

## Medical Methods For Termination Of Pregnancy Report Of A Who Scientific Group Who Technical Report Series

*This dissertation, "Cost-effectiveness of Medical Versus Surgical Methods for Termination of Early Pregnancy in Guangzhou, China" by 魏, Wei, Rose, Xia, was obtained from The University of Hong Kong (Pokfulam, Hong Kong) and is being sold pursuant to Creative Commons: Attribution 3.0 Hong Kong License. The content of this dissertation has not been altered in any way. We have altered the formatting in order to facilitate the ease of printing and reading of the dissertation. All rights not granted by the above license are retained by the author. DOI: 10.5353/th\_b4171210 Subjects: Abortion - China - Guangzhou*

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*Overview of abortion techniques/termination of pregnancy after 14 wks/acceptability of 1st-trimester medical abortion*

*Complications of Abortion*

*Natural Liberty*

*Medical Eligibility Criteria for Contraceptive Use*

*The Secret Life of Fat: The Science Behind the Body's Least Understood Organ and What It Means for You*

*Abortion*

*A Guide for Midwives and Doctors*

**A state-of-the-art report on the use of pharmaceutical agents and other non-invasive methods for the medical termination of pregnancy. Addressed to service managers, the report draws together a wealth of recent findings useful in evaluating the safety, efficacy, cost-effectiveness and acceptability of medical methods, whether currently in use or undergoing clinical trials. Information on established surgical procedures for abortion is also provided to facilitate comparisons and balanced decisions. While noting that the prevention of unwanted pregnancies remains the first public health priority, the report aims to help health care personnel providing legal abortion services to determine whether these newer medical methods can improve the management of abortion in specific patient groups and in different resource settings. Over 250 references to the literature are included. The report has eight sections. The first, on the demography of abortion, explores the many factors that contribute to unwanted pregnancies and influence abortion rates. Section two, on mechanisms for medical abortion, explains how pharmaceutical agents act to interrupt the pregnancy process and cause the pregnancy to end. Of particular value is a review of some 18 agents categorized as prostaglandins; antiprogestogens, including mifepristone; epostane; oxytocin; hypertonic agents; ethacridine lactate; hydrophilic cervical dilators; and cervical ripening devices. Each is profiled in terms of its mechanisms of action, efficacy, side-effects and safety, mode of administration, and advantages and disadvantages when compared with other medical and surgical methods. Against this background, the main part of the report provides detailed information on the current or potential place of medical methods for abortion at up to 9 weeks of gestation, at 9-14 weeks of gestation, and after 14 weeks of gestation. In each section, conclusions and recommendations identify methods of choice and their most acceptable alternatives, summarize procedures that can enhance safety, and point out factors that should be considered when selecting a method for routine use. Needs for further research are also identified. Subsequent sections discuss the complications of abortion and measures for their prevention, and review findings from several recent studies of the acceptability - to both women and service providers - of medical abortion. The final section provides a guide to the introduction of medical abortion as a routine clinical service.**

**Abortion is a legal medical procedure that has been provided to millions of American women. Since the Institute of Medicine first reviewed the health implications of national legalized abortion in 1975, there has been a plethora of related scientific research, including well-designed randomized clinical trials, systematic reviews, and epidemiological studies examining abortion care. This research has focused on examining the relative safety of abortion methods and the appropriateness of methods for different clinical circumstances. With this growing body of research, earlier abortion methods have been refined, discontinued, and new approaches have been developed. The Safety and Quality of Abortion Care in the United States offers a comprehensive review of the current state of the science related to the provision of safe, high-quality abortion services in the United States. This report considers 8 research questions and presents conclusions, including gaps in research.**

**At head of title: Sage-Femme Collective.**

**Neither legalization of abortion nor scientific and political advances in contraception and abortion ensure that training and research in family planning are routinely integrated into medical education. Without integration, subsequent generations of healthcare professionals are not prepared to incorporate evidence-based family planning into their practices, teaching, or research. Omission of this crucial component prevents the cultural and professional normalization of an often stigmatized and embattled aspect of women's health. Taking the successful US-based Ryan and Family Planning Fellowship programs as templates for training, teaching, and academic leadership, this book describes the integration of family planning and pregnancy termination into curricula with an international outlook. With an evidence- and systems-based approach, the book is a unique and practical guide to inspire and train the next generation of healthcare professionals.**

