



Saint Mary's Managed Clinical Service  
Division of Gynaecology

PATIENT INFORMATION LEAFLET

# THE WHITWORTH CLINIC

This leaflet will give you information about the service, treatment, and aftercare to help you through this difficult time.

If there is anything you are unsure of, please ask the staff at any time.

If you feel the need to discuss your decision or explore your thoughts and feelings before or after the termination, there is a counsellor available. You can call to make an appointment on (0161) 276 6283, answerphone is available out of hours, or you can ask a member of staff.

The service is confidential even if you are under 16 years of age. However, if we feel that you or another person may be at risk of harm, we may need to share information with other professionals. We would always discuss this with you.

Please let your nurse know if you do not want your GP to be contacted.

Before a termination of pregnancy can be undertaken, various tests may or may not need to be performed:

**Ultrasound scan** – If you have already had a scan in this pregnancy, please inform the clinic staff prior to your appointment.

**Blood tests** – which may include tests to check you are not anaemic or to check your blood group.

**Sexual health screening** – vaginal swabs and HIV/Syphilis blood screen

Before you proceed with the termination of your pregnancy you will speak with a specialist nurse to complete an initial consultation. The nurse will discuss the choices available to you and answer any questions you have. This is often a virtual consultation carried out via video or phone call. This is to reduce the number of visits you have to make to the hospital. You will also speak with a doctor who will make sure you understand and consent to treatment. This maybe on the same day as you have your nurse consultation or will be arranged for a different day.

At Saint Mary's Hospital, we offer different options for treatment. The option you can choose depends on things such as your medical history, how far you are into the pregnancy and of course personal choice. The nurse will inform you of your options during your consultation. Options are explained briefly in this leaflet.

# In-patient Medical termination

## Early pregnancy – under 10 weeks

This is a two-stage procedure which involves taking two different medicines 36-48 hours apart.

For the first stage, you will need to come to hospital to take a tablet called Mifepristone. This tablet blocks the hormone Progesterone which is needed for a continuing pregnancy and it 'prepares' the uterus (womb) for the next stage. You may go straight home after the first stage

It is possible some women may experience light bleeding/ spotting or mild period type pains after this stage.

You will be asked to return to the Gynaecology ward two days later for the second stage of the treatment.

This involves placing tablets in your mouth between your cheek and your gums for a 30-minute period where they be absorbed through your blood vessels in your cheeks into your bloodstream or if you prefer you can have the tablets inserted vaginally by the nurse caring for you.

These tablets will cause the uterus (womb) to contract and empty so you will have heavy bleeding and period type pain. Women vary in their reaction to this treatment: If you need pain relief, please ask the nurse.

You may also experience some diarrhoea, sickness and hot flushes.

Eventually, you will pass the pregnancy through the vagina. You will need to use a bedpan every time you use the toilet so that the nurses can check that all the pregnancy tissue has been passed.

You will be cared for in a side room for privacy with your own bathroom facilities. You may like to bring someone with you for support as well as books/magazines, snacks and drinks

Please also bring some loose, comfortable clothing, spare underwear and some sanitary towels (not tampons). Unless told otherwise, you will be able to eat and drink normally for both admissions.

The whole procedure will take approximately 4 to 8 hours, but you may stay longer if you do not feel well enough to go home.

Whilst not a requirement, we do advise having someone pick you up from the hospital after treatment or be at home to help support your recovery.

Very occasionally, the pregnancy may not be passed during your admission. If you are well, you may still go home. You will need to return in 7-10 days to have another scan and be reviewed to ensure that the treatment is complete.

## Out-patient

### Early pregnancy – until 9+6 weeks

This procedure is offered to individuals who meet the criteria and wish to go home for the second part of their medical treatment rather than staying on the hospital ward.

This is a two-stage procedure, and the first stage is the same as the in-patient early medical termination stage. However, you will be given the medication to complete your 2<sup>nd</sup> stage of treatment at home rather than return to the hospital.

