

ACCESS TO SAFE ABORTION REDUCES THE NUMBER OF COMPLICATIONS AND FINANCIAL COSTS

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Topicality

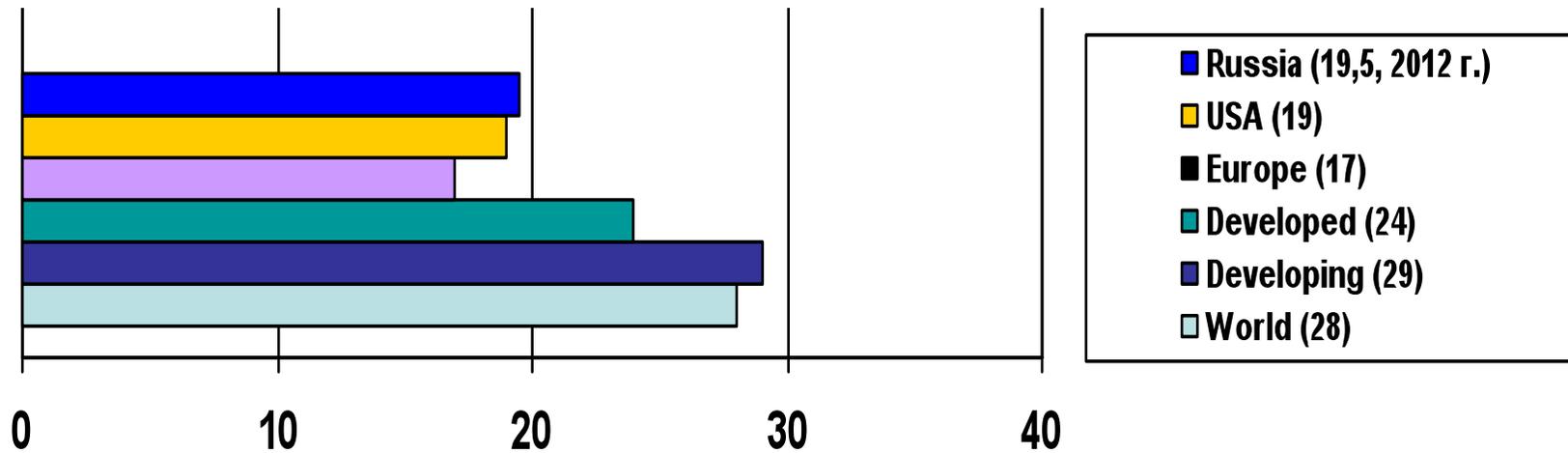
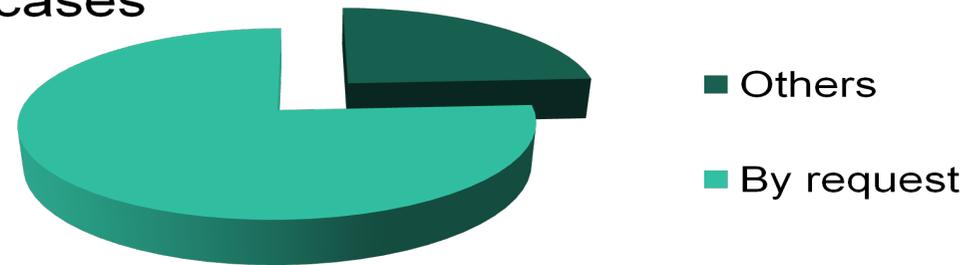


Fig. 1. Abortion rate in the world (WHO, 2008) and in Russia (2012)

935509

cases

Fig. 2. Rate of abortion by request in Russia in 2012



Topicality

The main method of terminating of unwanted pregnancies in Russia remains a dilation and curettage (59,8%, 2012)