**Evidence-based Obstetrics and Gynecology**

**The Safety and Quality of Abortion Care in the United States**

**Abortion Care**

**Abortion with Septic Shock**

**Second Trimester Pregnancy Termination**

**Voluntary Termination of Pregnancy**

Medical abortion care encompasses the management of various clinical conditions including spontaneous and induced abortion (both viable and non-viable pregnancies), incomplete abortion and intrauterine fetal demise, as well as post-abortion contraception. Medical management of abortion generally involves either a combination regimen of mifepristone and misoprostol or a misoprostol-only regimen. Medical abortion care plays a crucial role in providing access to safe, effective and acceptable abortion care. In both high- and low-resource settings, the use of medical methods of abortion have contributed to task shifting and sharing and more efficient use of resources. Moreover, many interventions in medical abortion care, particularly those in early pregnancy, can now be provided at the primary-care level and on an outpatient basis, which further increases access to care. Medical abortion care reduces the need for skilled surgical abortion providers and offers a non-invasive and highly acceptable option to pregnant individuals.

Research Paper (undergraduate) from the year 2015 in the subject Medicine - Gynecology, Andrology, grade: A, University of Manchester (HCRI), course: Global Health, language: English, abstract: The World Health Organization defines unsafe abortion as a procedure for terminating a pregnancy that is performed by an individual lacking the necessary skills, or in an environment that does not conform to minimal medical standards, or both. Unsafe abortion is common in places where abortion is illegal. Every year almost 44,000 abortions occur globally and nearly half of them are unsafe whereby almost all unsafe abortions (98 percent) are happening in developing Countries. In Countries where abortion remains unsafe, it is a leading cause of maternal mortality. According to the WHO unsafe abortions contribute to 13% of all maternal mortality globally and are direct cause of maternal mortality in Sub-Saharan Africa. When comparing women with their counterpart men in Sexual and Reproductive Health, there is no such a high cause of mortality in men. This difference shows the existent gender inequality in most developing Countries. In these settings women are denied access to information, education on safe sex, contraception and are not offered an informed consent on their fertility choices. Gender based violence is one of the contributing factor to this inequality that women suffer and this affect their potential development and enjoyment of their right to health including their right to Sexual and Reproductive Health. These universal rights legitimate women to choose whether to conceive or when to form a family. This should have not been difficult to achieve in a World with so much technologies of modern effective contraceptive methods. And the issue of unsafe abortion and its complications could be averted. Conversely this is not the case in the context where legal structures should determine the fate of those who should make decisions for their own lives. The legalization or non-legalization of termination of pregnancy has been a battle ground for Centuries in many Countries across the Globe with different variations in the trends of abortion legal frameworks. In this essay, I will discuss why unsafe abortion is perceived as neglected globally and evaluate the extent to which human rights-based approach can be useful to mitigate this public health problem and conclude with my personal view on this issue.

This comprehensive review of the emotive and often controversial topic of abortion provides clinicians with a multidisciplinary focus on abortion services, discussing clinical topics in their sociological, legal and ethical context. It is particularly timely as novel methods of service delivery make this vital resource more accessible, allowing abortion to be performed in community settings. Topics include medical and surgical methods of abortion, ultrasound scanning, pain control, complications, and abortion in women with medical conditions, as well as ethics, stigma, and human rights. Written by leading authorities in their subject areas, Abortion Care is essential reading for medical and nursing specialists and forms a useful resource in the delivery of graduate courses in the fields of obstetrics and gynaecology and sexual and reproductive healthcare. It is also of interest to professionals involved in planning, delivering and managing women's health services, including counsellors, service managers and public health specialists.

The most comprehensive evidence-based guide to both obstetrics and gynecology Aimed at practicing obstetricians, gynecologists, and trainees in the specialty, Evidence-based Obstetrics and Gynecology concentrates on the clinical practice areas of diagnosis, investigation and management. The first section of the book discusses evidence-based medicine methodology in the context of the two specialties. The second and third sections cover all the major conditions in obstetrics and gynecology, with each chapter reviewing the best available evidence for management of the particular condition. The chapters are structured in line with EBM methodology, meaning the cases generate the relevant clinical questions. Evidence-based Obstetrics and Gynecology provides in-depth chapter coverage of abnormal vaginal bleeding; ectopic pregnancy; pelvic pain; lower genital tract infections; contraception and sterilization; breast diseases; urogynecology; endocrinology and infertility; puberty and precocious puberty; cervical dysplasia and HPV; cervical, vaginal, vulvar, uterine, and ovarian cancer; preconceptio care; prenatal care and diagnosis; drugs and medications in pregnancy; maternal complications; chronic hypertension; diabetes mellitus; thyroid disease; neurologic disease; psychiatric disease; postterm pregnancy; fetal complications; preeclampsia; and more. First book to address evidence-based practice for obstetrics and gynecology combined EBM is a highly relevant approach for this high risk specialty Edited by leading US specialist involved in the evidence-based medicine movement Evidence-Based Obstetrics and Gynecology is an important text for obstetricians and gynecologists in practice and in training, as well as for specialist nurses.

