Ibis Reproductive Health
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Experiences with misoprostol-only for medication abortion

Considerations when counseling patients on misoprostol-only

Introduction

To support the development of patient education materials and counseling, this brief offers data from the **SAFE study** about the details of abortion completion, time to expulsion, bleeding, cramping and side effects among people who used a misoprostol-only regimen.

Recommended Regimen

Offering misoprostol-only medication abortion alongside combined regimens can further support and expand medication abortion access in the United Sates.

The currently recommended regimen for misoprostol -only for pregnancies 12 weeks or less is 800µg sublingually or vaginally every three hours for 3-4 doses.

About the SAFE Study

The **Studying Accompaniment Feasibility and Effectiveness (SAFE) study** was a prospective observational cohort study conducted in 2019 and 2020 with callers to safe abortion hotlines and accompaniment groups in Argentina, Nigeria, and a country in Southeast Asia. Safe abortion hotlines and accompaniment groups provide evidence-based counseling and person-centered support throughout a person's self-managed medication abortion experience; to learn more about these models of care please see **these resources.**

The study assessed abortion completion, symptoms, side effects, warning signs and potential adverse events among people who self-managed their own abortions with mifepristone in combination with misoprostol or misoprostol-only.

In this brief, we present findings from the 637 SAFE study participants who reported taking misoprostol-only for medication abortion. Among these participants, **84% (n=532) reported taking the recommended misoprostol-only regimen** (800µg misoprostol administered 3 hours apart for 3 doses; 2400µg misoprostol total). The remaining participants used other regimens such as additional doses of 800µg, or multiple doses of 400µg misoprostol administered continuously until expulsion.

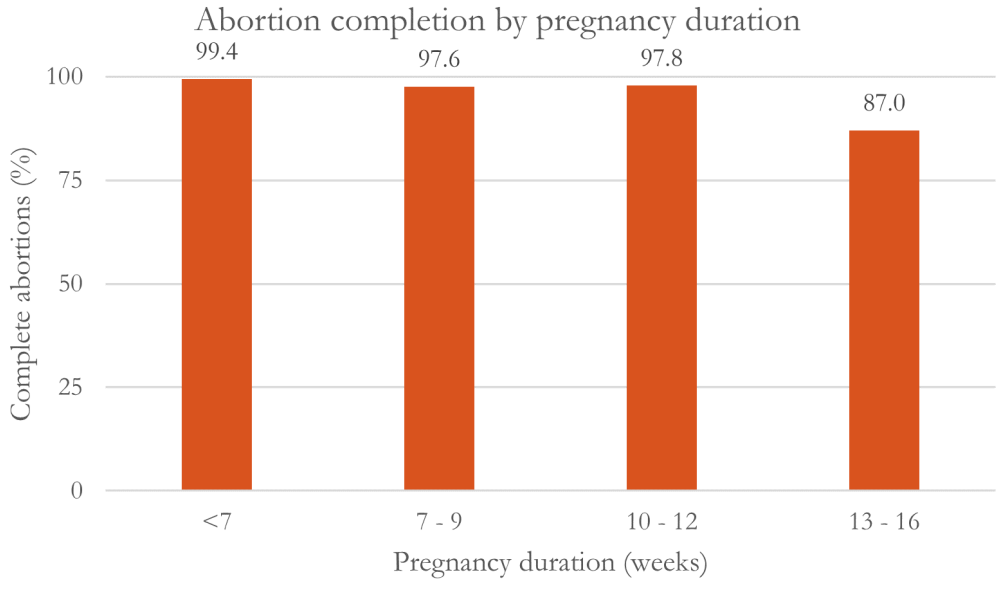
Abortion Completion

Among all participants who took misoprostol-only, 95% reported their abortion complete without surgical intervention at approximately one week, and 98% at three weeks.