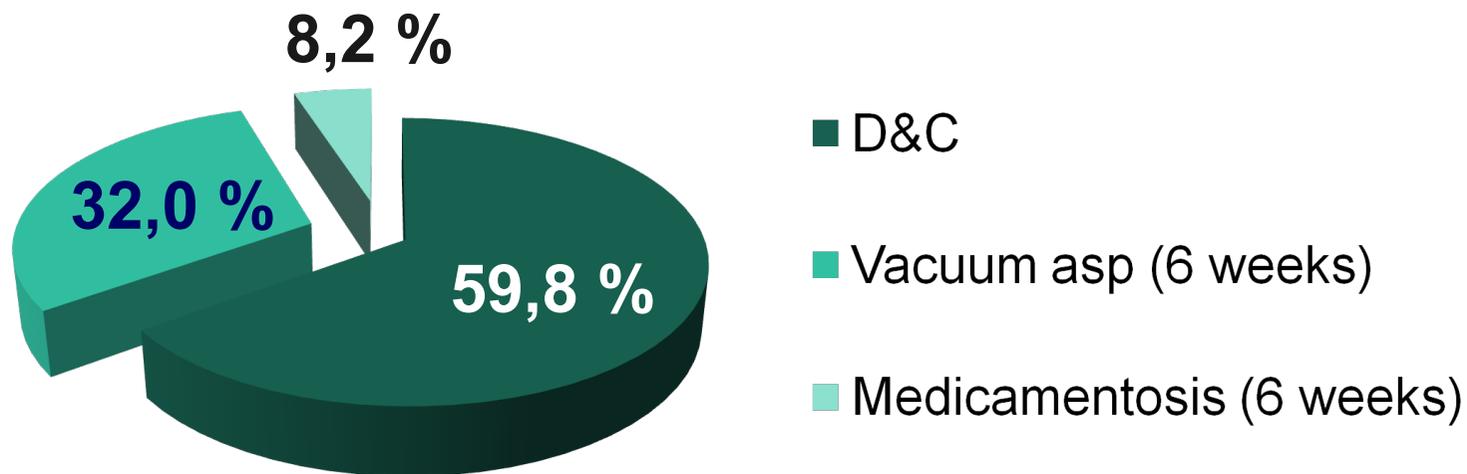


Fig. 2. Structure of the methods of abortion in the 1st trimester

The aim of the research

To evaluate the dynamics of the number of early complications when replacing curettage at Vacuum Aspiration (VA) and Medical Abortion (MA) level and financial costs of their treatment

Material and methods

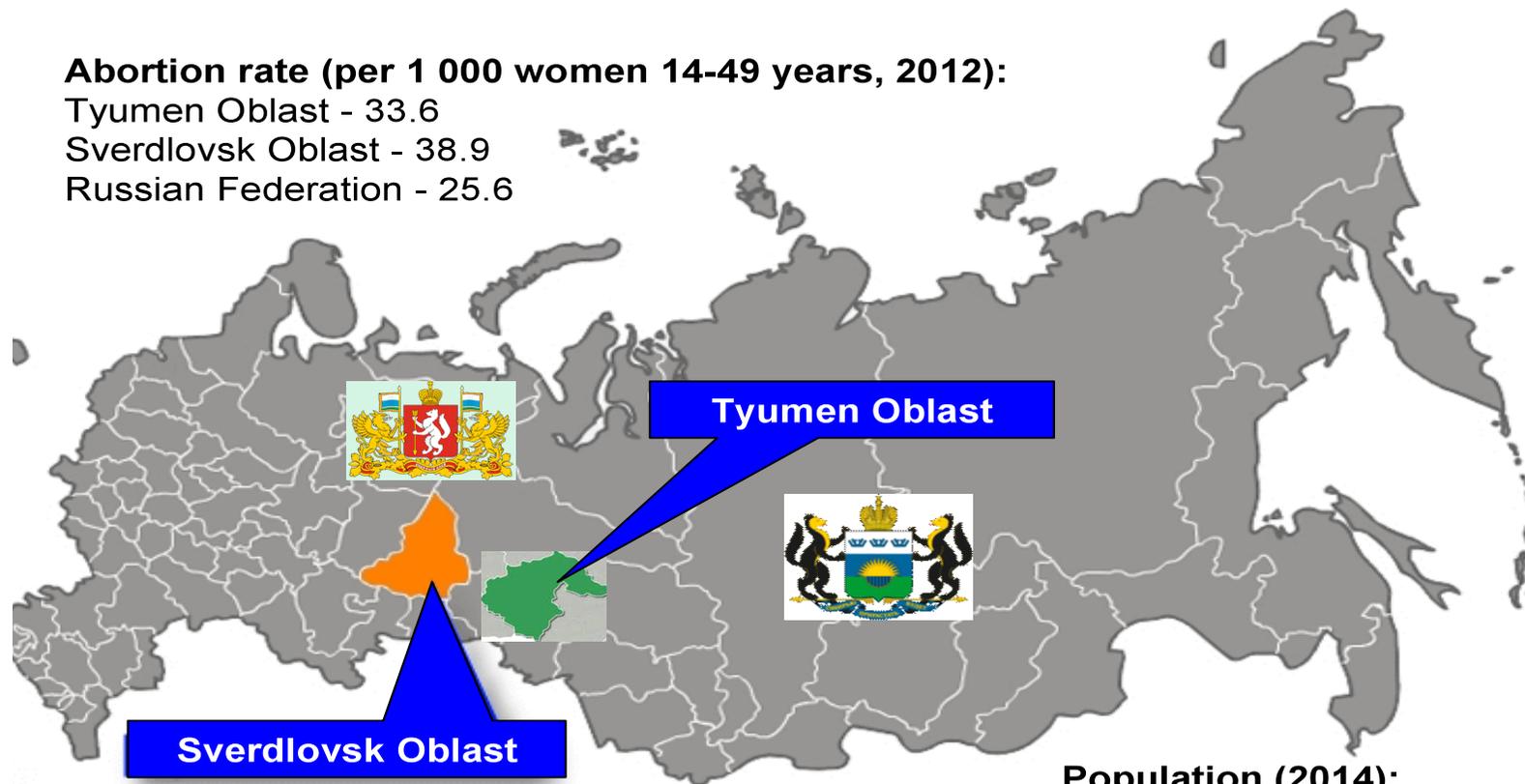
An assessment of these indicators was in the two regions – Sverdlovsk and Tyumen region