General Gynecology

A Complete Gynecological Guide for Women

Medical Progress and Social Implications

Advancing Women's Health Through Medical Education

Hepatotoxicity

Model Rules of Professional Conduct

Sets out guidelines that can help reduce the high levels of maternal morbidity and mortality associated with abortion whether spontaneous or induced. Recommendations and advice are backed by extensive practical experience and rooted in the principle that emergency care for the complications of abortion should be available 24 hours a day in every health care system. In view of the need to prevent life-threatening complications the book also establishes standards of safe abortion practice for use in those countries where abortion is permitted by law. Prevention of abortion through education and family planning is likewise discussed. Addressed to health managers administrators and care providers the book follows a step-by-step approach to the provision of emergency and preventive care. The first three chapters describe the magnitude of mortality and morbidity caused by unsafe abortions define the essential components of abortion care at each level in the health system and discuss the ways in which legal and societal factors affect abortion behaviour and care. Against this background the remaining eleven chapters provide technical and managerial guidelines for each component of service at each level of the health system needed to ensure that all women have access to care 24 hours a day. A chapter on planning is followed by three chapters outlining the clinical elements of emergency abortion care. Of particular value is a chapter on patient information and counselling which emphasizes the importance of providing information in a supportive manner. Other chapters offer detailed guidance on the facilities equipment and drugs needed for abortion care on the training and supervision of staff and on ways to overcome several obstacles that make it difficult for women in remote rural areas to receive timely care.

The emphasis of the manual is on rapid assessment and decision making. The clinical action steps are based on clinical assessment with limited reliance on laboratory or other tests and most are possible in a variety of clinical settings.

The main aim of this practical Handbook is to strengthen counselling and communication skills of skilled attendants (SAs) and other health providers, helping them to effectively discuss with women, families and communities the key issues surrounding pregnancy, childbirth, postpartum, postnatal and post-abortion care. The MNH Counselling Handbook is chiefly designed to be used by groups of SAs with the help of a facilitator. It can also be used by individual SAs who can get together with colleagues for discussions and activities where needed. It relies on a self-directed learning approach, allowing SAs to work at their own pace, drawing on their past counselling experience. The way it is used will be determined by each country's context, and the SAs preference. The MNH Counselling Handbook is divided into three main sections. Part 1 is an introduction which describes the aims and objectives and the general layout of the Handbook. Part 2 describes the counselling process and outlines the six key steps to effective counselling. It explores the counselling context and factors that influence this context including the socio-economic, gender, and cultural environment. A series of guiding principles is introduced and specific counselling skills are outlined. Part 3 focuses on different maternal and newborn health topics, including general care in the home during pregnancy; birth and emergency planning; danger signs in pregnancy; post-abortion care; support during labour; postnatal care of the mother and newborn; family planning counselling; breastfeeding; women with HIV/AIDS; death and bereavement; women and violence; linking with the community. Each Session contains specific aims and objectives, clearly outlining the skills that will be developed and corresponding learning outcomes. Practical activities have been designed to encourage reflection, provoke discussions, build skills and ensure the local relevance of information. There is a review at the end of each session to ensure the SAs have understood the key points before they progress to subsequent sessions.

The issue of abortion forces a confrontation with the effects of poverty and economic inequalities, local moral worlds, and the cultural and social perceptions of the female body, gender, and reproduction. Based on extensive original field research, this provocative collection presents case studies from Thailand, Cambodia, Burma, Vietnam, Bangladesh, Indonesia, and India. It includes powerful insight into the conditions and hard choices faced by women and the circumstances surrounding unplanned pregnancies. It explores the connections among poverty, violence, barriers to access, and the politics and strategies involved in abortion law reform. The contributors analyze these issues within the broader conflicts surrounding women's status, gender roles, religion, nationalism and modernity, as well as the global politics of reproductive health.

