

# Misoprostol Saves Women's Lives

Information for Women  
about Misoprostol



**Women on Waves**

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## BACKGROUND

### Why is Information about Misoprostol Needed?

Misoprostol tablets are on the list of essential medicines of the World Health Organization (WHO). Misoprostol can be used by women themselves to save their lives.

Misoprostol causes contractions of the womb. Misoprostol can be used to:

- Induce a safe abortion
- Treat an incomplete miscarriage
- Prevent and treat heavy bleeding after giving birth
- Induce birth

#### 1. **Abortion is the one of the most common medical interventions in the world.**

According to the World Health Organization, 42 million women each year choose to have an abortion for many different reasons. Abortion is one of the most common medical procedures for women around the world. Yet many women do not have access to safe abortion services and are forced to risk their lives and health. Unsafe abortion is a leading cause of maternal mortality. 1 in every 300 women who have an unsafe abortion dies as a result. Globally, around 67,000 women each year die unnecessarily. Many more women suffer long-term complications such as infertility and chronic pain.

Information about safe abortion options helps women to protect their lives and health, especially in countries where Misoprostol is easily available. Abortion using Misoprostol has been shown to be safe and effective 80-85% of the time if taken during the first 9 weeks of pregnancy. It is far safer than any of the unsafe methods that women use when desperately trying to end an unwanted pregnancy.

2. **Heavy bleeding after giving birth (Postpartum hemorrhage, PPH) is one of the main causes of women's death after giving birth (25%).** 14 million women experience bleeding after birth annually and 100,000 women each year die as a result. In other words: 1 in 10 women will have PPH after giving birth and of 1 of each 100 women who have PPH will die as a result. Using Misoprostol immediately after giving birth reduces the risk of heavy bleeding by 50%.

3. **Incomplete miscarriage can cause heavy bleeding and infection** and can easily be treated with Misoprostol to prevent complications. This is usually done by a doctor, but women themselves can also use Misoprostol to treat an incomplete miscarriage.

4. Misoprostol **to induce birth** should only be done under medical supervision and not by women themselves. This manual will not address using Misoprostol to induce birth.

Misoprostol is inexpensive, widely available, heat-resistant and can be kept for years. Misoprostol is sold under the name Cytotec, and in Eastern African countries can be found under names Misotac, Isovent.

### **Principles of the Training Project**

This manual includes information that women need to have safe birth and safe abortions. The goal of the Training Project, which includes this manual, is to ensure that all women know what they can do themselves to protect their reproductive health. Women on Web believes that well-informed volunteer counselors without medical training, backed up by medical professionals, can provide women with the information that they need to use Misoprostol to make birth and abortion as safe as possible. Therefore, this manual also includes information that can be used to train volunteer counselors to inform women about using Misoprostol.

- To prevent heavy bleeding after giving birth (PPH)
- To give women information about how to do a safe abortion by themselves

These well-trained volunteers can then distribute the information in communities. Volunteers cannot give expert medical information, but can be an excellent resource for answering women's questions about safe birth, abortion and reproductive health and a referral source to help women find the expert care that they need. Volunteers can also work at the community level to ensure that pharmacies carry Misoprostol.

### **Legal Rationale**

Article 19 of the Universal Declaration of Human Rights states, "Everyone has the right to freedom of opinion and expression; this right includes freedom to hold opinions without interference and to seek, receive and impart information and ideas through any media and regardless of frontiers."

As the volunteers are based in countries where abortion is illegal, it is important to understand why their activities do NOT violate the penal code. Volunteers are trained to give information, not to encourage women to perform an illegal act. Therefore volunteers are protected from being prosecuted for inciting, participating in or as an accessory to a crime. In almost every country there are exceptions that allow abortion to save the life and/or health of the woman. It is important to frame arguments that clearly show how giving information about abortion is saving women's life and/or health.

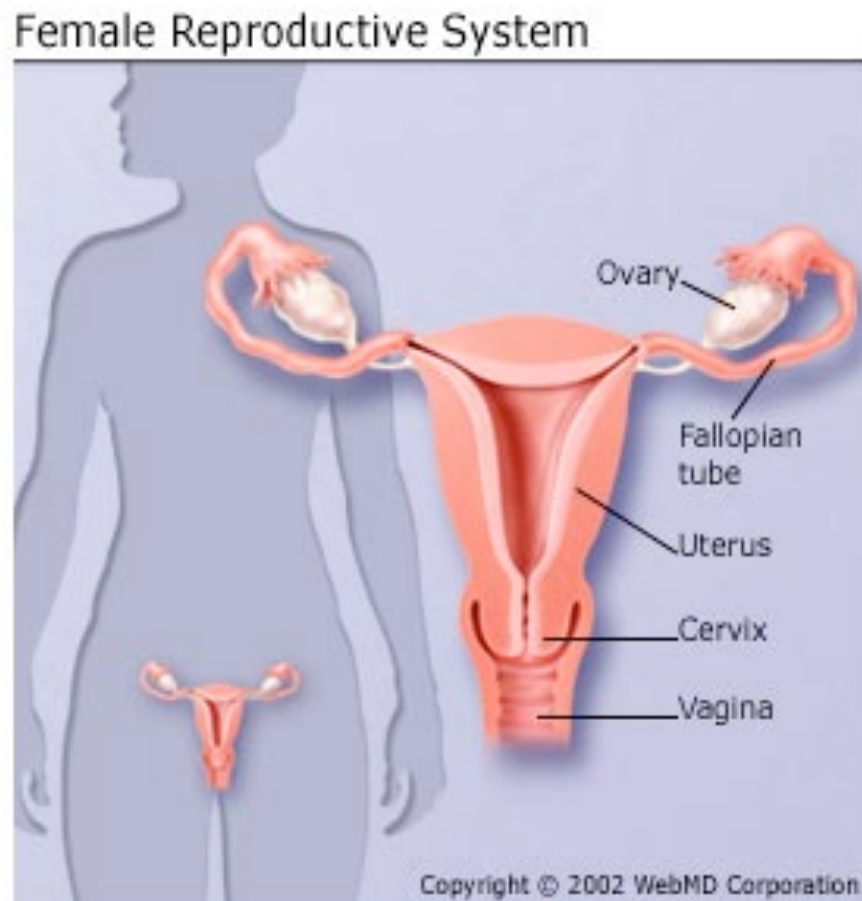
## BASIC KNOWLEDGE

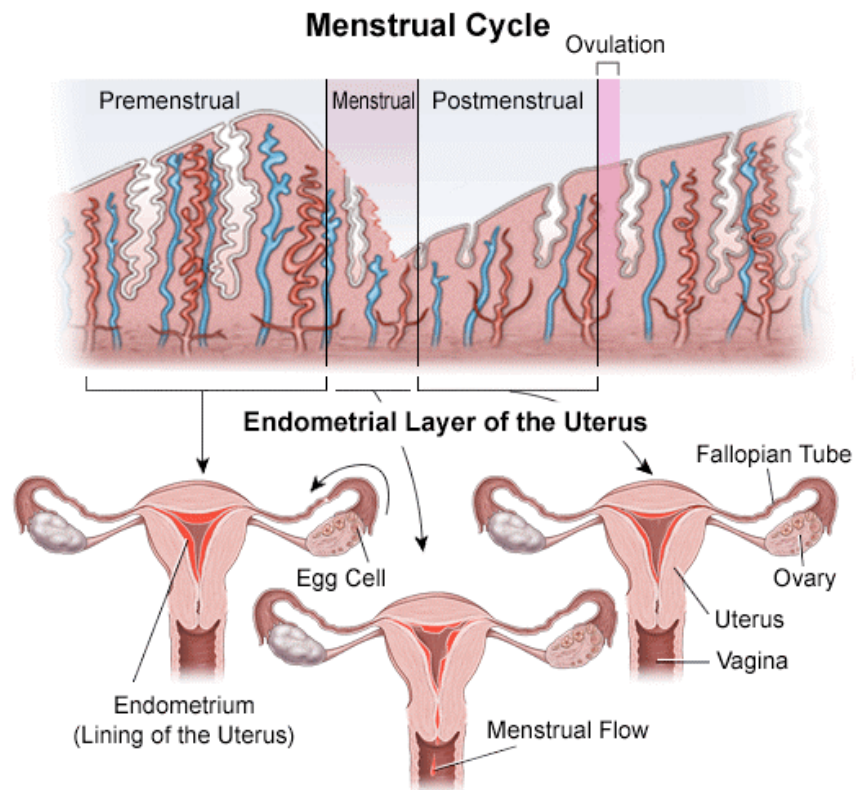
### Menstruation

When a young woman reaches puberty, she begins to ovulate - a process in which an egg cell is released from one of the ovaries. Pregnancy can happen if the woman has sex and the sperm of a man fertilizes the egg. A woman is generally most fertile (able to become pregnant) a few days before, during, and after ovulation.

