



Patient information service  
**St Michael's Hospital**

# Vacuum aspiration abortion under general anaesthetic



We provide a **confidential service** to all our patients. Information will only be given to the medical teams providing your care.

We recommend that your GP is informed of ongoing treatments or conditions, but we would only contact them with your agreement.

The only reason why we might have to consider passing on confidential information without your permission would be to protect you or someone else from very serious harm. **We would always try to discuss this with you first.**

**Staff will not judge you.** They will treat you with respect. The decision about whether or not to continue with a pregnancy is difficult. The staff will be supportive of women who may have conflicting emotions.

Please attend the surgical day case unit at St Michael's Hospital for your operation

On ..... day / ..... / .....

At .....am/pm

## **Before you arrive**

Please leave plenty of time for your journey. The traffic is often very congested and parking is limited at the hospital. If you are late it may not be possible to carry out the operation. You must not eat anything from midnight but you may have sips of water until 6am.

You must not chew gum or suck sweets either. Failure to follow this advice may mean your operation is cancelled.

Do not smoke on the day of the operation. Have a bath or shower before coming in and do not wear any make-up, nail varnish, or jewellery.

Your admission is planned to be a day case, but on rare occasions it may be necessary to stay overnight.

## **You are asked to bring:**

- washing things / toiletries
- dressing gown and slippers
- overnight clothes
- sanitary towels
- any prescribed medicines that you use
- a book or magazine is a good idea.

Your length of stay is likely to be less than six hours. You must arrange for a responsible adult to collect you from hospital and stay with you that night.

Vacuum aspiration simply means suction. The cervix (the neck of the womb) is gently stretched open, and the contents of the womb are sucked out with a thin plastic tube passed through the cervix. With a general anaesthetic you are asleep and unconscious during the procedure. It usually takes about five minutes.

In many cases, misoprostol tablets are given a few hours before the procedure. These soften the cervix and may cause some vaginal bleeding and cramping (and occasionally nausea, vomiting, diarrhoea, rashes and dizziness). However, the abortion is made safer by this treatment.

At the end of the abortion procedure, and whilst still under the general anaesthetic, you can have an intrauterine contraceptive (coil) or contraceptive implant fitted or a contraceptive injection given. Please discuss these and any other contraceptive option you wish to consider with staff.

## **What is the risk of the abortion failing?**

There is a small risk in all methods of early abortion that the pregnancy may not be ended. For vacuum aspiration abortion under general anaesthetic, the risk is 1 in 500.

## **How safe is abortion?**

For most women an abortion is safer than carrying a pregnancy and having a baby, but all medical and surgical procedures have risks.

## **Are there risks at the time of the abortion?**

Problems at the time of abortion are not very common.

Excessive bleeding (haemorrhage) happens in around 1 in every 1,000. Rarely, blood transfusion is required.

Damage to the cervix happens in no more than 1 in every 100.

Damage to the womb at the time of surgical abortion happens in up to 4 in every 1,000; but where this is suspected at the time of the procedure, a keyhole operation to see inside of the abdomen (a laparoscopy) will be carried out. If there is damage to internal organs then further surgery may be required (a laparotomy). This is very rare.

More than one caesarean section will increase the risk of all complications. Hysterectomy is a last resort when bleeding complications arise, the risk is no more than 1 in 5000, which is very rare.

## **Are there risks after the abortion?**

You are more likely to get problems in the two weeks after the abortion than at the time of the procedure itself.

**If you experience problems it is important that you seek advice. You will be given written information telling you where to call if problems arise.**

### **Infection**

Up to 1 in 10 women will get an infection after an abortion. Taking antibiotics at the time of the abortion helps to reduce this risk. If you are not treated, it can lead to a more severe infection known as pelvic inflammatory disease.

## **Retained products**

In 1 to 2 in every 100 surgical abortions, the womb is not completely emptied of its contents and you may need further treatment. This may involve a brief general anaesthetic or a short course of tablets to help the womb empty.

