



The Medical Perspective

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Abortion today stands as a major contributing factor to maternal morbidity and mortality in developing countries, mostly of Sub-Saharan Africa. Poverty, declining age at sexual debut, high fertility rate, low contraceptive prevalence with attendant high unmet needs for contraception together with the relative insecurity from wars, ethnic unrest, terrorism and violence against women contribute to the high rate of abortion-related adverse events.

Abortion refers to the expulsion or extraction of the products of conception weighing 500g or less. It also refers to the termination of pregnancy before the age of viability. 'Age of viability' is defined as the gestational age when a fetus has a 50% chance of extra-uterine survival and this varies between communities. For instance in Nigeria, the age of viability is taken as 28 weeks, it is 20 weeks in the United States and 22 weeks in the United Kingdom.

Abortion can be divided into two broad groups; spontaneous and induced. Spontaneous abortion refers to the expulsion of the products of conception—a 'natural' occurrence with no 'human' involvement, while induced abortion is the termination of a pre-viable pregnancy by the extraction of the products of conception. Spontaneous abortion is often referred to as 'miscarriage', while the term 'abortion' is widely used to represent illegal induced abortion. Induced abortion can also be divided into therapeutic and illegal (criminal). Therapeutic abortion is done for maternal health reasons; it is also referred to as legal within the context of the Nigerian legal system. Both the criminal and the penal codes of the Nigerian legal system allow induced abortion only to save the life of the pregnant woman.

The spectra of spontaneous abortion ranges from threatened abortion in which there is bleeding per vaginam with or without abdominal pain but intact products of conception and closed cervical os- to inevitable abortion where the fetus is alive but there is occurrence of drainage of amniotic fluid per vaginam or the cervical os becomes open. Recurrent miscarriage is the occurrence of 3 or more episodes of spontaneous abortion, for practical purposes however, a patient who has had 2 previous episodes can also be considered under this category, in order to institute investigation and prevent a repeat miscarriage. A missed abortion refers to the demise of the embryo or fetus but without any attempts by the uterus towards its expulsion (i.e. there is absence of the usual symptoms and signs of abortion like pelvic pain and vaginal bleeding).

An abortion is complete when all the products of conception have been expelled. Typically, no symptoms exist, the uterus is empty on ultrasound scanning and the cervical os is closed. Incomplete abortion on the other hand refers to the retention of part of the products of conception and this usually manifests as bleeding per vaginam, abdominal pain, open cervical os on speculum examination and ultrasound scanning demonstration of intrauterine retained products of conception.

Pelvic infection can complicate either spontaneous or induced abortion, this condition is known as septic abortion.

Spontaneous abortion is the commonest early pregnancy complication, occurring in between 15 and 30% of pregnancies, most cases happen in the first trimester. Chromosomal anomalies affecting the embryos are the cause of spontaneous first trimester abortions in over 50% of cases.

Other causes of spontaneous abortion include; endocrine disorders like—diabetes mellitus, polycystic ovarian disease and thyroid diseases. Infective causes include; HIV, toxoplasmosis, herpes, syphilis, rubella and any other causes of overwhelming sepsis. Immunologic diseases like the Systemic lupus erythematosus and antiphospholipid antibody syndrome. Structural uterine anomalies like cervical incompetence, septate uterus and bicornuate uterus are also recognised causes of miscarriages.

The effect of spontaneous miscarriage can be really distressing to a couple, because in nearly all cases, the pregnancy is wanted. Sometimes the couple especially the women may have a feeling of low self-worth, inadequacy, feeling that her spirituality level is low, or even stigma and rejection in some tribes. A spontaneous miscarriage complicated by sepsis, apart from the immediate discomfort from time lost from work or school, economic losses suffered, treatment or lack of treatment for complicated spontaneous abortion may affect future fertility prospects. Genital sepsis may follow spontaneous abortion or treatment involving unsafe evacuation of retained products of conception in spontaneous miscarriage, this may in turn result in some long term complications like chronic pelvic pain, dysmenorrhea, Uterine synechiae, infertility, especially tubal infertility which may require in-vitro fertilisation all these have their socio-economic and psychological implications.