During menstruation the lining of the uterus is shed with blood through the vagina. This usually happens 14 days after the ovulation when the woman has not become pregnant. As the average menstrual cycle lasts 28 days (starting with the first day of one period and ending with the first day of the next menstrual period), most women ovulate on day 14. Women may have cycles as short as 23 days, or as long as 35 days. Stress, various types of strenuous exercise, and diet can affect the onset of menstruation and the regularity of the menstrual cycle.

**A woman can get pregnant at any point in the menstrual cycle!**





## Contraceptives

About 85% of sexually active women who do not use contraceptives become pregnant within a year. A woman can get pregnant while breastfeeding and within 10 days after childbirth and even during her menstruation. Withdrawal of the penis prior to ejaculation during intercourse and periodic abstinence does not prevent pregnancy.

An unwanted pregnancy can be prevented by

- 1- Practicing total abstinence
- 2- Use of contraceptives. No method of contraception gives 100% protection.

Contraceptives used by the woman:

- The diaphragm is available by prescription only and must be sized by a health professional.
- Oral contraceptives (birth control pills) protect against pregnancy by the combined actions of the hormones. The pills have to be taken every day as directed and do not work after vomiting or diarrhea.
- Depo-Provera is a hormonal contraceptive injected into the arm or buttock every three months. The injection must be repeated every 3 months.
- Implants are made up of small rubber rods, which are surgically implanted under the skin of the upper arm, where they release contraceptive hormones.

- The IUD is a T-shaped device inserted into the uterus by a health-care professional. It can also prevent unwanted pregnancy after unprotected sex if inserted within 5 days of unprotected intercourse. The IUD can stay in place for 5 to 10 years.
- Sterilization is done surgically. It is a permanent form of contraception.

Emergency contraception must be taken within 72 hours of unprotected sex in order to prevent an unplanned pregnancy. A woman can take the official morning after pill called Norlevo. Also, most combination (estrogens and progesterone) birth control pills (oral contraceptive pills) can be used for emergency contraception. To use the pills, within 72 hours of unprotected sex, the woman should take one dose of 100 µg ethinylestradiol + 500 µg levonorgestrel (2-4 birth control pills). 12 hours later she should take a second dose of the same pills (2-4 birth control pills).

For the man:

- Condoms can be used only once. Condoms are the most effective method for reducing the risk of infection from the viruses that cause AIDS and other sexually transmitted diseases (STD's) and are 86% effective in preventing pregnancy.
- Sterilization is a quick operation performed under local anaesthesia. The ability to get an erection and an ejaculation does not disappear.

### **Sexually Transmitted Diseases (STDs)**

A Sexual Transmitted Disease (STD) is almost always the consequence of sex without using a condom. The symptoms may include:

- A yellow-green or gray vaginal discharge
- Abnormal discharge from vagina or penis
- Discomfort during intercourse
- Painful intercourse
- Vaginal odor
- Abdominal pain
- Bleeding between menstrual periods
- A painful or burning sensation when urinating
- Irritation and itching of the female genital area
- A sore on the penis, the vulva, the vagina, the cervix, tongue, lips, or other parts of the body
- Warts on the penis, vagina, cervix, anus and scrotum
- Fever

However sometimes a person has no symptoms at all.

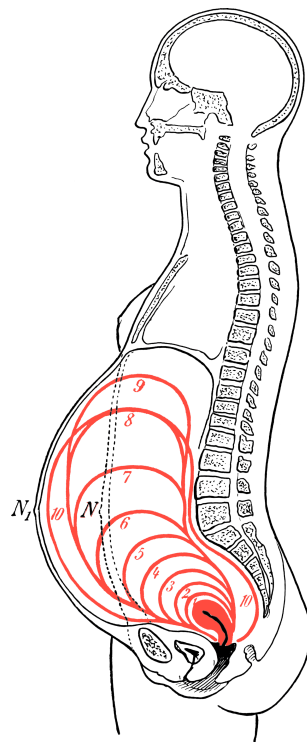
## High Risk Sex or Rape

After high risk sex (or rape) a woman can reduce the risk of getting HIV/AIDS by using medicines that are called "**post-exposure prophylaxis**" or **PEP**. However, PEP is not available in many places. If PEP is available, the woman must start taking the medicine as soon as possible after the rape. If more than 72 hours (3 days) have passed since she was raped, it is too late for these medicines to reduce the risk of getting HIV. PEP may never be considered 100% effective. The woman should also take antibiotic medicines to prevent her from getting a Sexually Transmitted Infection (STI). Emergency Contraception (or the "morning-after" pill) must be taken within 72 hours of unprotected sex in order to prevent an unplanned pregnancy.

## Pregnancy

A woman knows she is pregnant when she misses her menstrual period. She may experience nausea and vomiting, excessive tiredness and fatigue, craving for certain foods, and frequent urination, particularly during night.

Pregnancy can be determined by a pregnancy test that determines the presence of a hormone (HcG) in the blood or in the urine. A woman can make a reasonable calculation of about how long she has been pregnant. She must figure out when the first day of her last menstrual period was, include that day and start counting up until today. The size of the womb can also be used to estimate the duration of pregnancy.



**Changes in size of womb (uterus) during pregnancy**



## Birth

Normal childbirth takes place between 37 weeks and 42 weeks after the last menstrual period.

If the pregnancy is normal a woman can give birth at home with the help of a skilled birth attendant. Unfortunately a skilled birth attendant is not always available and sometimes a woman is alone or with somebody who is not experienced in guiding a birth process. If a woman has experienced complications during the pregnancy, she should always give birth in a hospital.

A woman is considered to be in labor when she begins experiencing regular uterine contractions. If the birth takes very long and the baby can't get out, the woman has to be sent to a hospital to give birth under medical guidance. A woman may undergo a cesarean section.

After the baby is born, women might experience heavy bleeding. The main reason for heavy bleeding after giving birth is that the womb does not contract (70-90%). Misoprostol causes contractions of the womb that help the placenta to get loose from the womb and get expelled. Only after the placenta is expelled can the womb contract fully.

## Trainer's Notes:

**Key points:** how misoprostol works, what can misoprostol be used for, basic facts maternal health, menstruation cycle, types contraceptives, how recognize STI, how calculate duration pregnancy.

After presenting the information about basic reproductive health, highlight the key points by asking your audience to answer the following questions, as a large group or in small groups. This can be done after each topic or after presenting all of the basic reproductive health information.

1. **How many days is the average menstrual cycle?** Answer: 28 days
2. **Can the cycle be longer or shorter?** Answer: The cycle can vary from 23 to 35 days
3. **When in the cycle can a woman become pregnant?** Answer: Anytime in the cycle!
4. **Can a woman get pregnant when she is breastfeeding?** Answer: Yes
5. **Can a woman get pregnant when she is menstruating?** Answer: Yes
6. **How can a woman avoid becoming pregnant?** Answer: Abstinence or use of contraceptives
7. **What contraceptive methods are available to men and women locally?**
8. **What is PEP?** Answer: Post-exposure prophylaxis which can help women reduce the risk of getting HIV/AIDS if taken within 72 hours after rape or unwanted sex.
9. **Is PEP available at local hospitals or clinics?**
10. **How can a woman know if she is pregnant?** Answer: A pregnancy test or an exam by a doctor
11. **How can a woman count/calculate the number of days she is pregnant?** Answer: She must figure out when the first day of her last menstrual period was, include that day and start counting up until today.
12. **How many weeks is a woman pregnant before she gives birth?** Answer: Normal childbirth takes place between 37 weeks and 42 weeks after the last menstrual period.
13. **Is a birth at home safe?** Answer: If the pregnancy is normal a woman can give birth at home with the help of a skilled birth attendant. If a woman has experienced complications during the pregnancy, she should always give birth in a hospital.

