

# Safe and Effective Provision of Abortion Care by Midlevel Providers\*

## BACKGROUND

When performed under proper medical conditions by trained personnel in a hygienic setting, abortion is an extremely safe procedure.

Many countries have policies that limit the provision of abortion services to physicians or physician specialists (obstetrician gynecologists). This restricts women's access to safe services, particularly in non-urban settings.

Task sharing abortion-related services between physicians and midlevel providers—trained health-care providers such as midwives, nurses and physician assistants—is becoming a key strategy to increase access to safe abortion care.



## WHAT THE EVIDENCE SHOWS

A systematic review of 8,908 first-trimester vacuum aspiration and medical abortions—with one group performed by midlevel providers and the other performed by physicians—concluded: “Safety and efficacy outcomes...did not differ significantly between providers.”

**Trained midlevel providers can provide first-trimester vacuum aspiration abortion as safely and effectively as physicians.** Multiple cohort studies and clinical trials in the United States, India, Vietnam and South Africa all show that when vacuum aspiration is performed by nurse midwives, nurses, nurse practitioners, physicians assistants or other cadres of providers, the safety and efficacy is no different than when it is performed by physicians.

**Trained midlevel providers can provide first-trimester medical abortion as safely and effectively as physicians.** A randomized control trial of 1,104 women seeking abortion at less than nine weeks gestation in Nepal compared the efficacy and safety of medical abortion when performed by physicians compared to nurses and auxiliary nurse midwives. The women in both groups had equivalent rates of successful abortions. There were no serious complications reported in either group.

\* Ipas recognizes the concerns raised by the term “midlevel,” which can be wrongly interpreted as implying that these clinicians provide care that is of a lower standard than the care rendered by physicians. Whenever possible, we refer to the specific cadres under discussion, and use the term “midlevel” only when discussing these providers collectively or to be consistent with terminology used by some international bodies.

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“Abortion care can be safely provided by any properly trained health-care provider, including midlevel (i.e. non-physician) providers...(e.g. midwives, nurse practitioners, clinical officers, family welfare visitors, and others).” —World Health Organization, 2012

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