RIDDLES

1. Which letter of the alphabet contains the most water?
2. Why did the smart phone need glasses?
3. What always end everything?
4. The maker doesn't want it, the buyer doesn't use it and the user doesn't know /he is using it. What is it?
5. You go at red and stop at green. What am I?
6. What is easy to spot but too hard to find?
7. What is harder to catch the faster you run?
8. Before Mount Everest was discovered, what was the highest mountain in the world?
9. The more it dries, the wetter it becomes. What is it?
10. What word is always pronounced wrong?

10. Wrong

9. A towel

8. Mount Everest

7. Your breath

6. Talent

5. A watermelon

4. A coffin

3. The letter 'g'

2. It lost all its contacts

1. The letter 'C'

Answers

Compiled by Bayo

Abortion complications also affects the care of people who are dependent on the sufferer or the couple, especially existing children, elderly parents and partners who may not have the required attention at that time.

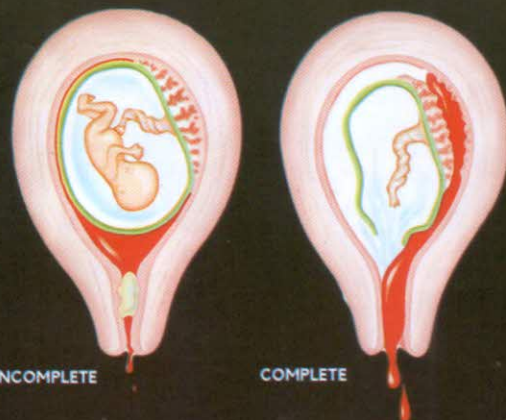
Induced abortion, unlike spontaneous abortion is however, a consequence of unwanted pregnancy. An unwanted pregnancy is defined as one that puts in jeopardy the interests of the parties involved; i.e. the woman, the partner or existing children if married. A pregnancy may be unwanted, because of fear that it would affect schooling or vocational training, woman not yet married, couple not financially ready, or because the woman or girl is a victim of sexual assault or incest. Some other reasons among married or cohabiting couples include; having another pregnancy too close to a delivery, having had too many children, and relationship problems.

Almost 80 million unwanted pregnancies occur globally every year and over half of this end up as an abortion, most of which is unsafely done. Unsafe abortion is the termination of an unwanted or unintended pregnancy by persons lacking in minimum medical skills or in a place that is lacking in minimum medical standards or both.

In Nigeria, more than half a million pregnancy terminations occur annually, with about 60% of the abortion seekers aged between 15 and 24 years and that have never been married. Two thirds of the abortion seekers are students, most of whom have had previous pregnancy terminations. Most cases of the induced abortion in Nigeria occur in clandestine settings because of the restrictiveness of the laws regarding abortion, thus over 60% of pregnancy terminations are by non-doctors. While therapeutic abortions are done in hospital settings under the care of physicians with added counselling benefits and proper post abortion care package, illegal abortions expose the girl or woman alone to bear both the medical and psychological consequences alone. The lack of moral and financial support increases the risk of feeling of guilt, low self-worth, depression, subsequent vulnerability to coercive sexual relationships, unprotected sexual intercourse and repetition of unwanted pregnancy and unsafe abortions.

Illegally induced abortions have more predisposition, (because it is mostly unsafely done) to haemorrhage and anaemia, abdominal or pelvic organ or visceral injury especially bowel injury, risk

THE ABORTION STORY



INCOMPLETE

COMPLETE

of operations for these complications which may include hysterectomy. Criminal abortions have more tendencies to also result in Ashermann's syndrome, menstrual and sexual difficulties, chronic pelvic pain, recurrent pelvic and genital sepsis and infertility. These immediate and long term consequences of illegally induced abortion, would put a strain on the person and her family's finances, reduce the person's productivity and earning power, affect performance in school or other vocations and the care of existing children. The person who procures an illegal abortion, together with the person who performs it and any other accomplice, risk jail term as spelt out in both the criminal and the penal codes of the Nigerian constitution.