## PREVENTION OF PPH WITH MISOPROSTOL

Heavy bleeding after giving birth (Postpartum hemorrhage, PPH) is one of the main causes of women's death after giving birth (25%). 14 million women experience bleeding after birth annually and 12,000 women each year die as a result. If a woman gives birth in a hospital, medicines are available to treat PPH.

In a home birth, it is possible to prevent PPH in 60% of the cases if Misoprostol is used after the child has been born but before the placenta is out. Misoprostol causes contractions of the womb.

**A home birth kit should contain:** sterile scalpel (or shaving knife), 2 very clean threats, and three tablets of misoprostol.

A woman can use Misoprostol by herself or have anybody present at the birth help her, by following these 4 steps:

**1.** Immediately after giving birth, **dry the baby** and put it on the belly of the mother or close to her breasts if she wants to breastfeed (HIV positive women should not breastfeed as it increases the risk of infection for the baby). Cover the head of the baby with a warm cloth or blanket

**2. Within 1 minute** after the baby is born:

- **Feel the belly** to make sure there is not another baby in the womb (twins). It is dangerous to use misoprostol if there is another baby because it can cause rupture of the womb!!
- **Put 3 Misoprostol tablets of 200 mcg** under the women's tongue. She should let the tablets dissolve for 30 minutes before swallowing.
  - the womb will contract.
  - The woman may experience fever/chills, nausea and vomiting, diarrhea, or cramps.

**3- Clamp the cord** (with the clean threats) and cut umbilical cord with sterile scalpel and wait for the placenta to come out.

**4- Massage the womb** (at the top end) after the placenta comes out until it is contracted (feels like hard ball). Do this every 15 minutes for the next 2 hours.

If the woman starts bleeding heavily, she can use an extra 4 tablets of misoprostol under the tongue to try stop the bleeding (treatment for PPH).

*Always transport the woman to a hospital as soon as possible if:*

- the placenta is not expelled within 30 minutes.
- a woman starts or continues to lose a lot of blood after using Misoprostol.

## Trainer's Notes:

**Key points:** misoprostol causes the womb to contract, within 1 minute after birth, first feel belly if no other baby, 3 tablets misoprostol, massage womb

After presenting the information about using misoprostol for safe birth, highlight the key points by asking your audience to answer the following questions, as a large group or in small groups. You can also ask some of the questions #30-41 in the “Q & A” section, or have your group break into smaller groups to work on the “Q &A” section themselves.

### 1. What is PPH/Post-partum hemorrhage?

Answer: Heavy bleeding after giving birth which can cause the woman's death.

### 2. What are the 4 steps for using Misoprostol to prevent PPH?

Answer:

1. Dry the baby and put it on the belly of the mother
2. Within 1 minute after the baby is born:
  - Feel the belly to make sure there is **not another baby** in the womb (twins)
  - Put 3 Misoprostol tablets of 200 mcg under the women's tongue. She should let the tablets dissolve for 30 minutes before swallowing.
- 3- Clamp the cord and wait for the placenta to come out.
- 4- Massage the womb after the placenta comes. Do this every 15 minutes for the next 2 hours.

### 3. When must the woman go to the hospital?

Answer:

- The placenta is not expelled within 30 minutes.
- A woman starts or continues to lose a lot of blood after using Misoprostol

### 4. Why should you not use misoprostol if there is another baby?

Answer: It can cause rupture of the womb

## SAFE ABORTION WITH MISOPROSTOL

Using Misoprostol alone to cause an abortion will be successful 80-90% of the time, according to research done by the World Health Organization.

Women who are sure that they want to end their pregnancy and really have no other means should study the instructions carefully first. It is best to discuss the directions with a friend so that the woman completely understands how to use Misoprostol.

Misoprostol causes contractions of the womb. As a consequence, the womb pushes out the pregnancy. The experience and risks of an abortion caused by Misoprostol are similar to those of a spontaneous miscarriage. Miscarriage happens spontaneously in 10% of all pregnancies.

### Precautions

*1- A woman should never do this alone.*

While having the abortion, it is important to have someone close by; this can be the partner, a friend or a relative who knows about the abortion and who can help in case of complications. Once the bleeding starts, someone should stay in contact with the woman to be able to help in case complications occur.

*2- Woman should not do a medical abortion herself if she is more than 12 weeks pregnant*

A pregnancy of twelve weeks means 84 days after the first day of the last menstrual period. A woman can make a reasonable calculation of how long she has been pregnant. She must figure out when the first day of her last menstrual period was, include that day and start counting up until today. If a woman thinks she has been pregnant for more than 12 weeks, or if the ultrasound shows she is more than 12 weeks, she should not do a medical abortion herself.

*3- Misoprostol should only be used without medical guidance when a woman has no serious illness.*

Most illnesses are not a contraindication for medical abortion. Some serious illnesses, such as severe anaemia, can create problems because of the heavy blood loss involved. Serious illnesses are sometimes a reason for a legal abortion, even in countries with restrictive laws.

If there is a risk of a sexually transmitted infection such as Chlamydia or Gonorrhoea, arrange an examination with a doctor so that the infection can be treated properly. Women with HIV can use Misoprostol safely, but they might be at slightly bigger risk of anemia or infection. Therefore they should use antibiotics when using Misoprostol.

Misoprostol should also not be used when there is a possibility of an ectopic (or extra-uterine) pregnancy. Doctors treat women for this condition in all countries, even in countries where abortion is illegal. An ectopic pregnancy cannot be treated with Misoprostol.

*4- A woman should not have an IUD in the uterus.*

Misoprostol should not be used if the woman has an intrauterine device (IUD), It is very unlikely though that a woman would be unwontedly pregnant when using IUD as IUD is very effective. The IUD should be taken out before using misoprostol.

*5- Misoprostol should only be used when transportation to a hospital within a few hours is possible. That way, if complications occur, medical aid will be near.*

*6- The woman is choosing abortion of her own free will and is not being forced.*

### **How Women Can Get Misoprostol**

Some local pharmacies carry Misoprostol. Sometimes it is sold over the counter without a prescription. Sometimes the pharmacist asks for a prescription. Misoprostol is sold in many countries under the name Cytotec, and in Eastern African countries can be found under names Misotac, Isovent (they are usually much cheaper). Each pill should contain 200 mcg of misoprostol. Sometimes these brands have different prices. Different prices do not reflect quality of pill (they are all the same). A woman can safely buy the cheapest available product.

If there are problems getting the medicines in one pharmacy, try another pharmacy, or ask a male friend or partner because they might have fewer problems obtaining the medicines. Or, perhaps, you can find a doctor willing to prescribe them. Usually one can expect more luck at the smaller pharmacies. If a pharmacist asks a woman why she needs the medicine, she can say that her sister or her friend is giving birth and she urgently needs it to prevent heavy bleeding.

Sometimes the medicines can also be bought on the black market. However, try to make sure that it really is Misoprostol and not fake or some other medicine! The woman should buy at least 12 pills of 200 mcg Misoprostol.

## How To Use Misoprostol for Safe Abortion

- 1- A woman should put 4 pills of 200 micrograms (in total 800 mcg) Misoprostol under the tongue. Do not swallow the pills for at least 30 minutes until the tablets are dissolved!**
- 2- After 3 hours she should put another 4 pills of Misoprostol under the tongue. Do not swallow the pills for at least 30 minutes, until the tablets are dissolved!**
- 3- After 3 hours she should put another 4 pills of Misoprostol under the tongue again for a third time. Do not swallow the pills for at least 30 minutes, until the tablets are dissolved!**

The success rate is 80%-90%. This means that 8 to 9 women in every 10 women will have a safe abortion after this procedure.