The Turnaway Study

Medical Methods for Termination of Pregnancy

Counselling for Maternal and Newborn Health Care

Comparing the Varying Doses of Mifepristone, with the Varying Doses and Combinations of Misoprostol and Gemeprost : a Systematic Review of the Literature

The Care of Women Requesting Induced Abortion

Modern Methods of Inducing Abortion

"This report assesses progress over the past decade regarding the legality, safety and accessibility of abortion services worldwide. It summarizes developments in policy and documents recent trends in abortion incidence, with a focus on unsafe abortion. It also examines the

relationship between unintended pregnancy, contraception and abortion, placing abortion within the broader context of women's reproductive lives." - p. 4.

Access to high quality abortion care is essential to women's health, as evidenced by the dramatic decrease in pregnancy-related morbidity and mortality since the legalization of abortion in the United States, and by high rates of maternal death and complications in those countries where abortion is still provided under unsafe conditions. The past two decades have brought important advances in abortion care as well as increasing cross-disciplinary use of abortion technologies in women's health care. Abortion is an important option for pregnant women who have serious medical conditions or fetal abnormalities, and fetal reduction techniques are now well-integrated into infertility treatment to reduce the risks of multiple pregnancies resulting from assisted reproductive technologies. Management of Unintended and Abnormal Pregnancy: Comprehensive Abortion Care is the textbook of the National Abortion Federation, and serves as the standard, evidence-based reference text in abortion care. This state-of-the-art textbook provides a comprehensive overview of the public health implications of unsafe abortion and reviews the best surgical and medical practices for pregnancy termination, as well as managing ectopic and other abnormal pregnancies. Management of Unintended and Abnormal Pregnancy: Comprehensive Abortion Care is the leading source for a comprehensive understanding of issues related to unintended and abnormal pregnancy. This textbook: is authored by internationally-known leaders in women's health care; addresses unintended pregnancy and abortion from historical, legal, public health, clinical, and quality care perspectives; includes chapters on pregnancy loss, ectopic pregnancy, gestational trophoblastic disease, and multifetal pregnancy reduction; covers treatment of pregnancies in the first and second trimester by both medical and surgical techniques; and provides resources for clinical, scientific, and social support for the abortion provider and patient.

A woman is obviously different from a man. The anatomical difference is clear but, as well, women have different perception of many experiences, although how much this is due to prevailing cultural attitudes and how much to gender difference is not clear. The structural differences are apparent at once, particularly in the development of a woman's breasts. Among Western communities, the breast has a unique sexual symbolism, and even if fashion diminishes it rotundity, the hemispherical mammary glands are a potent attraction for the male eye. In communities where breasts are habitually exposed, they have little sexual connotation, being considered for what they are - a source of nourishment for the infant. One thing distinguishes women from men, and that is the ability to conceive and give birth. The term abortion is therefore not new to women. However, many people seem to be unaware of the physical and psychological side effects that an abortion procedure has on women (and even men); it can take someone years to fully recover from this traumatic event. A study of induced abortions in Ontario compared over 40,000 women who had undergone induced abortions to a similar number of women who hadn't. Three months after the abortion, women were found to have a more than four times higher rate of hospitalizations due to infections and a five times higher rate of "surgical events." Septic shock is a serious complication of infection. Factors that can contribute to the onset of sepsis include an incomplete abortion and bacteria introduced into the uterus during an abortion. Sepsis occurs when an infection enters the blood stream, and can lead to a dramatic drop in blood pressure and heart, respiratory, or organ failure. This life-threatening complication is responsible for 30 percent of abortion-related deaths. As a measure to curb this menace, this book explicitly discusses all about this disorder including its preventive measures. It is hoped that the reader will benefit greatly from this. Tags: abortion, abortion pill, abortion clinic, abortion clinics, abortion clinics near me, ru486, abortion cost, medical abortion, abortion information, abortion procedure, where to get abortion pill, termination of pregnancy, where can i get the abortion pill, abortion methods, abortion prices, medical abortion pill, abortion pill over the counter, surgical abortion, abortion options, abortion tablets, types of abortion, abortion pill cost, safe abortion, early abortion pill, pregnancy termination pill, ru486 pill, early abortion, safe abortion pills, second trimester abortion, effects of abortion, abortion process, what is an abortion, blood infection, when to take a pregnancy test, septic shock, sepsis, sepsis symptoms, sepsis infection, septic shock treatment, sepsis treatment, signs of sepsis, signs of sepsis, sepsis criteria, what causes sepsis, sepsis guidelines, septic shock symptoms, signs and symptoms of sepsis, sepsis causes, sepsis prognosis, sepsis diagnosis, blood infection symptoms, severe sepsis, septicemia symptoms, what causes septic shock, septic shock prognosis, sepsis syndrome, sepsis symptoms in elderly, septicemia treatment, sepsis disease.

