

## INDICATIONS AND REGIMENS FOR MISOPROSTOL USE

### INCOMPLETE ABORTION

Misoprostol dose	Route	Timing
600mcg	Oral	Three 200mcg tablets taken at once (single dose)
<b>OR</b> 400mcg	Sublingual	Two 200mcg tablets under the tongue until they dissolve or for 30 minutes; swallow any remaining fragments. (Single dose)

### MISSED ABORTION / ANEMBRYONIC GESTATION

Misoprostol dose	Route	Timing
800mcg	Vaginal	Single dose
<b>OR</b> 600mcg	Sublingual	Give every 3 hours for a maximum of 3 doses <b>OR</b> Single dose*

\* Sublingual misoprostol 600mcg sublingually every 3 hours for a maximum of 3 doses is one recommended regimen; a single sublingual dose of misoprostol 600mcg may also be used if left to work for 1-2 weeks (unless there is heavy bleeding or infection)

## PREVENTION OF POSTPARTUM HEMORRHAGE<sup>5</sup>

Misoprostol dose	Route	Timing
600mcg	Oral	To be taken immediately after delivery of newborn. Exclude second fetus (twin) before administration.

## TREATMENT OF POSTPARTUM HEMORRHAGE (≥500ml BLOOD LOSS).

Conventional oxytocics should be used over misoprostol, if available.

Misoprostol dose	Route	Timing
800mcg	Sublingual	STAT
<b>OR</b> 1000mcg	Rectal	STAT

## INDUCTION OF LABOR

Caution with previous cesarean section

Misoprostol dose	Route	Timing
25mcg	Vaginal	Every 4 hours (up to 6 doses with careful monitoring)
<b>OR</b> 20mcg (dissolve 200mcg tablet in bottle of 200ml clean water. Give 20ml per dose.)	Oral	Every 2 hours (up to 12 doses with careful monitoring). Shake the solution in the bottle well before each dose. Discard bottle after 24 hours.