### Normal Effects of Misoprostol

After the first dose of Misoprostol a woman can get:

1. Cramps and pain. If a woman wants to relieve the pain, she can use painkillers such as Paracetamol (Tylenol, acetaminophen) or Ibuprofen.
2. Nausea, vomiting and diarrhea. A woman can also have some fever and chills. Only some women get those effects.
3. Bleeding usually starts within four hours after using the pills, but sometimes later. Bleeding is the first sign that the abortion is starting. If the abortion continues, bleeding and cramps will become more severe. Bleeding is often more and heavier than a normal menstruation, and there can be clots. The longer the pregnancy, the more heavy the cramps and the bleeding will be. Bleeding continues lightly one to two weeks after the abortion, but sometimes more or less. The normal menstrual period mostly returns after four to six weeks.

If the abortion is complete, the bleeding and the cramps diminish. The moment of abortion can be noticed with a peak of heavier blood loss and more pain and cramps. Depending on the length of the pregnancy, a small pregnancy sac with some tissue around may be seen. For instance, if the woman is only five to six weeks pregnant, there will be no visible sac. After nine weeks, a woman might find a sac and a fetus in between the blood. Between 9 and 12 weeks, the risk of complications is higher.

If no bleeding occurs after the third dose, the abortion did not take place and the woman can try it again after a couple of days or try to find a doctor willing to help. If she is under 9 weeks and she can have access to Internet she can ask help from Women on Web (see *Online Abortion Help* on page 16).

### When Should a Woman Contact a Doctor or Go to a Hospital?

1. If there is **heavy bleeding** that lasts for more than 2-3 hours and soaks more than 2 maxi sanitary pads per hour (if the stream of blood is like a stream of water in the open faucet). Feeling dizzy or light-headed can be a sign of too much blood loss, and dangerous to the woman's health (very rare less than 1%).
2. If there is **severe pain** that does not go away few days after taking the medicines.
3. If a woman has **vaginal discharge that smells bad**.
4. If the woman has a **fever** higher than 38 degrees Celsius (100° Fahrenheit) for more than 24 hours, or if she has a fever of more than 39 degrees Celsius (102° F).

The treatment of complications is the same as those of a miscarriage. If there is a problem, a woman can always go to the hospital or any doctor and say she had a miscarriage. The doctor will treat her as if she had a spontaneous miscarriage. There will be no way that the doctor can know she has taken medicines. The treatment is (vacuum) curettage, during which a doctor empties the womb. Doctors have the obligation to help in all cases.

### Making Sure the Abortion Has Occurred

Some women bleed without having an abortion. Therefore, it is important that a woman makes sure that an abortion really occurred. It can take 3 to 4 weeks before a pregnancy test becomes negative. So if possible, she should have an ultrasound about one week after the abortion to make sure the womb is empty. If a woman had a successful abortion, the pregnancy symptoms should disappear and she should not feel pregnant.

The chance that using Misoprostol will not completely cause a complete abortion is 10-20%. If the Misoprostol does not work and the pregnancy continues (in 6% of the cases), the woman can try to use the medicine again after a few days. She should know that even by repeating the procedure, it could fail again. If the procedure fails and a woman is pregnant for more than 12 weeks, and if no doctor is willing to help, she can travel to another country to have a safe and legal abortion or keep the pregnancy.

If misoprostol fails and the woman is less than 9 weeks pregnant, she can contact [www.womenonweb.org](http://www.womenonweb.org) for support in obtaining mifepristone and misoprostol. If the woman is more than 12 weeks pregnant, and if no doctor is willing to help, her only option is to travel to another country to have a safe and legal abortion or keep the pregnancy.

If the pregnancy continues, the Misoprostol creates a small increased risk of birth defects such as deformities of the hands or feet and problems with the nerves of the fetus.



### **After Taking Misoprostol**

Nothing should go inside the vagina for 5 days after the abortion (she should not have sex) because of the risk of infection. A woman can get pregnant immediately after an abortion! She should get good contraception to prevent a new unwanted pregnancy.

### **Online Abortion Help**

If the woman has access to the Internet and is pregnant less than 9 weeks, she can ask [www.womenonweb.org](http://www.womenonweb.org) for help in getting safe abortion. She can receive by post to her home address medicines called Mifepristone and Misoprostol, which are 99% effective to induce an abortion. The package takes about a week to arrive. She can email [info@womenonweb.org](mailto:info@womenonweb.org) for more information.

## Trainer's Notes:

**Key points:** Symptoms are the same as spontaneous miscarriage, before 12 weeks, don't do alone, within 2 hours of hospital, every 3 hours 4 tablets under tongue repeated 3 times, blood, cramps, side effects (nausea, diarrhea, vomiting), 15% chance not complete and need to go to doctor for further treatment, when go to hospital (heavy bleeding, fever, lasting pain), 3 weeks later pregnancy test, ongoing pregnancy in 6% of cases.

After presenting the information about using misoprostol, highlight the key points by asking your audience to answer the following questions, as a large group or in small groups. You can also ask some of the questions #1-29 in the "Q & A" section, or have your group break into smaller groups to work on the "Q & A" section themselves.

### 1. What are the 6 precautions you should give women when you tell them about Misoprostol for safe abortion?

Answer:

- A woman should never do this alone.
- She should not do a medical abortion herself if she is more than 12 weeks pregnant
- No serious illness
- No IUD in the uterus
- She is within a few hours of a hospital or clinic
- She is not being forced and is choosing abortion of her own free will

### 2. What is the correct way to use Misoprostol for safe abortion before 12 weeks?

Answer: A woman should put 4 pills of 200 micrograms (in total 800 mcg) Misoprostol under the tongue and not swallow for 30 minutes. After 3 hours she should put another 4 pills of Misoprostol under the tongue. After 3 hours she should put another 4 pills of Misoprostol under the tongue again for a third time.

### 3. What symptoms are normal when Misoprostol is used for abortion?

Answer: Bleeding and cramps. Women may also have nausea, vomiting, diarrhea, a low fever and chills.

### 4. What are signs of a possible complication?

Answer:

- Heavy bleeding that lasts for more than 2-3 hours and soaks more than 2 maxi sanitary pads per hour (if the stream of blood is like a stream of water in the open faucet).
- Severe pain that does not go away within a few days after taking the medicines.
- Vaginal discharge that smells bad.
- If the woman has a fever (> 38 degrees Celsius) for more than 24 hours, or if she has a fever of more than 39 degrees.

## TRAINING COUNSELORS

Once women understand the basic information for how to use Misoprostol for safe birth and safe abortion, they can learn to give others the tools to provide women-centered, supportive information that saves lives.

To share information with other women, there are 4 basic principles:

- Be nice, warm understanding and listen carefully to understand the help request
- Never “invent” any answers that you are not sure about. You can always get back to the woman after consulting an expert.
- Respect the privacy of every woman: You should never discuss private information of the women with anybody else.
- If a woman has an unwanted pregnancy, it is her decision about whether or not to have an abortion. You are not telling her what to do! But if she has decided to have an abortion, you can give her the information she needs to do it safely.

### Checklist for the Counselor

This is a list of the basic information you should get and give!

#### Information for safe birth:

1. Ask if the woman plans to give birth at home. If yes, tell her about Misoprostol.
2. Give Information about the 4 steps for using Misoprostol for safe birth:
  - 1- Dry baby and put on belly mother
  - 2- Within 1 minute after birth
    - feel if there still is another baby. (Dangerous!)
    - If not, put 3 tablets under tongue for 30 minutes.
  - 3- Massage the womb and feel if it contracts.
  - 4- Go to hospital if:
    - Placenta (afterbirth) does not come out within half an hour
    - If the bleeding is heavy

Ask the woman to repeat this information to you and if needed correct her. Make sure she understands and ask if she has any questions.

#### Information for Safe abortion:

1. Ask the woman:

- 1 - Is the pregnancy unwanted?
- 2 - Does she want an abortion?
- 3 - How many weeks pregnant is she? First day of last menstruation? (Must be less than 12 weeks pregnant)
- 4 - Is the decision made by her free will?
- 5 - Any illnesses,
- 6 - IUD?
- 7 - Can she get to hospital or doctor within 1 or 2 hours if needed?