## **Will abortion affect my future chances of having a baby?**

If there are no problems with your abortion it will not affect your future chances of becoming pregnant, although you may have a slightly higher risk of early birth.

Your fertility will only be affected if you have a serious infection such as pelvic inflammatory disease, or if you have an injury to your womb.

## **Does abortion cause breast cancer?**

Research evidence shows that having an abortion does not increase your risk of developing breast cancer.

## **What if I am RhD negative?**

If you are RhD negative, you will be offered an anti-D injection after your abortion.

## What about afterwards?

Following a general anaesthetic, the effects of the drugs last for several hours and your reaction times will be slower. For this reason you must avoid certain activities for at least 24 hours:

- do not drive or ride a bicycle or motorbike
- do not use machinery
- do not boil a kettle, use boiling liquids or cook using heat
- do not drink alcohol (but do drink plenty of non-alcoholic fluid)
- do not lock the bathroom or toilet door in case you feel faint
- do not sign a cheque or other important documents or make important decisions

Following the abortion, bleeding may last up to three weeks and you may have spotting for a few weeks after this, but it should get lighter.

Use sanitary towels (not tampons). Do not have sex until the bleeding has settled.

After a couple of days, the bleeding should not be heavier than a period.

If you soak more than two pads per hour for more than two hours in a row, you should contact [REDACTED] for advice on [REDACTED]



In some women, a small amount of pregnancy tissue may be left in the womb which could cause heavy or prolonged bleeding. Further treatment may be required to deal with this.

In the weeks after an abortion you should seek urgent medical review if you develop any of the following:

- lower abdominal
- pain, an offensive discharge and/or a fever.

These can be signs of infection and could lead to a more severe infection (known as pelvic inflammatory disease). See your GP or contact [REDACTED] on [REDACTED]

You are fertile immediately after an abortion so it is important to organise a suitable contraception. Your first period will arrive about four weeks later.

## **How will I feel emotionally after an abortion?**

How you react will depend on the circumstances of your abortion, the reasons for having it and on how comfortable you feel about your decision. You may feel relieved, sad or a mixture of both.

An abortion will not cause you to suffer emotional or mental health problems. However, if you have had mental health problems in the past, you may experience further problems after an unplanned pregnancy. These problems are likely to be a continuation of issues experienced before but you may find you need extra support following the abortion.

If these feelings don't settle, it may be helpful to talk to someone you can trust or seek professional advice from:

- your own **GP**
- **Brook Young Peoples' Clinic** (for under 20s only)  
telephone: [REDACTED]
- **Avon Psychotherapy and Counselling Service**  
telephone: [REDACTED] (small fee)
- **Off the Record** (counselling under 20s)  
telephone: [REDACTED]
- **Womankind** – Bristol woman's therapy  
telephone: [REDACTED]
- **Abortion Talk** – [REDACTED]



As well as providing clinical care, our Trust has an important role in research. This allows us to discover new and improved ways of treating patients.

While under our care, you may be invited to take part in research.  
To find out more please visit: [REDACTED]

**Help us prevent the spread of infection in hospital. Please make sure your hands are clean. Wash and dry them thoroughly/use the gel provided. If you have been unwell in the last 48 hours please consider whether your visit is essential.**

Smoking is the primary cause of preventable illness and premature death. For support in stopping smoking contact  
**NHS Smokefree on 0300 123 1044.**

Drinkline is the national alcohol helpline. If you're worried about your own or someone else's drinking, you can call this free helpline in complete confidence.  
**Drinkline on 0300 123 1110.**

For access all patient leaflets and information please go to the following address:  
**<http://foi.avon.nhs.uk/>**

**Bristol switchboard: 0117 923 0000**

**Weston switchboard: 01934 636 363**



For an interpreter or signer please contact the telephone number on your appointment letter.



For this leaflet in large print or PDF format, please email [REDACTED]

