



Abortion Rights  
Coalition of Canada

*Your  
Voice for Choice*

Coalition pour le droit à  
l'avortement au Canada

*Canada's only national political pro-choice advocacy group*

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## **Position Paper # 18**

### **Abortion Methods: An Overview**

Two methods of terminating a pregnancy are available: surgical abortions and medication abortions. Both methods are safe and effective ways to end a pregnancy, depending on how far along the pregnancy is. However, some people may have a medical condition or fetal anomalies may be found, so a physician might recommend one method over the other.

Mifegymiso, commonly referred to as the abortion pill, has been available by prescription in Canada since 2017.

To help you choose between surgical and medical abortion, please visit the website of Willow Women's Clinic: [http://www.willowclinic.ca/?page\\_id=9](http://www.willowclinic.ca/?page_id=9)

### **Surgical Abortions**

A surgical abortion is one of the safest medical procedures available, whether performed in a hospital or a clinic setting. The mortality rate is less than one death for every 100,000 abortions.

The method most commonly used is vacuum aspiration and is generally done using conscious sedation, which means the patient is awake during the procedure. Some hospitals continue to use a general anesthetic.

During the procedure, which generally takes less than ten minutes, the doctor will gently dilate the cervix (the entrance to the uterus) by inserting and removing a series of narrow, tapered rods. A small hollow tube, which is attached to an aspirator machine, is then inserted into the uterus. The suction is turned on and once the uterus is empty, the suction is stopped. The walls of the uterus are gently scraped with a loop-shaped instrument called a curette to ensure that no tissue from the embryo or placenta remains. Some mild discomfort, such as menstrual-like cramps, may be experienced during the procedure. When conscious sedation is used, patients are usually ready to leave within thirty minutes to one hour following the procedure. Most people return to their normal activities the day after their abortion.

## ***Medication Abortions***

A medication abortion with Mifegymiso is possible if the gestation period is under nine weeks. Mifegymiso is a combination of two drugs, one pill containing mifepristone to be taken on the day of your abortion, and then misoprostol pills to be taken 24 hours later. These pills are inserted into the cheek of your mouth (buccal administration) for 30 minutes, and whatever remains is then swallowed with water.

You will be required to have blood work taken on the day of your abortion, and then again during your follow-up.

Pain medication can be given to ease the pain of cramping, which can feel similar to strong menstrual cramps and occurs as the pregnancy tissue comes out of the uterus. The process is similar to a miscarriage.

In most cases the uterus will be emptied within two hours, but in about 35% of cases it can take several days or weeks. In some cases, you may need a second dose of misoprostol. A follow-up exam will confirm that the abortion was complete, but this is not necessary if you are sure the pregnancy has passed and you feel fine. However, in 1-2% of cases, medication abortion fails and you will need to have a surgical abortion to complete the process.

If you must travel long distances to obtain abortion services, surgical abortion may be your only option due to the number of doctor visits required for a medication abortion, and the uncertainty of when the abortion will take place. Or, you can contact the Action Canada hotline at 1-888-642-2725 to determine if there are telemedicine services in your area.

Prior to Mifegymiso, medication abortion consisted of a combination of methotrexate and misoprostol up to 7 weeks into the pregnancy. Methotrexate is still an important method used in case of ectopic pregnancies. It is usually given by injection, and then within five to seven days tablets of misoprostol are placed in the vagina.