## COMPARISON OF MEDICAL AND SURGICAL ABORTION

<table>
<thead>
<tr>
<th>Medical Abortion with Mifepristone - Misoprostol</th>
<th>Surgical Vacuum Aspiration Abortion</th>
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<tbody>
<tr>
<td><strong>How far along in the pregnancy can I be?</strong></td>
<td><strong>First trimester is through 12 weeks. A pregnancy less than 6 weeks may increase the chance of failed abortion.</strong></td>
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<td>Up to 8 weeks for best success (97%). Success rates decrease as the pregnancy advances.</td>
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| **How long does it take?** | **One 3-4 hour visit to the clinic.**  
- The abortion procedure takes 3 to 5 minutes.  
- Follow-up visit at your doctor or clinic, or the providers in 3-4 weeks. |
| - Usually 2 visits to the provider.  
- Take mifepristone on day 1.  
- Take misoprostol buccally on day 2, 3, or 4.  
- It usually takes several hours for the abortion to occur.  
- Follow-up scheduled one week from first appointment. | |
| **How painful is it?** | **From mild to very strong cramping during the abortion (commonly a 5 to 10 minute period). Pain medication is available during and afterwards.** |
| From mild to very strong cramping off and on throughout the abortion (commonly a 1 to 3 hour period). Pain pills are provided for use as needed. | |
| **How much will I bleed?** | **Usually light to moderate bleeding and may continue for up to 6-8 weeks.** |
| Heavy bleeding and passing clots is common during the abortion. Afterwards, lighter bleeding is common from 9 to 14 days or longer. | |
| **How much does it cost?** | **$500 in Tacoma, $550 in Renton (up to 12.0 weeks) at the bottom of our sliding fee scale.** |
| $600 at Cedar River Clinics, at the bottom of our sliding fee scale. | |
| **Can the abortion fail?** | **Over 99% successful. Less than 1% of the time it fails and needs to be repeated.** |
| 97% successful. When it fails, a surgical abortion is necessary. | |
| **Is it safe, and can I still have children afterwards?** | **Surgical abortion has been formally studied for over 25 years. First trimester abortion has a less than 1% complication rate, and is at least 10 times safer than childbirth.**  
- Childbearing ability is not affected, barring rare serious complications. |
| - Both medications have been formally studied and used safely. Possible complications are rare.  
- Childbearing ability is not affected, barring rare serious complications. | |
| **What are the advantages?** | **- It's quick, over in a few minutes.**  
- It's highly successful.  
- There's less bleeding than with Medical Abortion.  
- There's less time spent cramping than with Medical Abortion.  
- Medical staff is present.  
- It can be done farther along in the pregnancy than Medical Abortion.** |
| - It may seem more natural, like a miscarriage.  
- No shots, anesthetics, instruments, or vacuum aspirator machine, unless it fails.  
- The pregnancy can be ended earlier than with Surgical Abortion.  
- Being at home instead of a clinic may seem more comforting and private.  
- Any support person can be there during the abortion process. | |
| **What are the disadvantages?** | **- A clinician must insert instruments inside the uterus.**  
- Anesthetics and drugs to manage pain during the procedure may cause side effects.  
- There are possible complications, although in less than 1% of cases.  
- The woman has less control over the abortion process and who is with her.  
- The vacuum aspirator may seem noisy.  
- It can't be done as early in the pregnancy as with Medical Abortion.** |
| - It takes several days.  
- It is not completely predictable.  
- Bleeding can be very heavy and lasts longer than with a surgical.  
- Cramping can be severe and usually lasts longer than with a surgical.  
- Two visits to the provider are necessary, and possibly more.  
- It fails more often than a surgical. | |