

Medical abortion with mifepristone and misoprostol

BEFORE 13 WEEKS GESTATION:

- Mifepristone 200mg orally
- Misoprostol 800mcg buccally, sublingually, or vaginally 1–2 days after mifepristone. The dose of misoprostol can be repeated to achieve abortion success.
- After 9 weeks gestation, routinely using at least two doses of misoprostol, administered 3–4 hours apart, improves abortion success rates.

AT OR AFTER 13 WEEKS GESTATION (13–24 WEEKS):

- Mifepristone 200mg orally
- Misoprostol 400mcg buccally, sublingually, or vaginally 1–2 days after mifepristone. The dose of misoprostol should be repeated every three hours until fetal and placental expulsion.
- The median time to abortion is 6–10 hours after beginning misoprostol, although some individuals will require more time to successfully abort.

Medical abortion with misoprostol only

BEFORE 13 WEEKS GESTATION:

- Misoprostol 800mcg buccally, sublingually, or vaginally every three hours until expulsion.
- Individuals undergoing misoprostol-only medical abortion outside of a health facility should be provided with 3–4 doses of misoprostol depending on the scenario.

AT OR AFTER 13 WEEKS GESTATION (13-24 WEEKS):

- Misoprostol 400mcg buccally, sublingually, or vaginally every three hours until fetal and placental expulsion. Vaginal dosing is more effective than other routes
- The average time to abortion is 10–15 hours after beginning misoprostol, although some individuals will require multiple days to successfully abort.

Medical treatment for incomplete abortion, missed abortion, or intrauterine fetal demise (postabortion care)

LESS THAN 13 WEEKS UTERINE SIZE:

- Incomplete abortion
 - Misoprostol 600mcg orally in a single dose or 400mcg in a single dose buccally, sublingually or, in the absence of vaginal bleeding, vaginally
- Missed abortion
 - Misoprostol 800mcg buccally, sublingually or, in the absence of vaginal bleeding, vaginally every three hours until expulsion (generally 1–3 doses)
 - Where available, add pretreatment with mifepristone 200mg orally 1–2 days before misoprostol

13 WEEKS OR LARGER UTERINE SIZE:

- Incomplete abortion
 - Misoprostol 400mcg buccally, sublingually or, in the absence of vaginal bleeding, vaginally every three hours until expulsion
- Intrauterine fetal demise (up to 24 weeks):
 - Misoprostol 400mcg buccally, sublingually or, in the absence of vaginal bleeding, vaginally every 4–6 hours until expulsion
 - Where available, add pretreatment with mifepristone 200mg orally 1–2 days before misoprostol

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