## EARLY COMPLICATIONS OF INDUCED ABORTION DURING FIRST TRIMESTER

by
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One thousand, three hundred and fifty cases of therapeutic abortions carried out at the H.P. Medical College, Lady Reading Hospital, Simla from July, 1973 to December, 1978 form the basis of the present study. 87.2% of total abortions were done in the age group of 20-35 years, 11% were above the age of 35 years and only 1.8% were under 20 years. 64.8% of them were para 3 and 4, 21% were para 5 and more and only 14.2% were having one issue or no issue before the M.T.P.

The period of gestation was 6 weeks in 289 cases (21.4%), 7-10 weeks in 740 cases (54.8%), and 11-12 weeks in 321 cases (23.8%). Majority of the cases were under 10 weeks of gestation.

All the patients reported were registered in the Family Welfare Clinic of the hospital, some of them were admitted one day prior to the operation. Various methods used for the termination of pregnancy are shown in Table I. Out of 1149 cases of vacuum aspiration, abortion was done in O.P.D. in 350 cases. The number eing so small because vaginal aspiration was started in O.P.D. from September, 1976; prior to that aspiration was being routinely done in the operation theatre. The gestation period in these cases was

TABLE I
Methods Used for the Termination of Pregnancy

Method	No. of patients	Percentage	
Vaginal			
Aspiration	1149	85.11	
D. and C.	201	14.89	
Total	1350	100.00	

upto 10 weeks only. A few cases of upto 10 weeks duration of pregnancy were also done in the operation theatre because they were of nervous type, and 41.6% of them also needed concurrent tubectomy.

TABLE II
Immediate Complications of O.P.D. Procedures
(350 cases)

Compli- Aspiration cation alone		% Aspiration with I.U.C.D.		%	
Bleeding					
(Exces-					
sive)*	3	0.9	10	2.8	
Perfora-					
tion	1	0.3	Nil	Nil	
Total	4	1.2	10	2.8	

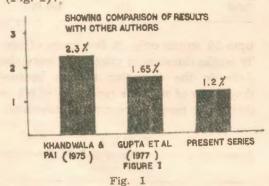
\*None of the cases required blood trans-

Table II shows the complications of O.P.D. procedures in 350 cases, out of which in 210 cases vacuum aspiration was combined with I.U.C.D. insertions. The

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total incidence of complications in O.P.D. procedures was 4% out which 1.2% was in those cases in which vacuum aspiration alone was done and 2.8% in those cases where I.U.C.D. insertion was combined with vacuum aspiration which is about two times as compared to the cases in which only vaginal aspiration was done. The percentage of immediate complications as reported by Gupta et al (1977) is 1.65% and Khandwala and Pais (1975) reported them to be 2.3%, whereas in the present series the rate of complications was only 1.2% in those cases where aspiration alone was done and in those case where aspiration was combined with I.U.C.D. insertion it was 2.8% our results are quite comparable with other authors (Fig. 1).



In 1000 cases the procedure was performed in the operation theatre because the gestation period in these cases was more than 10 weeks and also because some patients were apprehensive and 41.6% required sterilization as stated earlier also.

Immediate complications of procedures done in the operation theatre in 1000 cases is shown in Table III.

In 201 cases termination of pregnancy was done by D & C and the incidence of complication is shown in Table III. Total percentage of complications of the procedures done in the operation theatre was 2.4%, out of which vaginal aspiration which could be otherwise done as O.P.D. procedure accounted for 0.75%. Total complications of vaginal aspiration whether done in O.P.D. or operation theatre was 1.7%, whereas with D & C, it was 9.2%. It is evident that total complications with D & C is very high as against vacuum aspiration whether done in O.P.D. or O.T.

Vacuum aspiration done as O.P.D. procedure seems to be the best method for termination of pregnancy upto 10 weeks of gestation. The procedure does not require any anaesthesia, hospitalisation and

TABLE III
Complications of M.T.P. in 1000 Cases

Complications		Vacuum Aspiration (799 cases)			D. & C. (201 cases)	
	V.A. Alone	V.A. with I.U.C.D.	V.A. with Tubec.	D. & C. alone	D. & C. with I.U.C.D.	D. & C with Tubec- tomy
Excessive bleeding requiring blood transfu-	1	Nil	1	Nil	Nil	Nil
Perforation	2	Nil	Nil	1	1	Nil
Fover	Nil	Nil	2	Nil	2	14
Mortality	Nil	Nil	Nil	Nil	Nil	Nil
Total	3	Nil	3	1	3	14
Percentage	0.38	Nil	0.38	0.5	1.5	7

the complications are very minimal inspite of the fact that the procedure is mainly done by the Junior doctors and trainees.

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