Prevention of unwanted pregnancy will invariably result in the prevention of induced abortion. At the individual level, abstinence is one sure and key way as this precludes unsafe sex and helps to avoid the risk of STIs and HIV transmission. Sex outside marriage or unplanned sex is frowned at by the major religious groups across Nigeria, thus 'living-out' the ideals of one's beliefs and faith may be useful in preventing the embarrassment associated with an unintended pregnancy. Contraception is one key way of preventing unwanted pregnancy, for the youth who are not ready and those seeking to space or limit child bearing.





At the community level, families that provide godly, warm and loving homes for their children may escape the risk of behaviour (alcoholism, drug abuse, drug addiction and internet addiction) that may result in unwanted pregnancy. Enforcement of the reproductive health rights of the female, will in no small way prevent unwanted pregnancy and abortion. For instance, more value should be placed on the girl child in society; girl child education plays a key role in reproductive and sexual health, as an educated person has more knowledge and would be able to negotiate her sexual rights on the side of safety. Cessation of female disinheritance also helps as this would give them some economic leverage and power to make reproductive health choices. Political and social stability and security with prevention of social unrest and wars, international legislation to stop and prevent rape as a weapon of war would also help prevent unwanted pregnancies that may result in induced abortion. The post abortion care package, which involves the composite care given to women who are in the process of an abortion

or have just suffered an abortion, is a veritable tool in the prevention of the sequela of both spontaneous and induced abortion. This care involves immediate assessment of the patients' status and healthcare needs, immediate resuscitation (basic and advanced life support, transfusion and surgery) when life is threatened and completion of the abortion process by a safe method and procedure, for those with retained products of conception. Provision of counselling, contraceptive products and services and linkage to other facilities for further care (further investigation for the cause if spontaneous, rehabilitation, vocational training, student social support and religious organisations) all would help prevent recurrence of an abortion. Abortion related complications are a major cause of adverse maternal outcome in Nigeria and other developing countries, unsafely induced abortions for unwanted pregnancies are the main contributors to these deaths and near misses. Preventive efforts should be geared primarily toward limiting unwanted pregnancies and then to the prevention of unsafe abortion.

CROSSWORD

Be My Valentine!

S	Y	R	A	U	R	B	E	F	F	N	O	R	Y	Z	D	S	S
R	E	C	U	A	H	C	Y	E	R	F	F	O	E	G	N	R	U
E	W	T	M	G	A	A	K	S	H	P	L	H	D	D	E	E	R
X	B	P	A	R	Q	I	P	T	I	A	I	E	I	B	I	W	P
B	L	O	R	L	N	A	N	N	I	T	T	A	P	A	R	O	R
E	O	O	U	D	O	E	K	C	E	I	J	R	U	E	F	L	I
U	W	Y	N	Q	E	C	E	A	H	V	Y	T	C	H	L	F	S
S	E	E	F	T	U	P	O	W	N	X	G	S	X	N	R	O	E
Q	S	C	R	R	S	E	H	H	V	A	L	E	N	T	I	N	E
S	R	U	N	E	I	X	T	S	C	Y	D	N	A	C	G	L	W
D	O	O	Z	A	F	E	V	H	U	S	A	I	N	T	D	O	O
F	G	C	S	H	M	I	N	V	G	L	J	Z	O	E	A	V	B
P	S	C	H	E	I	O	W	D	L	U	B	B	R	Z	V	E	M
J	Y	J	C	M	S	F	R	H	U	S	B	A	N	D	R	A	C

- | | | |
|---------|------------|------------|
| hearts | surprise | saint |
| romance | pink | boyfriend |
| flowers | white | girlfriend |
| candy | red | husband |
| blush | valentine | wife |
| love | kindness | bouquet |
| Cupid | special | roses |
| bow | card | February |
| arrows | chocolates | fourteenth |

To answer the trivia question, look for words or phrases that are hidden in the puzzle, but not in the word list.

Trivia: The first recorded associations of Valentine's Day with love can be traced to this English author.

Answer: _____

GAMES

Sudoku

	1			4				
		6	8	5				1
5		3	7	1	9			
8		4		7				
			3		6		9	
		1	5	8	2		4	
6			4	3	1			
			2				5	