Family Planning Tasmania.



Demographic and outcome variables of women who present for medical termination of pregnancy in North West Tasmania Amy Correy¹, Niamh Crocker², Shreya Maheshwari², Kathryn Ogden^{2,3}.

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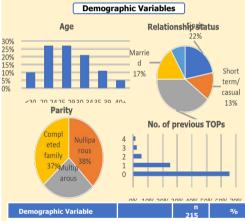
Department of Obstetrics & Gynaecology, Royal Hobart Hospital, Tasmania ²Launceston Clinical School, University of Tasmania ³Family Planning Tasmania

Introduction

In North West Tasmania, medical termination of pregnancy (MTOP) is increasingly relied upon due to limited access to surgical services. Understanding the circumstances and experiences of the women is important in guiding future service delivery.

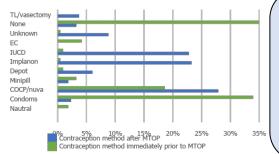
Methodology

A retrospective audit was performed from September 2018 until June 2021. Data was collected from the Family Planning Tasmania Burnie clinic database using pre-set clinical questions that are recorded routinely as part of usual clinical care. The design was primarily quantitative and simple statistical analysis techniques were used to calculate results.



Demographic Variable		215	%
Ethnicity	ATSI	23	11
	Overseas	17	8
	Neither	174	81
	Unknown	1	0.5
Pensioner/ Health Care Card	Yes	113	53
	No	101	47
	Unknown	1	0.5

Contraception methods before & after presenting for MTOP

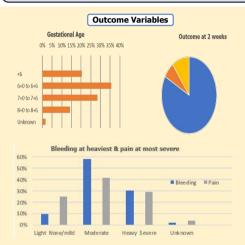


Objectives

To investigate the demographic and outcome variables of women who present for medical termination of pregnancy in rural North West Tasmania.

Results

215 women initially presented for MTOP and 195 women received treatment. Results are demonstrated in the graphs and tables below.



Outcome Variable		n 195	%
Side effects to Rx	Yes	23	12
	No	186	88
Experience of MTOP	Satisfactory	167	84
	Unsatisfactory	3	1.5
	Unknown	28	14
Experience of process	Satisfactory	168	85
	Unsatisfactory	1	0.5
	Unknown	29	15

Discussion & Conclusion

This was a rural population and a substantial proportion of women were from a lower socioeconomic background. There was not a predominant age group and many women requesting MTOPs were in stable relationships. In most cases it was their first termination of pregnancy. Uptake of contraception was high following MTOP, including a significant increase in the use of reliable long-acting methods. Pain relief and post MTOP advice and support are vital given most women rated their bleeding and pain as moderate or heavy, however despite this the experience and process was acceptable to the overwhelming majority. Outcome was largely favourable with no instance of ongoing pregnancy and high success rates. The results of this study may challenge some stereotypes in existence about women seeking MTOPs and indicate that service delivery should be targeted across a broad range of demographics.