Written by the foremost authority in the field, this volume is a comprehensive review of the multifaceted phenomenon of hepatotoxicity. Dr. Zimmerman examines the interface between chemicals and the liver; the latest research in experimental hepatotoxicology; the hepatotoxic risks of household, industrial, and environmental chemicals; and the adverse effects of drugs on the liver. This thoroughly revised, updated Second Edition features a greatly expanded section on the wide variety of drugs that can cause liver injury. For quick reference, an appendix lists these medications and their associated hepatic injuries. Also included are in-depth discussions of drug metabolism and factors affecting susceptibility to liver injury.

Reading Packet on Termination of Treatment of Adults

Guideline Summary

Ten Years, a Thousand Women, and the Consequences of Having—or Being Denied—an Abortion

Local Dilemmas, Global Politics

A Handbook for Building Skills

A Systems Approach in Family Planning and Abortion

Presenting a comprehensive, clinically oriented text covering all aspects of abortion care related to both medical and surgical abortion. Multiple contributors, well recognized for their expertise in abortion and women's health, contribute to make this a state-of-the-art reference on abortion for students, residents and practitioners involved in women's reproductive health care.

"A groundbreaking and illuminating look at the state of abortion access in America and the first long-term study of the consequences-emotional, physical, financial, professional, personal, and psychological-of receiving versus being denied an abortion on women's lives" --

The Requisites in Obstetrics and Gynecology is a series of volumes that offers a concise overview of the field of obstetrics and gynecology in the following areas: High Risk Obstetrics, General Gynecology, Gynecologic Oncology, and Reproductive Endocrinology and Infertility. Each volume contains the core material that is fundamental to each area and includes a presentation

that allows the user to absorb the information quickly and thoroughly. This volume is devoted to General Gynecology, which covers care of the female patient outside of pregnancy or during the initial weeks of pregnancy. Topics include gynecologic imaging, family planning, congenital and developmental abnormalities, abnormal uterine bleeding, and pelvic floor disorders. This publication contains answers to a range of frequently asked questions on medical abortion services, based on the discussions at an international conference held in Bellagio, Italy in November 2004. By focusing on practical issues, the answers should be particularly helpful to health-care personnel who are considering establishing, or already providing, a service for medical abortion in the early first trimester.

Report of a WHO Scientific Group

Frequently Asked Clinical Questions about Medical Abortion

A Clinician's Guide to Medical and Surgical Abortion

Cost-Effectiveness of Medical Versus Surgical Methods for Termination of Early Pregnancy in Guangzhou, China

Management of Unintended and Abnormal Pregnancy

The Adverse Effects of Drugs and Other Chemicals on the Liver

The Model Rules of Professional Conduct provides an up-to-date resource for information on legal ethics. Federal, state and local courts in all jurisdictions look to the Rules for guidance in solving lawyer malpractice cases, disciplinary actions, disqualification issues, sanctions questions and much more. In this volume, black-letter Rules of Professional Conduct are followed by numbered Comments that explain each Rule's purpose and provide suggestions for its practical application. The Rules will help you identify proper conduct in a variety of given situations, review those instances where discretionary action is possible, and define the nature of the relationship between you and your clients, colleagues and the courts.

Medical Eligibility Criteria for Contraceptive Use reviews the medical eligibility criteria for use of contraception, offering guidance on the safety and use of different methods for women and men with specific characteristics or known medical conditions. The recommendations are based on systematic reviews of available clinical and epidemiological research. It is a companion guideline to Selected Practice Recommendations for Contraceptive Use. Together, these documents are intended to be used by policy-makers, program managers, and the scientific community to support national programs in the preparation of service delivery guidelines. The fourth edition of this useful resource supersedes previous editions, and has been fully updated and expanded. It includes over 86 new recommendations and 165 updates to recommendations in the previous edition. Guidance for populations with special needs is now provided, and a new annex details evidence on drug interactions from concomitant use of antiretroviral therapies and hormonal contraceptives. To assist users familiar with the third edition, new and updated recommendations are highlighted. Everyone involved in providing family planning services and contraception should have the fourth edition of Medical Eligibility Criteria for Contraceptive Use at hand.

