

Your Choices

The Pregnancy Advisory Service is here to help you if you are considering a termination of pregnancy. The team of experienced and dedicated professionals are able to offer advice in a caring and non-judgemental manner and support you in whatever decisions you make. We will not judge you and will always treat you with respect.

Making Your Decision about the Pregnancy

The decision as to whether to proceed with an abortion can be very difficult. It is common to feel a range of different emotions and this can add to the confusion. Whatever you feel, it is important to take time to make a decision that is right for you, but it is also important not to put off your decision as options become more limited and the choices can be even more difficult the longer a pregnancy continues.

It helps if there is somebody you trust who you can talk to and confide in, and it is important to consider how the different options may affect you and your family both now and in the future. However you should not let anybody pressure you into doing something you do not want to do.

In broad terms you have three choices, each with its own dilemmas:

- End the pregnancy by choosing to have an abortion
- Continue with the pregnancy and keep the baby
- Continue with the pregnancy and have the baby adopted

If you are finding it difficult to decide what the best option is, you may find some of the following helpful:

- [“Pregnant and don't know what to do? A guide to your options”](#) is an excellent leaflet that runs through the issues and choices and gives suggestions that may help you come to a decision that is right for you. It is available from the Family Planning Association (FPA) website, or we can give or e-mail you a copy
- Talking in confidence to somebody independent who understands all of the options. The following services can help:
 - Your general practitioner (GP) or practice nurse
 - A family planning or sexual health clinic (e.g. Brook - <https://legacy.brook.org.uk/find-a-service/regions/cornwall>)
 - A young person's service (e.g. Brook - www.brook.org.uk)
- In the clinic an independent counsellor can guide you through the dilemmas to help you to make your choice
- The clinic staff will explain the choices in more detail – but please make sure you ask them about anything you are unsure of and make them aware of any particular concerns

- Please make sure you tell the staff if anybody is putting pressure on you to make a decision – anything you tell us will be in complete confidence, and we can offer you practical help if this is a concern
- Please be aware that some organisations do not offer unbiased advice and may lead women into making the wrong choice for them

Some things to think about in making your choice

(Reproduced with permission from “Pregnant and don't know what to do? A guide to your options”, Family Planning Association):

When you're making your decision, it may be helpful to consider the following things:

- *Your life now.* What is most important to you in your life at the moment? This might involve many things, such as family, friends, work and education
- *Your future.* What are your hopes and aims for the future? You can think about all aspects of your life

How would these things be affected if you decide to:

- continue with the pregnancy and keep the baby
- end the pregnancy by having an abortion
- continue with the pregnancy and have the baby adopted

Another way of thinking about your situation is to consider how the statements below make you feel:

- I feel ready to be a parent and bring up a child
- I don't want to be pregnant
- Having a baby will stop me doing the things in my life that are most important to me
- I do want to have a baby one day but I'd rather wait (because I feel I'm too young, or I'd like to be in a committed relationship)
- I am willing to give up other things in my life in order to bring up a child
- My family would help me if I have a baby
- My family wouldn't approve if I have a baby
- My partner wants to have a baby with me
- I couldn't go through with an abortion
- I agree with abortion
- I'm worried this might be my only chance to have a baby
- I wouldn't be able to give my baby away

Whatever you decide it needs to be right for you.

Your Choice of Procedure

There are currently three types of abortion procedure available though not all of them are suitable for every situation. We can give you more detailed information at the clinic.

Using Tablets – Early Medical Abortion (at home) **Available at the Royal Cornwall Hospital (Truro)**

This is available if you are less than 10 weeks into your pregnancy. We may be able to do all of this remotely via phone-call, otherwise it involves one visit and two follow-up calls by telephone – one call the week after the procedure and the other after two to three weeks. It involves taking some two sets of pills (both orally and vaginally) called misoprostol and mifepristone, usually two days apart. The abortion happens at home. After the second set of tablets most people can expect to pass the pregnancy after 2-8 hours of cramping – you will have to be at home for this. Most people describe a similar level of pain and bleeding to a natural miscarriage, but more than a heavy period, and we recommend you take tablet painkillers which we can provide (e.g. ibuprofen and paracetamol or codeine). A heat pack / hot water bottle can be helpful.

This method is safe and effective but there is a small risk that it will fail or some tissue may be left in the womb requiring further treatment. There is also a risk of bleeding or infection. Rarely the pregnancy continues or is in the wrong place (ectopic) and so it is essential you follow our recommendations for the follow-up; we will organise a pregnancy test and then a telephone review after two weeks. If you have not had a scan, very rarely the pregnancy may be later than your dates suggested in which case there may be more pain, bleeding or chance of the abortion not working. After 9 weeks it may be possible to see a fetus after it's passed.

Advantages – Many patients find it less intrusive than the other options, it avoids the need for an anaesthetic and most patients who choose it are satisfied with the outcome. It is similar to having a natural miscarriage in terms of pain and bleeding.