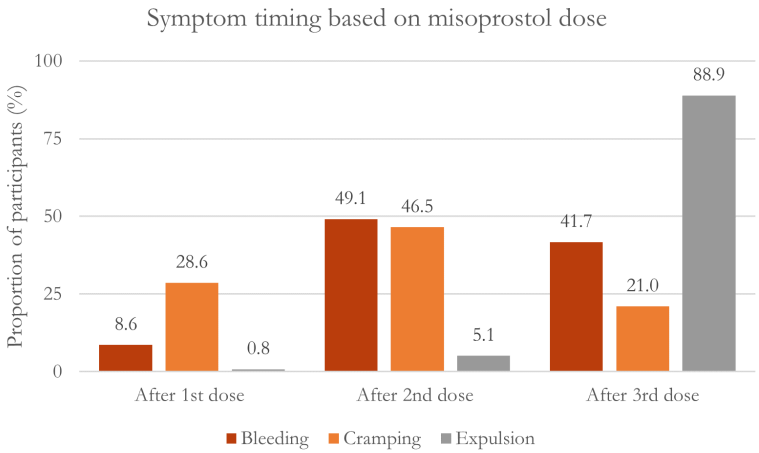
Most participants cited more than one factor that influenced their assessment of abortion completion, the top 3 being pregnancy symptoms resolving **(85%)**, noticing the products of conception **(66.1%)** and/or a negative pregnancy test **(48.1%).**

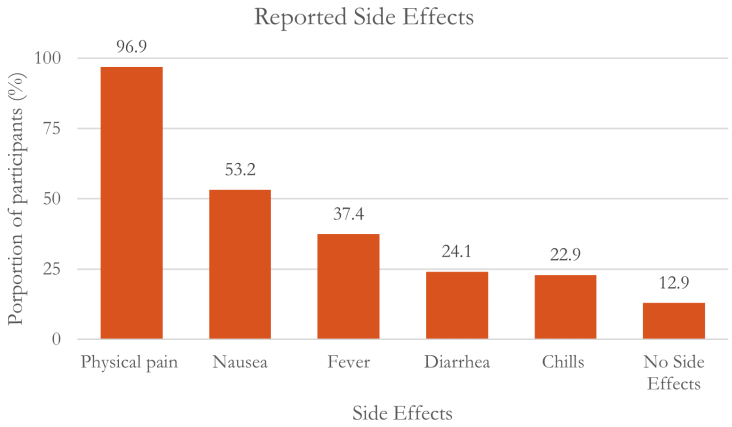
Among the 532 **(84%)** participants who reported taking misoprostol-only following the endorsed regimen (800 µg of misoprostol administered buccally, sublingually, or vaginally every three hours for 3 doses), **96.1%** reported their abortion complete without surgical intervention at approximately one week, and **99.4%** at three weeks.

In the SAFE study, effectiveness was high across all pregnancy durations. Approximately three weeks after starting their medication abortion process most participants reported a complete abortion without surgical intervention.



The below experiences are among the 532 participants who reported using the endorsed misoprostol regimen





Expulsion, bleeding and cramping

- **The majority (89.1%) of participants reported noticing expulsion of the products of conception within 24 hours** of taking the first dose of misoprostol. The median time to expulsion was 12 hours (IQR: 10-15).
- **Bleeding lasted less than 7 days for most participants (83.7%).** Heavy bleeding started after the 3rd dose and tended to last 1-3 days.
- Almost all **(98.3%)** participants reported experiencing some cramping, **which lasted for two days or less (84.4%).**

Side effects & warning signs

- **Only one participant (0.2%) experienced an adverse event including receiving intravenous fluids and an overnight facility stay;** no one received a blood transfusion**.**
- Most participants **(92.9%)** did not take anything to prevent pain prior to starting their abortion; however, the majority reported taking pain relief medication during their abortion process **(67.8%).**
- **Most participants (94.4%)** did not experience any warning signs; among those who reported at least one, discharge **(3%)** and pain **(2.3%)** were the most common.

Additional Resources

- **Resource hub** for evidence and information on misoprostol-only regiment (Ibis Reproductive Health)
- **Sample protocol** for misoprostol-only (Published in Contraception by Raymond et al. 2023)
- **Factsheet** on how to use misoprostol only (Reproductive Health Access Project)
- **Misoprostol-only experiences** from the SAFE study (Jayaweera et al. 2023)

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