

# Can women accurately assess the outcome of medical abortion based on self-assessment and low sensitivity urine pregnancy test?

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# Context

- **MToP in France:** about 100 000/year
- **Usual technique:**
  - Until 63 days of gestation
  - Mifepristone — 36-48h → Misoprostol
  - Hospitalization after 43 days of gestation
  - Post-abortion visit: D14-21
- **Complications:**
  - Pelvic pain
  - Ongoing pregnancies (1%)
  - Incomplete abortions (5%)
  - Hémorrhage (1%, transfusion: 0,1%)
  - Death (extremely rare: <1/100 000)

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# Objectives

➤ **Primary:**

self-performed questionnaire + LSUP test

vs

Clinical examination + blood BhCG test +/- ultrasonography

➤ **Secondary:**

Analyzing the concordance between qualitative results from the LSUP test and the blood human Chorionic Gonadotropin

+

Description of non follow-up's patients



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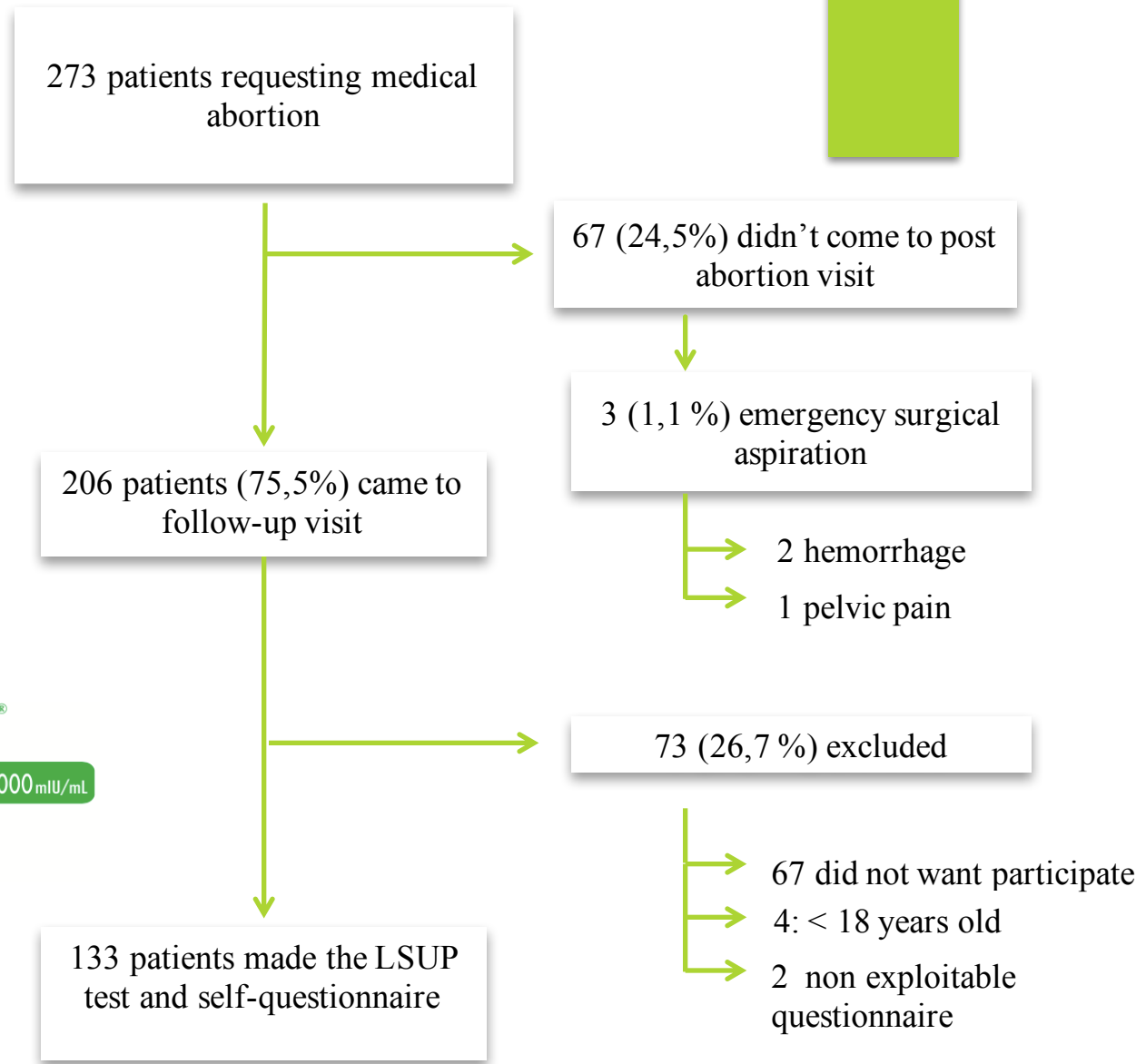
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# Study design and Flow chart

- Prospective cohort
- At Rennes University Hospital
- Women who came for their post-abortion visit after MToP
- Between March and August 2017

**checkToP<sup>®</sup>** is a rapid test which detects the presence of hCG in urine if the hormone urine is 1 000 mIU/mL or more.