Please note there may be an option to take the 1<sup>st</sup> part of the treatment medication home to take at an arranged date/time. However, this is subject to change depending on changes in legislation (legal changes) and whether agreed criteria are met.

Your medication pack to take home typically contains the termination medication (6 tablets), pain relief, anti-sickness tablets and a urine pregnancy test. Depending on contraceptive choice some individuals also take the oral contraceptive pill home in their packs.

You will receive clear instructions on how to take each medication and the instructions will be clearly marked on each box. The termination medication is 4 small tablets that we ask for you to place on your lower gums between cheek and gum and to allow them to sit there for 30 mins and be absorbed through the blood vessels in your cheeks into your bloodstream. The tablets will help your uterus (womb) to contract and empty in order to expel the pregnancy, which means you will start to bleed and experience period-like pains. Then 4 hours later you will take a further 2 tablets, swallowing them to complete the treatment.

The procedure usually takes place approximately 4 - 6 hours after having the tablets.

In some cases, the termination may occur earlier or later than the 4 - 6 hours anticipated. During the treatment, some individuals experience heavy bleeding and a lot of pain, while others experience very little bleeding and mild pain. You may also experience some diarrhoea, sickness and hot flushes. This method of termination requires a follow-up appointment.

You will be given a date to take the pregnancy test provided, 3 weeks after your treatment at home, and asked to call the clinic with the result and complete a simple follow up.

**It is important that you complete this follow up to confirm that the treatment is complete.**

Sometimes it may also be necessary for you to have ongoing follow up or attend the clinic for further investigation such as a scan.

## Late pregnancy – 10 to 19 weeks

### In-patient surgical termination

#### General anaesthetic

This method can be used for pregnancies between 8 and 13+6 weeks. You will need to be admitted to the gynaecology ward at Wythenshawe hospital for one day.

You will be advised to have nothing to eat or drink for a set period of time before your operation. Approximately 2-3hrs before the operation you may have tablets to swallow or inserted into your vagina. Some women get period type pain, bleeding or diarrhoea at this stage. You will be escorted to theatre and will be put to sleep with a general anaesthetic for approximately 20 minutes.

Suction is used to empty the uterus (womb). Once you have fully recovered you may go home.

Please arrange for someone to collect you and to remain with you until the next day. You should not drive or operate machinery for 24 hours.

A follow-up appointment shouldn't be necessary. However, we will advise you to take a urine pregnancy test 3 weeks after treatment to ensure it is negative and the procedure is complete. Contact numbers will also be provided should you have any queries or concerns, or your test remains positive.

Every form of surgery has some risk. With this operation, the risks, though small, are:

- Infection of the womb.
- Excessive bleeding.
- Incomplete abortion.
- Perforation of the womb (where a hole is unintentionally made in the wall of the womb).
- Damage to the cervix.

## Out-patient Surgical Termination

### Local anaesthetic

This procedure is called manual vacuum aspiration (MVA), which can be done using local anaesthetic for pregnancies under 11 weeks.

This means we can carry out the procedure with you awake in the clinic and will avoid the need to have a general anaesthetic.

It is a quick and convenient procedure, typically requiring a 3–4-hour hospital visit.

We will give you painkillers and tablets to place in your mouth on your gums (as in the out-patient/early medical options) to help soften and open the neck of your womb approximately 2-3

hours before the procedure. This makes the MVA procedure easier and safer. Some individuals will experience period-like pain, bleeding or diarrhoea during this stage. Local anaesthetic will be injected into the neck of the womb to numb the area.

A small flexible suction tube attached to a syringe will gently be passed through the neck of your womb and the pregnancy tissue will be removed.

The procedure only takes a few minutes and towards the end of the procedure we expect you may have period pains as the womb empties, and it will contract.

There will be gas and air available if you require it. The pain will settle soon after the procedure. However, if you require further pain relief, we can provide it.

Following the procedure, we ask you to eat and drink something to eat and ask you to remain with us for observation for a minimum of 30 minutes.