2. Give Information about using Misoprostol for safe abortion:

- 1 - Don't do this alone
- 2 - Be within 2 hours of a hospital
- 3 - How to use Misoprostol:
  - 4 tablets Misoprostol under your tongue, do not swallow*
  - 3 hours later again 4 tablets under your tongue, do not swallow*
  - 3 hours later again 4 tablets under your tongue, do not swallow*
- 4 - Effects of the medicine:
  - bleeding, cramps, chills, diarrhea, vomiting
- 5 - When to go to hospital:
  - 1- High fever,
  - 2- Heavy bleeding more than 2 pads per hour for 2 hours.
  - 3- Continuing pain
  - 4- Bad smelling vaginal discharge
- 6 - If there is no bleeding at all:
  - 1- Check for possible ectopic pregnancy
  - 2- Try the medicines again
- 7 - Do pregnancy test after 3 weeks to make sure the medicines worked.

Ask the woman to repeat this information to you and if needed correct her. Make sure she understands and ask if she has any questions.

**Learning through Role-play: A counselor sharing information with women**

It is important to practice how to use the checklist above to give information to women, and how to answer the questions that women may have. Role-play is an easy and enjoyable way to learn how to be a good counselor.

One person plays the role of a woman seeking information. The other plays the counselor. Use the checklist above and the Questions/Answers section to learn the information and to learn to share it with others.

A third person can observe the role play and check if all the information was obtained and given (use checklist above)

## HOW TO ADVOCATE WITH PHARMACIES

In some regions Misoprostol is not yet available in pharmacies. It is important to increase the availability of Misoprostol in your area once women know how to use Misoprostol. Find pharmacists or other outlets like small shops that also sell medicines. Also find the name, address and phone number of the distributor of Misoprostol in your country. Bring stickers and/or copies of instructions for how to use Misoprostol for safe birth and for safe abortion. In many cases, it is best to approach the pharmacist about using Misoprostol for safe birth and prevention of PPH. Use your judgment about whether or not to discuss the use of Misoprostol for safe abortion.

Ask: Do you have/ know Misoprostol? (Misotac)

*If No:* Introduce yourself and explain:

- You are working on a project to reduce maternal mortality
- Misoprostol is a medicine on the WHO list of essential medicines and is used to prevent and treat severe bleeding after giving birth (PPH) and miscarriages and abortion (if appropriate).
- The project is about informing women that they can use Misoprostol themselves for this
- That you expect that a lot of women will try to find buy Misoprostol very soon (from him/her) as a result of this information campaign.

Then ask if they would like to obtain Misoprostol to sell it to women who will come to ask for it (give address of the distributor in your country)

*If Yes:*

Can you buy it? (The pharmacist might ask what you need it for)

Do they sell it without prescription?

Do they know how it can be used (ask PPH and miscarriage)?

Explain who you are and what you do (or pretend you are a doctor)

Would he/she be interested in the latest WHO based protocols?

If yes, give documents and stickers.

You can also ask the pharmacist if women ever ask him for medicines that cause abortions.

*If yes:* Ask him/her what he does, if he tries to help these women.

*If yes,* tell him about misoprostol and ask if he wants information about its use.

*If no,* don't do anything

If the pharmacist tells you that he/she knows it is used for abortion and that he is against abortion, tell him that you understand but that really the goal is safe birth and that so many women give birth alone and that Misoprostol can reduce their risk of heavy bleeding by half and that you hope he really cares about this woman and her baby. If the pharmacist/ black market seller tells you that women use it for abortions in a neutral way, ask him if he would like to know what to advise them. If he says yes give him scientific articles about Misoprostol (if you can), some stickers and ask him/her if he/she would like to be trained in the use of Misoprostol.

## Frequently Asked Questions and Answers

### ***1. How do I know if I am pregnant and how long I have been pregnant?***

Most women determine that they are pregnant if they are sexually active and have missed a period. Nausea, breast soreness, and fatigue are also common symptoms in early pregnancy.

Ultrasound or pregnancy tests are the only ways to confirm that a woman is pregnant. The pregnancy test can be done only after the first day that a woman missed her period, before that time the result is not reliable (the pregnancy test might be negative while the woman actually is pregnant). If an ultrasound is performed, the doctor can tell a woman exactly how long she has been pregnant.

A woman can make a reasonable calculation of about how long she has been pregnant. She must figure out when the first day of her last menstrual period was, include that day and start counting up until today. The number of days is the time of pregnancy duration. If she wants to know the pregnancy duration in weeks she should divide the number of days by 7.

The size of the womb can also be used to estimate the duration of pregnancy. Usually this is done by a health professional. However, a woman can also feel her own belly. First she has to make sure that her bladder is empty (she should pee before checking). Then she should lie down and feel with both her hands if she can feel the womb (a hard ball-like structure). If she can feel the upper end of the womb just above her pubic bone, she is around 12 weeks (84 days). If the womb is bigger she is more than 12 weeks pregnant and should not use Misoprostol for abortion.

### ***2. I have an unwanted pregnancy, what can I do?***

If a woman is under 12 weeks (84 days) she can try to find 12 pills of Misoprostol and do an abortion herself. She should put 4 pills under her tongue (leave them there at least 30 minutes before swallowing). After 3 hours she should put 4 pills under her tongue again. 3 hours later she should put 4 pills under her tongue again. This is 80-90% effective.

If she has access to the Internet she can ask for help at: [www.womenonweb.org](http://www.womenonweb.org) or email [info@womenonweb.org](mailto:info@womenonweb.org). Women on Web is an on-line medical abortion referral service that will help the woman access a medical abortion with Misoprostol and Mifepristone which is effective 98% of the time.

### **3. Where can I get Misoprostol?**

Misoprostol is sold in many countries under the name Cytotec or Arthrotec. Misoprostol is also used around the world to treat gastric ulcers and to treat arthritis.

The pills should contain 200mcg Misoprostol in each tablet. A woman should buy at least 12 pills of 200 mcg Misoprostol. Sometimes it is sold over the counter without a prescription. Sometimes a prescription is necessary.

To obtain these medicines, one could for example say that needs it for gastric ulcers or safe birth. If there are problems getting the medicine in one pharmacy, a woman should try another pharmacy, or send a male friend or partner, as they might have fewer problems obtaining them.

If a pharmacy does have misoprostol but requires a prescription, the woman can try to find a doctor willing to prescribe them. Or she could also make a prescription herself by using a prescription for other medicines as an example and replacing the name of the other medicine's name with

“Rx/ Misoprostol 200 mcg – 12 tablets”

Plus an undecipherable signature underneath with the date.

### **4. What are the risks of using Misoprostol for abortion?**

If a woman uses Misoprostol, she should seek medical advice as soon as possible for these symptoms:

- 1- **Bleeding that lasts for more than 2 hours and soaks more than 2 maxi sanitary pads per hour.** Feeling dizzy or light-headed can be a sign of too much blood loss. This is dangerous and must be treated by a doctor.
- 2- **Fever** (more than 38 degrees Celsius) for more than 24 hours or if she has a fever of more than 39 degrees at any time
- 3- **Vaginal discharge** that smells bad.
- 4- Sharp pain in the lower back.

If a woman thinks she might have a complication she should go to a doctor immediately. She does not have to tell the medical staff that she tried to induce an abortion; she can tell them that she had a spontaneous miscarriage. Doctors have the obligation to help in all cases.

The symptoms of a medical abortion are exactly the same as a miscarriage and the doctor will not be able to see or test for any evidence of an abortion.

### **5. I am more than 12 weeks pregnant. Can I still use Misoprostol? Until when?**

Misoprostol is still effective after 12 weeks of pregnancy, but the risk of complications increases. 4% to 8% of women with second trimester pregnancies (after 12 weeks of pregnancy), who try to end their pregnancies with Misoprostol as described below, will experience very heavy bleeding. A woman should never be alone when doing this.

A woman is strongly discouraged to do an abortion after 15 weeks by herself because of the high complication risk and because it can be very traumatic. It is actually an induction of birth at that point (the woman "goes through labor") so she should be close to a hospital. It is strongly advised that the pills are taken in the waiting room of a hospital or in a venue very close to a hospital in case a woman needs urgent medical attention. If she needs emergency care in a hospital, it is important to tell the doctors that she had a miscarriage, as women can be prosecuted for having an abortion. The symptoms and treatment are the same.

To induce an abortion after 12 weeks (84 days) of pregnancy, a woman needs 10 tablets Misoprostol 200 mcg. Every 3 hours she should put 2 tablets into her vagina. She should continue putting in the tablets every 3 hours until she has a miscarriage, but not more than 5 times.