Disadvantages – The chances of complications are slightly higher than with the other options (e.g. the need for another procedure, the chances of the pregnancy continuing) and there may be more bleeding, pain and tummy upsets.

Having an Operation – Suction Termination **Available at West Cornwall Hospital (Penzance)**

This is available up until 14 weeks into your pregnancy. It is a straightforward procedure which is performed under a full anaesthetic and takes about 10 minutes. It will take place in Penzance. You will be with us for up to six hours and must have someone to drive you home or go with you in a taxi and stay overnight with you. You will not be able to work or drive for the following 24 hours.

While you are asleep the doctor will gently open the entrance to the womb (the cervix) and remove the pregnancy using a suction machine. You can choose to have a contraceptive implant, IUCD (coil) or IUS (Mirena system) fitted at the same time whilst you are asleep.

This method is safe and effective but there is a small risk that some tissue may be left in the womb requiring further treatment. There is also a risk of bleeding or infection and very rarely damage to the womb or cervix requiring further treatment.

Advantages – It is a quick and safe procedure that has fewer complications than medical abortions with less bleeding, pain and tummy upsets. Only one other appointment is necessary for the operation itself.

Disadvantages – It involves a hospital admission and having to have a full anaesthetic which includes having to starve and not being able to drive for 24 hours. You will have to be picked up, and cared for overnight, by a competent adult.

Having a “Walk-in, Walk-out” Procedure – Manual Vacuum Aspiration Available at West Cornwall Hospital (Penzance)

This is carried out under local anaesthetic using gentle suction as a “walk-in, walk-out” procedure using local anaesthetic and is available if you are less than 10 weeks into your pregnancy. It is performed in the purpose-built Penlee Centre at West Cornwall Hospital in Penzance. Although the procedure itself only takes a few minutes, overall the appointment lasts about 45 minutes (or longer if you need a scan) as the local anaesthetic takes time to work and you will need a little time to recover. Most people describe the pain to be similar to that of a natural period. If needed, we can offer you additional “gas and air” pain relief. You can choose to have a contraceptive implant, IUCD (coil) or IUS (Mirena system) fitted at the same time. A friend or companion can be with you throughout if you would like, and there are always nurses who will support you.

This method is safe and effective but there is a small risk that some tissue may be left in the womb requiring further treatment. There is also a risk of bleeding or infection and very rarely damage to the womb or cervix requiring further treatment.

Advantages – It is a quick and safe procedure that has fewer complications than medical abortions with less bleeding, pain and tummy upsets. There is no need for a full anaesthetic and therefore no restriction on driving, or a need to starve. Only one other appointment is necessary for the procedure itself.

Disadvantages – It involves having a local anaesthetic and therefore you will be awake during an intimate procedure

What Happens at the Clinic
Available at the Royal Cornwall Hospital (Truro)

A clinic appointment can take a couple of hours and it may be a good idea to bring someone with you. It is advisable not to bring small children. During the appointment you may meet a Health Care Assistant, a Specialist Nurse and a Doctor and you may need to have a dating scan (this is done by ultrasound and either uses a plastic device placed on your tummy or a thin probe that is placed in the vagina). The clinic staff will need to ensure that the legal requirements are fulfilled and, depending on how far along in the pregnancy you are, will discuss which procedures are safe and available for you.

You will be able to discuss and organise contraceptive choices to use after the termination. We strongly recommend having a swab (which you can do yourself in clinic) for *Chlamydia* (a common sexually transmitted infection) and you may need to have some routine blood tests. An independent Counsellor is available to talk to. The Doctor or Nurse will discuss your options and arrange the time and date for you to return for your procedure. This will not usually be on the same day unless specific arrangements have been made.

We treat privacy very seriously. We do not routinely leave any information in your health record after the abortion is completed. We will only contact your GP if we have your permission. The only reason we might have to consider passing on confidential information without your permission would be to protect you or somebody else from serious harm or where a court orders us to do so – we would always discuss this with you first and offer help and support.

Useful Phone Numbers & Further Information

Direct booking into Cornwall abortion service
(Please e-mail what service you need and give a contact telephone number)
..... kccg.health@nhs.net

Pregnancy Advisory Service Secretary..... 01872 252983

Brook – contraception and sexual health service 0300 303 0714
www.brook.org.uk

Family Planning Association (large collection of on-line leaflets & resources)
<https://fpa.org.uk/professionals/resources/leaflet-and-booklet-downloads>

Cornwall Women’s Refuge Trust..... 01872 225629
www.cornwallrefugetrust.co.uk

Marie Stopes UK (abortion provider for later pregnancies)..... 0345 300 8090
www.mariestopes.org.uk

British Pregnancy Advisory Service (abortion provider)..... 0345 730 4030
www.bpas.org