

Psychological outcomes for women following abortion

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Abortion

- Difficult decision
- Different reasons for abortion
- Different gestations & methods
- Different personal, social economic, cultural
- Alternatives childbirth & adoption/ raise child

Mental health and abortion

‘ No effect’

- *‘most methodologically sound studies indicate that severe negative reactions after legal non-restrictive first trimester abortion are rare and can be best understood in the framework of coping with a normal life stress’*
 - American Psychological Association 1989

Gilchrist et al 1995

- Prospective , longitudinal, cohort study RCGP/RCOG, Great Britain
- 13 261 'unplanned' pregnancies (1976-1987)
- Large sample size (n= 6410 abortion)
- Comparison groups (n=6151 not request abortion, n=379 denied abortion, n=321 changed decision)
- Psychosis, depression & anxiety, DSH

Gilchrist et al 1995

- Total psychiatric disorder
- Rates depression/anxiety
- No different abortion and childbirth
- Psychosis less likely following abortion than childbirth (1.1 vs 4.1)
- Women with past psychiatric history increased risk regardless of abortion /childbirth
- DSH higher refused/or abortion cf childbirth ?
Confounding- ?coexisting social difficulties reason for seek abortion

Mental health and abortion

‘ Positive effect’

- *Zabin et al 1989*
- 360 teenagers USA
- Abortion vs. childbirth, 2 yrs later:
- Abortion more likely graduated
- Abortion group better off economically

Mental health and abortion

‘ Negative effect’

- *Fergusson et al 2006* J Youth & Adolescence
- 25 yr longitudinal study (N=630)
- Cohort born 1977, Christchurch, NZ

- 1. Self reported reproductive history 15-25 yrs
- 2. Measures of mental disorders - depression, anxiety, phobia, suicidal behaviour
- 3. Confounding factors- family, child abuse

Abortion group (c.f childbirth group):

- Higher rates of depression
- Suicidal ideation
- Illicit drug dependence
- More mental health problems in total

- Design flaws:
 - 1. Wanted-ness/intention of pregnancy not controlled
 - 2. Multiple abortions not separated from single
 - 3. Likely under-reporting abortion

‘Is there a post abortion syndrome ?
New York Times 2007’

- 1981 Vincent Rue
- ‘Post traumatic stress disorder following stress of abortion’
- ‘Severe and ongoing emotional reaction to an extreme psychological trauma’

Report of APA Task Force on Mental Health and Abortion 2008

- Systematic review , 50 studies since 1989
- English language, peer review articles
- Quantitative data, induced abortion, ≥ 1 post abortion mental health measure
- Abortion vs comparison groups
- N=25 secondary analyses of public data sets/records
- N=19 primary research
- N=6 fetal abnormality

Report of APA Task Force on Mental Health and Abortion 2008

- *Mental health problems* - clinically significant disorders eg. Depression, anxiety disorder, psychosis
- *Negative psychological experiences* eg. Regret, sadness, substance misuse

Questions:

- 1. Does abortion cause harm to mental health?
- RCT- abortion vs deliver = *Not ethical / desirable*
- 2. How prevalent are mental health problems after abortion?
- 3. What is the RR of mental health problems post abortion vs. alternatives ?
- 4. What predicts individual variation in psychological experiences ?

Methodological issues in abortion research

- *1. Comparison and contrast groups*
- Few studies used appropriate groups
- Denied abortion, deliver unwanted, adoption
- *2. Co- occurrence of risk factors*
- Few studies adequately assessed/controlled
- Unwanted pregnancy co-occurs with adverse circumstances and mental health problems
- *3. Sampling*
- Volunteer samples bias, small data sets
- Secondary analyses eg. inaccurate prevalence mental health problems in general population

4. Reproductive history and under-reporting

- Many self report eg. survey data
- Stigma - under-report
- Women most distressed may:
 - -less likely report ? underestimate negative
 - -more likely report ? overestimate
- Under specification of gestation & reason
eg. Later gestation - more pain, complications,
delay-ambivalence, anomaly

5. Outcome measures & statistical analysis

- Some used poor measures mental health
- eg. 'ever abused drugs or alcohol? Yes/No'
- Timing of measurement - varied, unspecified
- Retrospective reporting of health/emotion
- Many focus only on negative outcomes
- Multiple statistical testing
- Loss to follow-up –most distressed lost - underestimate negative effect & vice versa

APA Task Force 2008 Findings

- 1. RR mental health problems in women unplanned pregnancy , **single first trimester** abortion, no greater than if deliver
- 2. **Multiple abortions** equivocal evidence. Risks predispose woman multiple unwanted pregnancies and mental health problems

APA Findings

- 3. Late abortion for **fetal abnormality**
- 6 studies -small sample sizes (23- 83)
- Higher anxiety/ depressive symptoms than healthy child, but similar to late miscarriage
- Less than those deliver undiagnosed child with life threatening abnormalities.

APA Findings

- 4. Differing psychological experiences terminating unwanted vs. wanted.
- 5. Some women do experience sadness, grief, depression, anxiety, but no evidence abortion causal.

APA Findings

- 6. Predictive factors negative psychological response: perceived stigma, low social support, pre existing mental health problems, personality (low self esteem, denial), characteristics of pregnancy, intendedness/wantedness.
- Prior mental health - strongest predictor
- 7. Same factors predict negative psychological response after childbirth.

Conclusion

- Need : Well designed, rigorous scientific research
- Sufficiently large
- Critical variables intended-ness
- Positive and negative psychological
- Disentangle confounding factors
- Establish RR abortion vs. alternatives
- Challenge : diversity, complexity women and circumstances