Abortion rate (per 1 000 women 14-49 years, 2012):

Tyumen Oblast - 33.6

Sverdlovsk Oblast - 38.9

Russian Federation - 25.6



Population (2014):

Tyumen region - 3,546,345 people

Sverdlovsk region - 4,320,677 people

Fig. 3

Material and methods

In the Sverdlovsk region was implemented method VA in outpatient and inpatient hospitals up to 12 weeks of gestation (n = 2640).

In the Tyumen region introduced the method of using a combination of mifepristone/misoprostol (200 mg/400 µg) up to 42 days of amenorrhea (n=2758).

Preliminary training of doctors was held.

Results

In 2014, in the Sverdlovsk region VA was used in 99.2 % of cases (compared to 45.3% - in 2012). Ambulatory holds 35 % VA, the rest - in the hospitals.

Number of early complications decreased by 15 times (0.3 % vs 6.0 % respectively), mainly due to incomplete abortion and postpartum endometritis.

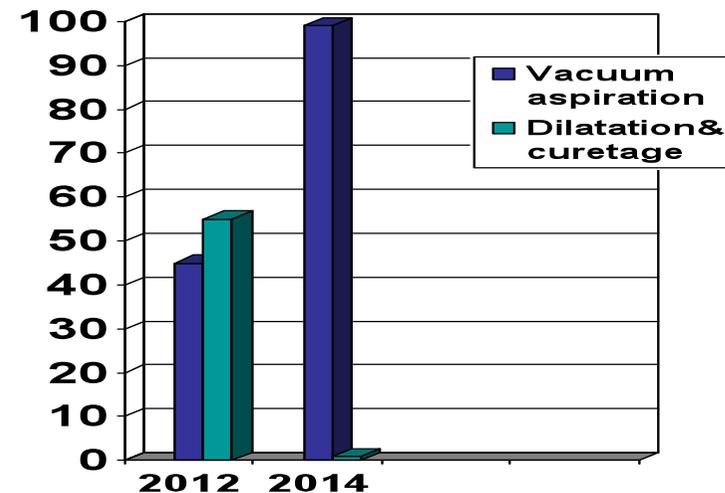


Fig. 4. Dynamics of application of the surgical methods of abortion for 2012-2014, in the Sverdlovsk region? %

Results

- MA in the Tyumen region used in 97% in early pregnancy (6 weeks) that was 34.8% in the structure of all abortions up to 12 weeks.
- Number of early complications decreased by 4 times (3.0 % vs. 11.5% respectively), mainly due to bleeding, hematometra and postpartum endometritis.

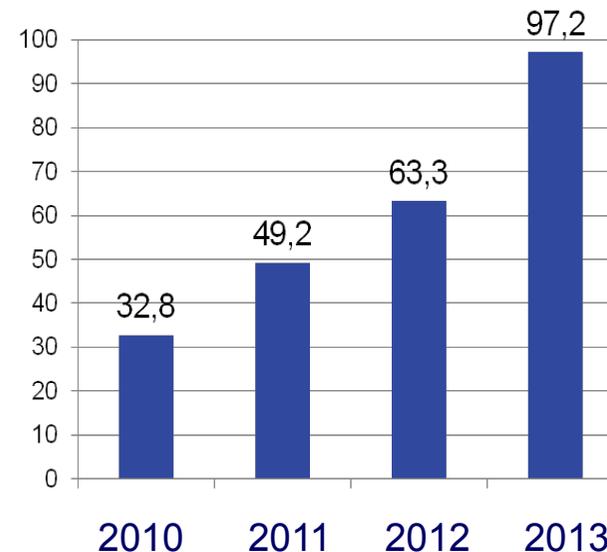


Fig. 5. The share of medical abortion of all abortions in the early period (up to 6 weeks) in Tyumen region (dynamics for 2010-2013 years), %

Results

Tabl

Number of early complications when replacing
curettage (2012) at VA and MA (2014)

Region (the method used)	2012	2014
Sverdlovsk region (VA)	6,0%	0,3%
Tyumen region (MA)	11,5%	3,0%

Results

Lower costs for treatment agencies early complications observed 3 times in both regions.

Cost savings institutions to perform an abortion is 44 % due to the lack of need for inpatient beds, operating, disinfectants, consumables, instruments, medicines, including narcotic drugs, equipment, etc., services of anesthesiologist, nurse-anestezist, operating nurse.

CONCLUSIONS

The introduction of sound technologies and accessibility of abortion contributes to the preservation of reproductive health (reducing complications 15 times for VA and 4 times for MA) and lower financial costs, as the procedure to perform an abortion (2 times), and the treatment of early complications (3 times).