There is a 90% chance she will miscarry in 24 hours. A woman should put the pills as deep as she can into her vagina (where the womb starts). She should wash her hands before doing this. The pills work even better if they are made wet with saliva or sterile water before putting them in the vagina.

A woman must realize that she will lose a lot of tissue and blood, but also a fetus (the size depends on the duration of the pregnancy), which can be recognized as such. It can be quite distressing to see.

If a woman used Misoprostol in the vagina and then needs to go to the doctor because she has a complication, she should carefully check with her fingers and take out the remains of the pills before going to the doctor. The remains of the pills can be still found up to 4 days after a woman uses Misoprostol. If she removes the pills, the doctor cannot tell that she tried to cause an abortion, and she can say that she had a miscarriage.

Misoprostol should never be used after 20 weeks pregnancy. The fetus is able to live outside the woman's womb from 20 weeks on. After this period the use of Misoprostol can result in the birth of a living baby.

### **6. Can I do a medical abortion if I am breastfeeding?**

It is better not to breastfeed during the first 5 hours after using Misoprostol. It is best to throw away the milk produced in the first 5 hours. After that, the woman can breast feed normally. However, if a woman must breastfeed it will probably not harm the infant.



**7. Will I be able to get pregnant and have children after a medical abortion?**

A medical abortion with Misoprostol does not affect ability to conceive or bear a child in the future. In fact, if a woman does not want to become pregnant at this time, it is important to start using contraceptives as soon as she starts having sexual relations again.

**8. Is it safe to have an abortion with pills if I've already had one in the past?**

Women are fertile for about 40 years. Some women need more than one abortion with pills because contraception fails, some women cannot choose when to have sexual relations, or because contraception or information about birth control are not available. Having a safe abortion, or more than one safe abortion, does not impact a woman's health or ability to have children in future.

**9. What if I am not pregnant but take the medicines anyway?**

A woman's health will not be harmed if she is not pregnant but takes the medicines anyway. However, she may still experience the common side effects of the medicines, including nausea, vomiting, diarrhea, chills or a low fever for up to 24 hours.

**10. Can Misoprostol be used if I am HIV positive or have AIDS?**

HIV positive women can use Misoprostol safely. HIV positive women may be at a bit higher risk of infection and anemia. Starting to take iron pills for anemia may be helpful. It is also better to use antibiotics to prevent infection (Doxycycline 100 mg 2 times per day for 7 days total).

**11. How long will it take before Misoprostol will have an effect and for how long will symptoms (bellyache, nausea, blood loss etc.) last?**

In most cases Misoprostol will have an effect within 4 hours and a woman will start getting cramps and bleeding. The symptoms (pain, blood loss, nausea, diarrhea, etc.) can last for up to 12 hours but should diminish when the abortion is complete.

If the woman has prolonged bleeding, too much bleeding (much more than a regular menstrual period), pain in her belly that does not go away after a few days of taking the Misoprostol, pain that is unbearable, fever, continuous strong bleeding after three weeks, or pain when pushing on her belly, she may have an incomplete abortion. She should go to a hospital or a doctor to complete the abortion if she has any of these symptoms. It is not necessary to tell the medical staff that she tried to induce an abortion; she can say that she had a spontaneous miscarriage. There are no tests that can show that a woman has done a medical abortion. It is extremely important to treat an incomplete abortion because the tissue and blood that remains in the body can cause heavy bleeding or an infection.

**12. How much blood will I lose and what color is the blood?**

The general rule is that fresh blood is red and old blood is brown. While having an abortion a woman should lose a lot of red blood. Women that are unsure if they bled enough should check if the abortion was successful or complete. It is normal to have irregular light bleeding for up to three weeks after a medical abortion (sometimes even longer).

**13. Will I see the products of the abortion (placenta, embryo, blood) and what should I do with them?**

Depending on the length of the pregnancy when a woman has the medical abortion, a small pregnancy sac with some tissue around it may be visible. For instance, if a woman is only five to six weeks pregnant, there will be no visible sac but just blood and clots. At nine weeks or more, she might be able to find a sac in the blood and it is possible that she might see the embryo. With a pregnancy of 8 or 9 weeks, the embryo is about 2, 5 cm. This can be distressing. It is best to flush everything down the toilet or to wrap the sanitary pads and throw everything away.

**14. I took the first dose of Misoprostol and started bleeding. Should I take the second and third doses?**

Yes, she must take the second and third doses, despite the blood loss. Scientific research has proven that the second and third doses increase the effectiveness of the treatment and reduce the number of incomplete abortions (i.e. tissue remains in the womb), which means that no follow-up treatment is necessary. The pregnancy symptoms, such as nausea, breast soreness, and fatigue should disappear a few days after taking the Misoprostol pills. To make sure the treatment was successful, the woman could also go to a hospital to get an ultrasound to check whether the abortion was successful.

**15. I used Misoprostol but had no, very little or not as much as expected blood loss. Did the treatment work?**

It is very difficult to determine whether an abortion has been successful and complete. If the woman still does not bleed or very little and she is sure that she is pregnant, she either has an ongoing pregnancy or possibly a pregnancy outside the womb (an ectopic pregnancy). If a woman is not sure if the abortion occurred, because she had no or little blood loss, she must not wait and should try to check as soon as possible to see if she is still pregnant. In this case she should have an ultrasound. The woman can tell the doctor that she thinks she had a miscarriage.

**16. Can I eat or drink while I am taking the Misoprostol?**

A woman should not drink any alcohol or use drugs, as it can affect her judgment. She can eat food and drink liquids normally. However, as some women experience nausea she may want to eat lightly.

**17. What happens if I do not use Misoprostol exactly within 3 hours after the first dose?**

Up to 12 weeks of pregnancy, the **most effective way** to use the medicines is to take 3 doses of 4 Misoprostol with breaks of 3 hours (4 pills, wait 3 hours, 4 pills wait 3 hours, 4 pills, so in total 12 pills). However, it can also be used up to 12 hours after the initial dose, but this is less effective.

A woman should never take more than 12 pills in total up to 12 weeks or 10 pills in total after 12 weeks. An overdose can be dangerous for her health! The longer the pregnancy is, the uterus becomes more sensitive to misoprostol and therefore the exceed dosage may provoke for example a rupture of the uterus! But it is possible and safe to repeat the use of Misoprostol after a few days, if the first attempt was not successful.

**18. I used Misoprostol but the pregnancy test is still positive. What should I do?**

A woman should wait 3 weeks after the abortion to take a pregnancy test. Sometimes, pregnancy tests are still positive 3 or 4 weeks after the abortion, because the hormones are still in the blood. In this case only an ultrasound can confirm whether a woman is still pregnant or not.

If the pregnancy symptoms haven't disappeared a couple of days after using the medicines it is possible that the woman is still pregnant. Blood loss does not mean that the abortion was successful; that is why it is so important to check for ongoing pregnancy by ultrasound or a pregnancy test.

**19. What are the symptoms of an ongoing pregnancy and what can a woman do in this case?**

If the pregnancy symptoms such as nausea, breast soreness, and fatigue don't disappear after the medical abortion it is possible that she has an ongoing pregnancy. She can do an ultrasound or take a pregnancy test after 3-4 weeks. If a woman is not sure if the abortion occurred, because she still feels pregnant, she must not wait and should try to get an ultrasound to find out if she is still pregnant.

If she has an ongoing pregnancy she can use Misoprostol again a couple of days later. It is possible that Misoprostol will not be effective again; it will induce an abortion only in about 80-90% of the cases.

If a woman is under 9 weeks pregnant and she has access to Internet she can ask help at: [www.womenonweb.org](http://www.womenonweb.org) or email [info@womenonweb.org](mailto:info@womenonweb.org). Women on Web is an on-line medical abortion referral service that will help the woman access a medical abortion with Misoprostol and Mifepristone which is effective in 97-99% of the cases.