A follow-up appointment shouldn't be necessary. However, we will supply you with a urine pregnancy test to take 3 weeks after treatment to ensure it is negative. Contact numbers will also be provided should you have any queries or concerns, or your test remains positive.

Although MVA has been proven to be safe, like any procedure, there are some risks:

- There is a small risk of bleeding, and an even smaller risk of severe bleeding, which may result in needing a blood transfusion.
- There is a minimal risk of infection, which can be treated with antibiotics.
- There is a very rare risk of perforating the uterus (hole in the womb).
- You may also feel faint during or shortly after the procedure, but this usually disappears soon after.
- Occasionally we are not able to complete the procedure for reasons such as pain or difficulty passing the suction tube. Alternatives will then be discussed with you.

### **Who cannot have the procedure:**

- individuals with moderate-severe bleeding or pain.
- Individuals showing signs of infection.
- Individuals with large uterine fibroids, uterine abnormalities, or previous surgery to the cervix (such as cone biopsy).

## **Afterwards – Medical and Surgical termination**

### **Bleeding**

You may have some bleeding, like a period for up to 7-21 days. Please use sanitary towels and not tampons during this time.

Your next menstrual period should come 3-8 weeks after the termination

If you have any concerns regarding your pain or bleeding, are passing clots or have a smelly vaginal discharge please contact the Whitworth Clinic or your GP.

In all except the outpatient option, respectful disposal of your pregnancy remains will be undertaken by cremation in keeping with our hospital guidelines and policy. Please ask staff if you require further information or wish to discuss.

You may also go to your GP or attend your local contraception service for advice.

## Sex

You may resume sex when the bleeding has stopped, and you feel ready in yourself.

## Contraception

You could get pregnant straight away! You must use a reliable method of contraception before you have sex again. If you haven't already decided, we can help you choose the method that is best for you.

## Feelings

It is normal to feel a range of emotions after termination of pregnancy. You may feel, relieved, sad, numb, confused, or angry. It is common to feel 'up and down' for a while.

If you need to talk to someone or would like to make an appointment to see our counsellor, then please call us at the Whitworth Clinic.

Saint Mary's Hospital is a large teaching hospital and sometimes we have trainee doctors or nurses present in the clinic. Please let staff know if you do not wish them to be present during your consultation.

## CONTACT DETAILS

If you have any worries, require any further information or clarification, including clarification of terminology, any concerns, or symptoms you wish to report, please do not hesitate to contact us and one of the doctors or nurses will be happy to discuss these with you:

### Central Booking Service


 0345 365 0565 (Daily, 8.00 am - 8.00 pm)

### The Whitworth Clinic

 (0161) 276 6283 (Tuesday – Friday)

If there is no one available to take your call, please leave a message and your call will be returned as soon as possible or if urgent contact the Emergency Gynaecology Unit.

### Emergency Gynaecology Unit (EGU)

 Ward F16 Wythenshawe Hospital (0161) 291 2561 (24 hours 7 days a week)



<https://www.mft.nhs.uk/>

## Useful addresses and contact numbers:

### **NHS**

Information and advice about sexual health, including contraception and sexually transmitted infections (STIs)

[www.nhs.uk/live-well/sexual-health/](http://www.nhs.uk/live-well/sexual-health/)

### **Sexwise**

Sex and Contraception advice

[www.sexwise.org.uk](http://www.sexwise.org.uk)

### **Brook**

Sex and contraception advice

Online advice

[www.brook.org.uk](http://www.brook.org.uk)

Face to face clinics available for young people, please check the website for more details of your local clinic and age restrictions

### **The Northern**

Contraception, Sexual Health and HIV Service

(0161) 701 1555

[www.thenorthernsexualhealth.co.uk](http://www.thenorthernsexualhealth.co.uk)

### **NHS 111**

For urgent medical concerns dial 111  
(24 hours)

### **National Sexual Health Helpline**

Talk to someone about a sexual health issue in strict confidence. 0300 123 7123

(Monday - Friday 9.00 am – 8.00 pm)

<https://www.nhs.uk/worhtalkingabout>