMA more acceptable

61/125 (49%) of clients who chose GA would have been more likely to choose EMA if fewer visits were involved

96/149 (64%) of clients who chose EMA would have preferred to take misoprostol at home

Take home messages

Why complicate it?

Start from what you need
not what you have.