

# Having a surgical abortion by manual vacuum aspiration

Department of Gynaecology

Information for Patients

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## Introduction

We understand that you do not wish to continue with your pregnancy as you feel this is unsafe, unplanned or unintended. We know this may be a difficult choice for you. We are here to support your choice and give you safe medical care.

You have chosen to have, or are thinking of having, a surgical abortion. This leaflet explains this option.

If you have any questions or if there is anything you do not understand, please ask the nurse, doctor or service team at the Orchid Clinic.

## Surgical/Suction abortion

Surgical abortion is when any pregnancy tissue is removed from the womb (uterus). It is done with a small suction tube. The tube is passed through the neck of the womb (cervix).

## What is manual vacuum aspiration (MVA)?

Manual vacuum aspiration (MVA) is a procedure to remove the pregnancy tissue from the womb. It is done with painkillers and a local anaesthetic injection to the neck of the womb.

It can be carried out up to 9 weeks of pregnancy.

It is an alternative to electric vacuum aspiration (EVA). EVA is a similar procedure done under general anaesthetic.

**Health information and support is available at [www.nhs.uk](http://www.nhs.uk)  
or call 111 for non-emergency medical advice**

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To give feedback about this information sheet, contact [uhl-tr.informationforpatientsmailbox@nhs.net](mailto:uhl-tr.informationforpatientsmailbox@nhs.net)

## What does an MVA procedure involve?

You will come to the Gynaecology Ward. You will need to stay for about 2 to 3 hours.

You will be given strong painkillers such as paracetamol or co-codamol by mouth. You may also be given a rectal medication (diclofenac suppository) into your bottom. If you are allergic to these, we will give you different painkillers.

**1 hour before the procedure**, you may be given tablets called **misoprostol**. These are taken under the tongue or inserted into your vagina. They soften the neck of the womb. This makes the procedure quicker, safer and easier. You may start to bleed or get cramps, if so please tell the nurse.

During the procedure:

- A tool called a speculum is gently placed into the vagina so the cervix can be seen.
- A local anaesthetic injection is given into the cervix.
- The cervix is gently opened.
- A soft plastic tube is passed through the cervix into the womb.
- The pregnancy tissue is removed using gentle suction.

You will feel cramps during this part of the procedure.

The pain usually feels like period pain. Everyone feels pain differently. You can also use gas and air to help with the pain.

## Do I need to prepare before the procedure?

You do not need to fast before the procedure. You should eat normally before your appointment.

Please bring sanitary towels with you.

Arrange to have someone pick you up at the end, as we do not advise you to travel home alone.

## How long does the procedure take?

The procedure normally takes about 10 to 15 minutes.

## What happens after the procedure?

You will stay on the ward for about 1 hour afterwards. This is to check you are well enough to go home.

You will be given painkillers on the ward, if needed. You may need to use paracetamol, ibuprofen or co-codamol at home for a few days.

If your blood group is **rhesus negative**, you will need an anti-D injection. Your doctor will let you know if this applies to you before the procedure.

If you have a risk of infection you may be given antibiotics.

## How will I feel afterwards?

You will have light bleeding and cramps for 5 to 7 days.

## What are the risks?

MVA is a safe procedure. The risk of major complications is less than 1 in 100 procedures.

The procedure is very effective at removing all of the pregnancy tissue. 98 out of 100 MVA procedures are successful.

Both MVA and EVA cause less bleeding compared to taking tablets to end a pregnancy.

There is less chance of damage to the womb (accidentally making a hole in the womb) with MVA compared to EVA, so the risk of damage to the bowels or bladder is also less.

- **Infection (1 to 10 in 100 procedures):**

Infection after an MVA or EVA is fairly common.

Early treatment with antibiotics is needed if you have symptoms of infection (bad smelling vaginal discharge, tummy pain, fever or bleeding for more than 3 weeks).

- **Damage to the neck of the womb (1 in 100 procedures):**

Tearing of the neck of the womb (cervix) during opening may happen if it is very tight.

Most damage heals on its own. Taking misoprostol tablets before the procedure to soften the cervix helps lower this risk.

- **Bleeding (1 in 1000 to 2000 procedures):**

It is normal to have period type bleeding, which can last for 7 to 10 days. Rarely (1 in 1000), bleeding might be so heavy that you may be offered a blood transfusion.

- **Perforation (1 in 1000 procedures):**

Rarely the instruments could make a hole (perforation) in the wall of the womb (uterus).

If this happens a further operation may be needed to check and repair any damage caused to the uterus, or any other organs involved.

## What other choices are there?

You can have:

- an electric vacuum aspiration (EVA) which is a similar procedure under a general anaesthetic, or
- take tablets (medical abortion) to end the pregnancy.



## How will the pregnancy tissue be disposed?

You will be given information about pregnancy tissue disposal. You will be asked to sign a consent form allowing the hospital to arrange disposal. If you wish to arrange a different method of disposal please speak to the nurses.

## Going home

We advise that an adult takes you home and stays with you for 24 hours (1 day), in case you are unwell.

We recommend that you take at least 2 days off work to rest and let your body recover.

## How will I be followed-up?

**You do not need a routine follow-up.**

Take a urine pregnancy test in 3 weeks to make sure it is negative. If the test is still positive please contact the team at the Orchid Clinic.

If you are not well within the next 4 weeks and have any of the following, please contact the Gynaecology Assessment Unit (GAU):

- A fever.
- A lot of tummy pain.
- Bad smelling vaginal discharge.
- Bleeding for more than 3 weeks.

## Contact numbers in case of emergency

- **Orchid Clinic Service** (Monday to Friday, 9am to 4pm): **0116 258 5939** or **0786 752 8791**
- **Gynaecology Assessment Unit** (Monday to Sunday, 24 hours):  
Level 3 Balmoral Building, Leicester Royal Infirmary: **0116 258 6259 / 0116 258 7793**
- **Counsellor** (Monday to Friday, 9am to 4pm): **0753 416 8299**

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على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل  
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