**20. *I used Misoprostol a few days ago and still am in a lot of pain. Is that normal?***

No, this is not normal. If the treatment was successful, a woman should no longer suffer any pain, just some blood loss. If there are a lot of remaining pregnancy products in the womb (incomplete abortion) it can cause pain. The only way to check this is to get an ultrasound. Small remains in the womb usually get expelled by themselves with the next menstruation. Large remains, however, may not disappear by themselves. If the abortion was incomplete, she might need an additional dose of Misoprostol (2 Misoprostol pills under the tongue and let them dissolve at least 30 minutes) or a curettage or a vacuum aspiration, during which a doctor will remove remaining tissue from the womb.

**21. *What is the treatment for an incomplete abortion/incomplete miscarriage?***

If the abortion was not complete, a woman might need an additional dose of Misoprostol, a curettage or a vacuum aspiration, during which a doctor will remove remaining tissue from the womb. Doctors have the obligation to help in all cases. The additional dose of Misoprostol for incomplete abortion is: 2 pills under the tongue and let them dissolve for at least 30 minutes.

**22. *How do I know I have an infection?***

If a woman has a fever of more than 38 degrees Celsius for more than 24 hours or fever of more than 39 degrees **or** if a woman notices that her vaginal fluids are not normal (they smell bad, do not look like usual) she should go to a doctor as soon as possible. These symptoms might be signs of infection. An infection can be treated with antibiotics; the most common antibiotic to treat this kind of infection is Doxycycline.

**23. *What are the symptoms of a pregnancy outside the womb and what is the treatment?***

If a pregnant woman experiences faintness or extreme abdominal pain, then she should get medical help immediately, because it might be a pregnancy outside the womb (ectopic pregnancy) that has ruptured. This is a life-threatening situation and the doctor will always help her. The treatment is with a medicine called methotrexate (which dissolves the pregnancy) or surgical removal of the ectopic pregnancy and it is necessary to save the woman's life.

**24. *What can I say if I go to a doctor or hospital because I might have a complication?***

It is not necessary to tell the medical staff that she tried to induce an abortion, a woman can also say she had a spontaneous miscarriage. The doctor CANNOT see the difference. The treatment for an incomplete abortion or miscarriage is exactly the same. If you used pills in the vagina, remove all traces of the pills.

**25. *Can Misoprostol be detected in a blood or other type of test?***

No, a blood test or other type of test (like biopsy) will NOT show that a woman used Misoprostol. Doctors cannot recognize the difference between spontaneous miscarriage and induced abortion unless they find traces of the pills.

**26. *What are the chances that the fetus will be malformed if I have an ongoing pregnancy after using Misoprostol?***

In order to entirely avoid the risk of having a malformed fetus a woman should end her pregnancy if the attempt to provoke an abortion with Misoprostol is not successful. There is an association between birth defects and Misoprostol. These defects include abnormalities in the skull and the limbs (called Mobius Syndrome). However, the relative risk to having a baby with malformations after using Misoprostol is low (less than 1 malformation in 1000 births when the fetus was exposed to Misoprostol).

To compare: the normal risk of having a child with Down syndrome is 1 in 1300 for a 25-year-old woman; at age 35, the risk increases to 1 in 365. This is a much higher risk than the risk of malformations as a result of the use of Misoprostol. If a woman fears malformations after an unsuccessful attempt to have an abortion with Misoprostol pills, she should see a doctor and have an ultrasound. The malformations do show on ultrasound.

**27. *Can I get pregnant again immediately after using Misoprostol?***

Yes. If a woman does not want to become pregnant right away, it is very important to start using contraceptives immediately.

Condoms can be used immediately. The contraceptive pill and other hormonal contraceptive methods like the patch, ring, or shot can be started on the day a woman takes the Misoprostol. If for some reason the medical abortion did not work and she is still pregnant, the hormones used in the birth control pills, patch, ring and shot are not dangerous to a developing fetus. A woman should always confirm that the abortion was successful. Before a woman gets again her normal period back, the hormonal contraceptives are less effective than usual, so she should use also a barrier method (like condoms).

An IUD (coil) can be put in place as soon as 4-14 days after she takes the Misoprostol, even if there is still light bleeding. She can also wait to insert an IUD until her next regular period, but she will need to use another contraceptive method in the meantime if she does not want to risk becoming pregnant.

If a woman wishes to become pregnant again after doing a medical abortion, it is also better to wait until after the first normal menstruation, so she should use contraceptives until then. Although it can take several weeks (usually 4-6 weeks) after the abortion before she gets her normal menstruation again, she could ovulate in the first week or two after abortion, which means she could get pregnant right away.

### **28. *When can I start to have sexual relations again after a medical abortion?***

It is best to wait 5 days after taking the Misoprostol to have sexual relations. Right after the abortion, the entrance to the womb (cervix) might be slightly open, and there is a greater risk of infection if a woman has sexual relations during this time. She should not put a tampon or anything else in the vagina for 5 days.

### **29. *Will I have emotional problems after the abortion?***

If a woman is not sure if an abortion is right for her, she should discuss it with a trusted friend or family member before using any medicines.

Most women do not need any psychological help after an abortion. Feelings of regret after abortion are rare. Indeed, the most common emotional response after abortion is relief. Transient feelings of guilt, sadness, or loss are common but most women can overcome negative feelings that might affect them. It is normal to feel emotional after an abortion. While she may experience sadness or grief, these feelings usually go away after a few days. But in countries where the taboo and social stigma is big, it is more common for women to suffer feelings of guilt and shame. Some women feel bad about themselves because they don't feel guilty about having an abortion, but think they should feel guilty. In general, understanding emotional pain can help to begin to let go of the grief, guilt, rage or shame.

A woman that has an abortion is not a bad person because she had an abortion. She is also not alone in having chosen abortion. Many women are surprised to learn that about 42 million women worldwide have abortions every year.

### **30. *Is it safe to give birth at home?***

If the pregnancy was normal a woman can give birth at home with the help of a skilled birth attendant. Unfortunately, a skilled birth attendant is not always available and sometimes a woman is alone or with somebody who is not experienced in guiding a birth process.

If a woman has a pregnancy with a complication like high blood pressure, diabetes, severe anemia, too much or too little fluid, abnormal growth of the fetus or problems with the placenta, she should always give birth in a hospital.

A woman can start giving birth at home but during the birth process may develop problems because the baby is too big for the woman's body, the baby is not in the proper position, the birth might take too long, or the contractions of the womb might not be strong enough. In these cases the woman has to be transported to a hospital as soon as possible to give birth under medical guidance.

### **31. What is a postpartum hemorrhage (PPH) and when does it happen?**

Postpartum hemorrhage is excessive vaginal bleeding within 24 hours after giving birth. This means more than 500 ml. of blood loss.

Even if the whole birth process seemed to have gone well, a woman might still get PPH. It is the main cause of death after giving birth (25% of all maternal deaths worldwide). 125.000 of the 515.000 women who die in pregnancy die because of bleeding after giving birth.

### **32. How do I recognize PPH when it happens?**

Often it is difficult to estimate blood loss after birth. Bleeding may be slow and happen over several hours.

### **33. What causes PPH?**

The main reason for heavy bleeding after giving birth is that the womb does not contract (70-90%). Other causes are heavy damage to the birth canal (tears etc), retained placenta, rupture of the womb, inversion of the womb, and DIC (disseminated intravascular coagulopathy) which is abnormal blood clotting in the veins

### **34. When does the placenta usually get expelled?**

In 90% of cases the placenta is expelled within 15 minutes after the baby comes out. PPH occurs 6 times more often if the placenta is not expelled within 30 minutes.

### **35. Why does the womb sometimes not contract?**

- If there still is placenta in the womb
- If the womb was very big because of multiple pregnancies, a big baby, lots of fluid
- If the labor lasted very long or was very fast
- Full bladder

### **36. What can I do to prevent the PPH?**



It is possible to prevent PPH in 60% of the cases if the following measures are taken after the child has been born but before the placenta is out (the 3rd stage of labor). These measures are:

1- Immediately after giving birth, dry and stimulate the baby, put it on the belly of the woman or close to her breasts if she wants to breastfeed (HIV positive women should not breastfeed as it increases the risk of infection for the baby). Cover the head of the baby with a warm cloth or blanket.

2- Within 1 minute after the baby is born, feel the belly to make sure there is not another baby in the womb. If there is not another baby, make the womb contract by putting 3 tablets of 200 mcg Misoprostol under the tongue. The woman can do this herself even if there is no skilled birth attendant helping her with the birth.

