An abortion is when a pregnancy is ended, or terminated.

Sometimes a fertilised egg or embryo is lost naturally. This is known as a spontaneous abortion or miscarriage, and happens in about one in four known pregnancies. Many more occur within the first weeks of pregnancy, before a period is even missed.

An abortion (sometimes called termination of pregnancy) happens when a fertilised egg or embryo is removed from the uterus (womb), either by taking pills to expel the pregnancy, by gentle suction, or with forceps.

In England and Wales, about one in five of all known pregnancies are terminated – about 190,000 a year.

Women in their 20s account for about half, teenagers about one-fifth.

Over half of all pregnancies in under-16s end in abortion.

About 90 per cent of abortions take place very early in pregnancy – in the first 12 weeks (that is, within eight weeks of missing a period).

Worldwide, about 20 million unsafe abortions are carried out every year. About 47,000 girls and women a year die because of unsafe abortions.

Making abortion illegal does not stop girls and women from seeking an abortion.

In countries where abortion is illegal unless it is to save a girl’s or a woman’s life, many risk permanent injury and death through unsafe abortion practices.

That’s why, in the UK, where abortion is legal, most people want it to stay that way.

Abortion is legal in the UK up to the 24th week of pregnancy.

Legal abortion is safer and easier the earlier it is done.

Most abortions are carried out before 13 weeks of pregnancy.

Two doctors need to agree that it is necessary for a girl’s or a woman’s mental or physical health for them to have an abortion.

It can be very difficult to get an abortion in Northern Ireland.

Abortions in the UK must be performed in a National Health Service (NHS) hospital or in a clinic approved by the Department of Health, such as those run by bpas and Marie Stopes International (see back page).

Abortion after 24 weeks of pregnancy is not common.

It can only take place if your life is in danger or if there is a risk that your child would be born with a serious disability.
Abortion is free if you are referred by the NHS. In some areas, over 90 per cent of all abortions are funded by the NHS. In other areas, the percentage is much lower.

There is a wide variation because each health service provider has to decide how much money to spend on local abortion services.

If you are not referred by the NHS, an abortion (under 12 weeks) at a clinic run by a charity, such as bpas or Marie Stopes International, will cost £600 to £700.

The cost at a privately run clinic can be higher.

If you think you are pregnant, or have missed a period, you will need to get a pregnancy test as soon as possible.

You can have a free test at:
- a young people's service
- most NHS walk-in centres (England only)
- some general practices
- many contraception clinics
- some sexual health or genitourinary medicine (GUM) clinics.

You can pay to have a test at a:
- bpas clinic
- Marie Stopes clinic
- pharmacy.

Or you can buy a kit to use yourself.

If there are no problems with the procedure, then having an abortion will not affect your chances of having a baby in the future.

Most girls and women have no problems after an abortion. Of those who do, infection is the most common one. Taking antibiotics at the time of the abortion helps to reduce this risk.

Testing for sexually transmitted infections may be recommended to prevent further infection.

If you are not referred by the NHS, an abortion (under 12 weeks) at a clinic run by a charity, such as bpas or Marie Stopes International, will cost £600 to £700.

The cost at a privately run clinic can be higher.

Signs of pregnancy usually appear one to two weeks after conception.

The signs vary for every girl or woman, but may include:
- missing a period
- a shorter, lighter period than usual
- a swelling or tenderness in the breasts
- frequent urination (peeing a lot)
- feeling tired
- nausea or vomiting – often called morning sickness, though not always in the morning
- feeling bloated or period-like cramps
- appetite changes (going off certain foods)
- mood changes.

No!
It still hasn’t come!

Tut tut! Late again?

You may try to ignore the pregnancy in the hope that it’ll go away! But it won’t…
**Why have an abortion?**

Many pregnancies happen without planning. When you find out you are pregnant and it is unplanned, you may decide to keep the baby, have it adopted or have an abortion.

Some girls and women know immediately what they want to do. For others, it can be a difficult decision. Faced with an unplanned pregnancy, you may find that your views on abortion change. Clear information, advice and support can help you decide what to do.

Many girls and women who choose an abortion have several reasons.

Other reasons for choosing an abortion may be that your husband, partner or parent wants you to have one; you have, or the fetus has, a health problem; or you have been raped.

This may be a difficult time for partners, too. Some will want to share in the decision; others won’t want to be involved at all. Many will support their girlfriend’s or wife’s choice, even if it conflicts with their own feelings. Even where there is no relationship, a man may feel he has a right to be informed.

However, it is up to the girl or woman to decide whether or not to involve the man in her choice. He has no legal right to be informed, or to be involved in her decision.

Women whose partners are pregnant by sperm donation may find it difficult too, if their partner decides not to continue their pregnancy, though many will support her choice.
Once pregnancy has been confirmed, you will need to discuss your choices as soon as possible. It is important to see someone who will encourage you to talk freely about your options and give you accurate information, but not tell you what to do.