At a UN General Assembly Special Session in 1999, governments recognised unsafe abortion as a major public health concern, and pledged their commitment to reduce the need for abortion through expanded and improved family planning services, as well as ensure abortion services should be safe and accessible. This technical and policy guidance provides a comprehensive overview of the many actions that can be taken in health systems to ensure that women have access to good quality abortion services as allowed by law.

"The cases are presented in a concise and interesting manner... highlights the emerging consciousness of the importance of the contractual arrangement between physician and patient..." -- Journal of the American Medical Association "The cases presented are interesting ones, and the commentaries are uniformly lucid.... Highly recommended..." -- Religious Studies Review "Cohen contributes a well-selected collection of cases and commentaries which are presented in a crisp style... it is likely to have a real impact." -- Ethics Twenty-six reports based on actual cases with expert commentary that illuminate the ethical, medical, legal, and psychological contours of dilemmas surrounding termination of treatment decisions. Cases involve patients, families, physicians, nurses, lawyers, and health care administrators. A companion volume to the

Hastings Center's Guidelines. See Guidelines for ad quotes when advertising both books.

Who Decides

Managing Complications in Pregnancy and Childbirth

ScholarlyPaper

Technical and Policy Guidance for Health Systems

Termination of Treatment of Adults

Rediscovering Self-induced Abortion Methods

A biochemist shows how we can finally control our fat!by understanding how it works. Fat is not just excess weight, but actually a dynamic, smart, and self-sustaining organ that influences everything from aging and immunity to mood and fertility. With cutting-edge research and riveting case studiesincluding the story of a girl who had no fat, and that of a young woman who couldn't stop eating!Dr. Sylvia Tara reveals the surprising science behind our most misunderstood body part and its incredible ability to defend itself. Exploring the unexpected ways viruses, hormones, sleep, and genetics impact fat, Tara uncovers the true secret to losing weight: working with your fat, not against it.

Featuring more than 4100 references, Drug-Induced Liver Disease will be an invaluable reference for gastroenterologists, hepatologists, family physicians, internists, pathologists, pharmacists, pharmacologists, and clinical toxicologists, and graduate and medical school students in these disciplines.

The Clinical practice handbook for safe abortion care is intended to facilitate the practical application of the clinical recommendations from the second edition of Safe abortion: technical and policy guidance for health systems (World Health Organization [WHO] 2012). While legal, regulatory, policy and service-delivery contexts may vary from country to country, the recommendations and best practices described in both of these documents aim to enable evidence-based decision-making with respect to safe abortion care. This handbook is oriented to providers who already have the requisite skills and training necessary to provide safe abortion and/or treat complications of unsafe abortion. It is neither a substitute for formal training, nor a training manual.

Views and attitudes towards termination of pregnancy have shown considerable evolution over the past few decades. Along with these changes has come a growing concern to adopt means and methods which could make termination easier, safer and more effective. In this evolution, termination in the second trimester in particular is notable as being responsible for a disproportionate share of the complications and adverse experiences associated with pregnancy termination. Although the almost universal shift towards earlier abortion has reduced the number of second trimester procedures as a percentage of the whole, the problems of interrupting pregnancy in the second trimester remain conspicuous. Delay in either seeking or obtaining abortion is still, in many parts of the world, all too frequent. Additionally, recent developments in the prenatal diagnosis of fetal malformations, alpha-fetoprotein screening programmes and changes in the pattern of and approaches to intrauterine fetal death now also place greater emphasis on the need for adequate methods of interrupting pregnancy in the second trimester.

Unlike the first trimester in which vacuum aspiration is universally considered to be the method of choice, in the second trimester of pregnancy the clinician is faced with alternatives; one method may be more appropriate than another in a particular circumstance and no single method is unequivocally accepted as best. Neither do second trimester terminations form a neatly defined single category.

Effectiveness of Medical Methods of Drug Treatment for First Trimester Termination of Pregnancy

Safe Abortion

Abortion Worldwide

Progesterone Receptor Modulators: Advances in Research and Application: 2012 Edition

The Requisites in Obstetrics and Gynecology

A Decade of Uneven Progress