3 - Clamp the cord and wait for the placenta to come out. If a skilled birth attendant is present she or he can help the womb expel the placenta quickly: After giving Misoprostol, she can clamp the cord from the placenta, put her hand on the lower belly to support the womb and gently put traction on the cord when the womb contracts (controlled cord traction).

4- Massage the womb (at the top end) after the placenta comes out until it is contracted (feels like hard ball). Do this every 15 minutes for the next 2 hours. The woman can also massage her womb herself or have anybody present at the birth to do this.

**37. What should I do when there still is heavy bleeding after using Misoprostol?**

Even when trying to prevent PPH, 3% of women will loose more than 1000 ml of blood. If a woman starts or continues to loose a lot of blood after using Misoprostol, she should be transported to a hospital as soon as possible!!

**38. What happens if there still is another baby in the womb when the woman uses Misoprostol to prevent PPH?**

If there still is a baby, there is a risk that the womb will rupture, this is very dangerous.

**39. Are there other medicines that can be used to make the womb contract?**

Yes, an injection of Oxytocin or Ergometrine cause the womb to contract and prevent PPH, but these can only be applied by a skilled birth attendant. Misoprostol can be given by people who are not health professionals. It does not require refrigeration and is cheap.

**40. What are the side effects of using Misoprostol after giving birth?**

A woman can experience fever/chills, nausea and vomiting, diarrhea, pain



**41. *Can I breastfeed immediately after using Misoprostol after I give birth?***

Yes, a woman can start breastfeeding normally.

When administered for PPH prevention, Misoprostol has no breastfeeding contraindication. HIV positive women should not breastfeed as it increases the risk of infection for the baby.

## One-day Training Schedule

Use checklist in trainers notes to make sure you did not forget anything  
 Ask questions to the audience to check knowledge and keep involvement  
 Ask about the specific problems in their communities. The group should not be bigger than 10-20 people. The information you can give is very basic, you are not a doctor or health specialist. If any of the participants has additional questions and you are not sure about the answer please ask a doctor or health worker or contact [info@womenonweb.org](mailto:info@womenonweb.org) to ask. Do not invent any answers!

- |               |   |
|---------------|---|
| 8.00 - 8.15   | Arrival, everybody introduces themselves, rules and welcome.  |
| 8.15 – 8.45   | Causes of maternal death. Training about Misoprostol (how does it work and what can it be used for). Basic information about menstruation, duration pregnancy, contraceptives.  |
| 8.45 - 9.15   | PPH –how to use misoprostol and when to go to hospital (use checklist trainers notes and ask questions to audience to repeat protocol)  |
| 9.15- 9.45    | Q&A from audience about information given before and introduction use of misoprostol for abortion (ask who knows somebody who had an abortion and who knows somebody who died from an unsafe abortion)  |
| 9.45 – 10.15  | Break   |
| 10.15 – 11.45 | Information about misoprostol use in a medical abortion <ul style="list-style-type: none"> <li>- legal framework (freedom of information)</li> <li>- precautions: how to check duration pregnancy &lt;12 weeks, not alone, within 2 hours to doctor, no serious illness or IUD, free will decision</li> <li>- dosage – 4 tablets under tongue, repeated each 3 hours for 3 times (total 12 tablets)</li> <li>- side effects –(bleeding, cramps, nausea, diarrhea, vomiting) as in a miscarriage</li> <li>- when to go to a doctor (heavy bleeding more than 2 pads/hour for 2 hours, fever, ongoing pain, smelly discharge)</li> <li>- how to make sure abortion happened (pregnancy test after 3 weeks)</li> <li>- aftercare (contraceptives)</li> <li>- where can you get it and what can you say to the pharmacists</li> </ul> |
| 11.45 – 12.30 | Questions from audience<br>After the questions do a Q&A where everyone will get question to involve them. Introduce role-play after the lunch break.  |

12.30 – 13.30	Lunch break
13.30 – 14.45	Breaking into groups (each group 3 persons) Role playing (1 person plays woman who needs information, the second plays the counselor, the third will observe and check if all information is given based on the checklist and give feedback) Each group plays 6 scenarios so that each participant can play a counselor, a women and an observer for PPH and safe abortion. (3 times a role-play for PPH and 3 times for safe abortion)
14.45 – 15.00	Presentations each group: what went well what went wrong
15.00- 15.15	Break
15.15- 15.45	What is the most difficult information that should be repeated? Discuss ways to disseminate the information in each participant's community.
15.45 – 16.15	How to advocate with pharmacy. (Example role-play for the group)
16.15 – 16.35	Test + Q&A
16.35 – 16.50	Summarizing – what have we learned

**Scientific references:**

- "Frequently asked questions about medical abortion" WHO 2006  
[http://www.who.int/reproductivehealth/publications/unsafe\\_abortion/9241594845/en/index.html](http://www.who.int/reproductivehealth/publications/unsafe_abortion/9241594845/en/index.html)
- Von Hertzen H, ea WHO Research Group; Efficacy of two intervals and two routes of administration of misoprostol for termination of early pregnancy: a randomized controlled equivalence trial, Lancet. 2007 Jun 9;369(9577):1938-46.
- Prevention and Treatment of Post-partum Haemorrhage: New Advances for Low Resource Settings. Joint Statement International Confederation of Midwives (ICM) International Federation of Gynaecology and Obstetrics (FIGO) <http://www.figo.org/files/figo-corp/docs/PPH%20Joint%20Statement%202%20English.pdf>

**Pre Test/ Post Test**

1. When can a woman get pregnant?
  - a) Only about 14 days after the first day of her last menstrual period.
  - b) During her fertile period, 5-7 days before her period.
  - c) Throughout the menstrual cycle, because there are no safe days to predict.
  
2. To avoid an unwanted pregnancy after unprotected sex or rape, a woman can:
  - a) Douche with warm water and mild soap within 12 hours.
  - b) Take 2-4 birth control pills within 72 hours and then take 2-4 more 12 hours later.
  - c) Take 2 tablets of Misoprostol within 72 hours.
  
3. Is there a way a women can reduce the risk of HIV AIDS after rape?
  - a) No, she will have to wait six months to get a test to confirm if she got HIV or not
  - b) Yes: and she needs to take special medicines (called PEP) within 72 hours
  - c) No, special medicines (called PEP) are effective only in cases when a person has an accident during work with infected materials.
  
4. The risk of postpartum hemorrhage (PPH - heavy bleeding after birth which can cause death) can be reduced by:
  - a) Putting 3 tablets of Misoprostol in the vagina immediately after birth
  - b) Cannot be reduced
  - c) Putting 3 tablets of Misoprostol under the tongue immediately after birth
  
5. A woman should NOT use Misoprostol for prevention of PPH if:
  - a) The placenta is still in the womb
  - b) There still is another baby in the womb (twins)
  - c) There is no skilled birth attendant with her.
  
6. What is the best way to use Misoprostol for safe abortion?
  - a) Put 4 pills of 200 mcg Misoprostol in the vagina. Swallow 4 pills of Misoprostol 2 hours later.
  - b) Put 4 pills of 200 micrograms Misoprostol under the tongue for 30 minutes. After 3 hours she should repeat this, and after 3 more hours she should repeat this again.
  - c) Swallow 4 pills of 400 micrograms Misoprostol. Wait 6 hours. Put 6 pills of Misoprostol in the vagina (near the cervix) and lay still for 2 hours. Repeat the pills in the vagina after 2 hours.
  
7. A woman should go to the hospital for treatment as soon as possible if:
  - a) She has heavy cramps just after taking misoprostol
  - b) If she has a lot of bleeding (soaking more than 2 sanitary pads per hour for more than 2 hours in a row)
  - c) If she has a lot of nausea just after taking misoprostol
  
8. If the woman does not bleed after taking the Misoprostol the reason could be:
  - a) She is too late in her pregnancy for the Misoprostol to work
  - b) She has an ectopic pregnancy (pregnancy outside the womb)
  - c) She is pregnant with twins
  
9. After an abortion, a woman can get pregnant again:
  - a) Immediately
  - b) Within one week after the abortion
  - c) After her next menstrual cycle