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# Women's characteristics

Women's characteristics	n=133
Age (years): mean (+/- SD)	30.7 (+/- 7)
BMI	23.2 (5.1)
Smoking	62 (46.6%)
Education level (French secondary school diploma)	
No obtained	31 (23.3%)
Obtained	33 (24.8%)
Two-year university degree	26 (19.5%)
Three-year university degree	25 (18.8%)
Five-year university degree	16 (12%)
Eight-year university degree	2 (1.5%)
Previous pregnancy	
Gestivity	3 [1-8]
Parity	1 [0-5]
Prior abortion	0 [0-3]
At least one prior abortion	43 (32.3%)
Term of abortion (day)	42 [35-55]
Interval between:	
Pregnancy dating and MToP (day)	1 [0-14]
MToP and follow-up visit (day)	21 [14-31]

*Results expressed as median (min-max), mean (+/- SD) or sample size (%)*

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# Primary objective (1)

LSUP test + self-assessment compared to clinical conclusion

	MToP failure	MToP success	Total
T+	8	13	21
T-	0	112	112
Total	8	125	133

Se= 100  
Sp= 89.6  
VPP= 38.1  
VPN= 100  
Youden index= 0.90  
Kappa coefficient = 0.51

8 failures

- 2 ongoing pregnancies
- 6 retained products of conception
  - 3 surgical aspiration
  - 3 new oral administration of Misoprostol

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# Primary objective (2)



LSUP test compared to clinical conclusion

	MToP failure	MToP success	Total
LSUP t +	7	10	17
LSUP t -	1	115	116
Total	8	125	133

Se= 87.5  
Sp= 92.0  
VPP= 41.2  
VPN= 99.1  
Youden index= 0.80

Self-assessment compared to clinical conclusion

	MToP failure	MToP success	Total
Self-assessment +	5	7	12
Self-assessment -	3	118	121
Total	8	125	133

Se= 62.5  
Sp= 94.4  
VPP= 41.7  
VPN= 97.5  
Youden index= 0.57



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## Secondary objective: concordance between qualitative results from the LSUP test and the blood BhCG test

LSUP test compared to blood hCG

	Blood hCG > 1000	Blood hCG < 1000	Total
LSUP t +	9	6	15
LSUP t -	2	85	87
Total	11	91	102

Kappa coefficient = 0.65

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# Secondary objective: Non follow-up's patients

Women's characteristics	Returners n=133	No returners n=67	p
Age (years)	30.7 (+/- 7)	27 (+/-6.9)	<b>&lt;0.001</b>
Smoking	62 (46.6%)	38 (56.7%)	0.20
Education level (French secondary school diploma)			
No obtained	31 (23.3%)	25 (37.3%)	<b>0.04</b>
Obtained	33 (24.8%)	25 (37.3%)	0.09
Two-year university degree	20 (15.0%)	11 (16.4%)	0.58
Three-year university degree	25 (18.8%)	5 (7.5%)	<b>0.04</b>
Five-year university degree	16 (12%)	1 (1.5%)	<b>0.01</b>
Eight-year university degree	2 (1.5%)	0 (0%)	0.50
Previous pregnancy			
Gesity	3 [1-8]	3 [1-12]	0.28
Parity	1 [0-5]	1 [0-7]	0.42
Prior abortion	0 [0-3]	0 [0-5]	<b>0.01</b>

Results expressed as median (min-max), mean (+/- SD) or sample size (%)

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# Advantages and disadvantages of using a simplified diagnostic test

## ➤ **Good sensitivity:**

- False-positive: human error, test done too early
- False-negative: « Hook » effect, very dilute urine

## ➤ **Less secondary surgical aspiration**

## ➤ **Lower cost:**

- For the patients: transportation, day off, babysitting...
- For the hospital: CheckToP<sup>®</sup> = 10-15 euros = 11-17 \$ = 9-13 £

## ➤ **Respecting patients autonomy**

## ➤ **Better compliance**

**Michie, L. and ST. Cameron**

*Simplified follow-up after early medical abortion: 12-month experience of a telephone call and self-performed low-sensitivity urine pregnancy test*  
Contraception 2014

## ➤ **Ignorance of a failure:**

- Unwanted ongoing pregnancy
- Teratogenic effects of MToP

## ➤ **Ignorance of an ectopic pregnancy:**

- Screening before MToP
- Patient information

## ➤ **More unscheduled visits to the abortion/emergency service :**

- Patient information
- All women having an abortion should be able to return for routine follow-up if they so wish.

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# Conclusion

- A single visit with :
  - Pregnancy dating and screening for complicated pregnancies,
  - Counseling on pregnancy termination,
  - Administration of mifepristone with a supply of misoprostol for home use,
  - Instructions on when and how to conduct a pregnancy test,
  - Advice and contact numbers
  - Provision of supplies of effective ongoing contraception

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THANK YOU !