You can talk to your own GP or a doctor or nurse at one of the clinics listed on page 16 for specific information and counselling. In Northern Ireland, if you face an unplanned pregnancy, you can contact the FPA helpline for counselling, information and support: 0845 122 8687.

Whenever decision is made, it's important to take action early on – to begin antenatal care if the pregnancy is to continue, or to have an abortion as soon as possible.

All the organisations listed on page 16 are important sources of help, and have useful booklets and websites. Some organisations offer pregnancy tests and counselling but not information on abortion. Only a few help those who are considering placing their baby for adoption.

You may want people to tell you what to do – sometimes it seems easier than having to make your own decision. Talking to people you trust can help, but in the end it is the pregnant girl or woman who has to make the decision.

Whatever decision you make, you will need to see a doctor. This applies to England, Scotland and Wales. If you don't want to go to your GP, or the doctor who confirmed the pregnancy, one of the organisations listed on page 16 can give advice and answer any questions.

A doctor or nurse will:
- work out how many weeks pregnant you are
- talk through the decision and explore your feelings about it
- decide if you are eligible for an abortion
- explain what an abortion involves
- make sure you understand any risks
- consider your general health
- make a note of any regular medication taken (which may cause reactions to anaesthetics).

Once you have decided you want to end your pregnancy, you will need to see a doctor.

If the doctor agrees that you are eligible for an abortion, they will refer you to an NHS abortion service.

Most NHS doctors are sympathetic if you are considering abortion, but some may be unwilling to agree to an abortion because they object to it on religious or moral grounds.

Doctors who object to abortion can refuse to help but must refer you to another doctor or nurse who will help. This can cause delays.

If you need further advice or help you can contact one of the organisations on page 16.

You don't need to tell your partner, or get their agreement, if you want to have an abortion.

A girl under 16 can have an abortion without telling her parents if both doctors believe that she fully understands what is involved. However, the doctor or clinic may strongly suggest that she does involve a parent, a carer or another supportive adult, unless there are exceptional circumstances. The only time a doctor may have to pass on information is when your safety, or the safety of somebody else, is at risk.
## What happens in an early abortion?

There are two methods of early abortion – EARLY MEDICAL ABORTION and SURGICAL ABORTION.

### EARLY MEDICAL ABORTION – otherwise called the abortion pill
- **WHEN** Up to nine weeks
- **WHERE** Two visits to a clinic, 1–3 days apart. Usual activities can be carried out in between appointments. A check-up should be offered 7–14 days after the abortion.
- **HOW IT WORKS** Pills are taken, causing the uterus lining to break down and bleed. At the second visit a tablet or vaginal pessary is given, which softens and opens the cervix (the opening to the uterus). The pregnancy is lost with the bleeding just like a miscarriage – normally 4–6 hours after the second tablet or pessary.
- **DOES IT HURT?** There will be some pain, like period pain – painkillers can be taken. There will be some bleeding, which can be irregular and last a while.

### SURGICAL ABORTION – also known as vacuum aspiration
- **WHEN** Up to 15 weeks
- **WHERE** One visit to a clinic. Most people can go home the same day. If you have a local anaesthetic, you may only need to stay 1–2 hours.
- **HOW IT WORKS** A tube or pump removes the pregnancy by suction. No cutting is required. The procedure usually takes 5–10 minutes.
- **DOES IT HURT?** With a local anaesthetic, which numbs the cervix, there will be some cramps, like period pain. With a general anaesthetic, which means you go to sleep, nothing is felt. After the abortion there may be some pain, like period pain, and bleeding, like a period. This can last for up to 14 days.

## What happens in a later abortion?

There are two methods of later abortion – MEDICAL ABORTION and DILATION & EVACUATION (D&E).

### MEDICAL ABORTION
- **WHEN** From 9–20 weeks
- **WHERE** May need one night in a clinic or hospital, though usually the abortion is complete in a day.
- **HOW IT WORKS** This is similar to an early medical abortion, but the abortion takes longer to complete and more drugs are used.
- **DOES IT HURT?** There may be some strong cramping pains, but painkillers can help with these. Afterwards there may be some pain, like period pain, and bleeding for about a week, or possibly longer.

### DILATION & EVACUATION (D&E)
- **WHEN** After 15 weeks
- **WHERE** Usually one day at a clinic or hospital but possibly an overnight stay.
- **HOW IT WORKS** The cervix is gently stretched to allow narrow forceps to remove the pregnancy. Suction might also be used. No cutting is required.
- **DOES IT HURT?** This is carried out under general anaesthetic. There may be some pain afterwards and bleeding for up to 14 days.
No girl or woman forgets that she has had an abortion, but most who choose an abortion do not regret it. You can experience many feelings after an abortion.

You may feel relieved or feel sad or may have mixed feelings. These are natural reactions. Only a few people have any long-term psychological problems and those who do often had similar problems before pregnancy. It is always important for you to seek help and support if you are feeling upset about having had an abortion.

You can talk to:
- your GP or practice nurse
- a doctor or nurse at a contraception or sexual health clinic
- a young person's clinic
- FPA if you live in Northern Ireland (see page 16).

After an early abortion you can usually return to work, school or college the next day. You should always follow the doctor’s advice. It takes time to adjust emotionally as well as physically, and medication or anaesthetics can cause disorientation for a while. Recovery takes longer after later abortions or after a general anaesthetic.

The clinic will explain what to expect and how to take care. It’s important that you return for any follow-up appointment to make sure the abortion is complete and there are no problems. This appointment can be at the hospital or clinic where the abortion took place, or with the GP, or at a contraception or sexual health clinic.

Abortions funded by the NHS may be more difficult to arrange, depending on the availability of local services.

You can get pregnant again within two weeks of having an abortion.

It is advisable to wait for two weeks after the abortion before having sex – this helps to reduce the risk of infection.

If you don't want to become pregnant again you should start using contraception immediately after the abortion.

Sometimes I wonder what having a baby would have been like. But no, I don't regret it.

I was surprised how sad I felt, but I must admit we were both really relieved.

It was a difficult time for me - not just the abortion. Counselling really helped me.

I just felt very relieved after the abortion. I still do!

I was very relieved after the abortion.
Protection from Unplanned Pregnancy

Unplanned pregnancies happen because people have sex without using contraception, or they use it incorrectly, or it fails.

After sex, sperm can live for up to seven days in a woman’s body. Once an egg has been fertilised, it takes around 5–10 days to implant itself in the uterus.

If you have been having sex without using contraception, or think your method might have failed, there are three types of emergency contraception you can use.

The emergency pill, Levonelle, can be taken up to three days (72 hours) after sex. It is more effective the earlier it is taken after sex. It is available with a prescription, or to buy from most pharmacies if you are 16 or over.

The emergency contraceptive pill, ellaOne, can be taken up to five days (120 hours) after sex. It is only available with a prescription.

An emergency IUD can be fitted up to five days after sex, or up to five days after the earliest time you could have released an egg (ovulation).

The best way to help protect yourself from unplanned pregnancy and sexually transmitted infections is to use a condom and another method of contraception.

If you are having sex and don’t want to become pregnant – or get someone pregnant – make sure that the method of contraception you’re using is right for you. If you don’t like the method you’re using, or don’t think it’s reliable, get advice about changing it – don’t just stop using it!

Get all the information you need to make your choice. You can get free advice about contraception from a doctor or contraception clinic whatever your age. Check out FPA’s website www.fpa.org.uk for information on contraception and details of clinics in the UK.

Condoms are free from contraception and sexual health clinics, and some GPs. They can be easily bought without needing to see a doctor.

There are many methods of contraception and they work in different ways, but mainly by:

- stopping the ovaries from releasing an egg or
- preventing the sperm and egg from meeting.

If you’re not having sex, you should still plan ahead for when you will be – it only takes one sperm to fertilise an egg. It may be awkward to admit that you’re planning ahead for sex, but it’s the best way to avoid unplanned pregnancy.

You can get emergency contraception free from:

- a doctor or nurse
- a contraception clinic
- a young people’s clinic
- a Brook clinic
- some GUM (genitourinary medicine) clinics
- sexual health clinics
- walk-in centres (England only)
- minor injuries units (England only)
- some hospital accident and emergency departments (phone first).
For information on sexual health, sex and relationships visit [www.fpa.org.uk](http://www.fpa.org.uk) or check out these FPA booklets.

These organisations can also give you confidential information and advice.

**BROOK**
[www.brook.org.uk](http://www.brook.org.uk)
For sexual health services and advice for young people.

**your local contraception clinic**
[www.fpa.org.uk/find-a-clinic](http://www.fpa.org.uk/find-a-clinic)
For your nearest contraception or sexual health clinic

**a GP**
If you think your own GP may not be sympathetic you can go to another doctor.

**a private clinic**
You can make a confidential appointment with specialist staff at a consultation centre.

**bpas**
[www.bpas.org](http://www.bpas.org)
08457 304030
For information and advice on unplanned pregnancy.

**MARIE STOPES INTERNATIONAL**
[www.mariestopes.org.uk](http://www.mariestopes.org.uk)
0845 300 8090
For information and advice on sexual health.

If you live in Northern Ireland contact FPA on 0845 122 8687 for information, support and counselling.

**FURTHER INFORMATION**
Education for Choice
[www.efc.org.uk](http://www.efc.org.uk)
Supports young people’s right to informed choice on abortion.