Repeat Abortion

I.S. Savelieva, Zh.A. Gorodnicheva

Research Center of Obstetrics, Gynecology and Perinatology, Moscow, Russia

The aim of the survey is to determinate who do repeat abortion and why. 508 women were interviewed in the post-abortion period, either prior to discharge from the women's consultation or maternity hospital, were the abortion took place. Client-based reports of postabortion care and the content of contraceptive counseling were measured. 21,6% were repeat abortion clients. WHO: 87.3 % women were younger 35, i.e. in active reproductive age. Most of them had higher post-secondary (72,7%) and completed secondary (21,8%) education; 60,4% were currently employed and 39,6% women - not employed. Only 32,7% women were married; in unregistered marriage - 49,1 %; single, never married - 12,7% and divorced -5,5%. The rate of abortion - 5,0 for one woman; 87% clients had 2-5 abortions; the half (52,7%) - had terminated a pregnancy by abortion within the nearest 6 months. 60,9% of abortion clients had not used a contraceptive method; 39,1% - had used. Only about one quarter women were using the modern contraceptive methods; almost half - a barrier method (condoms, spermicides), more dependent on correct use, and nearly 30% - were using traditional (and much less effective) methods (withdrawal, "natural" family planning). Abortion clients report a desired wait of around 3,6 years before the next child; 62,7% are planning to have a child in future. WHY: The principal reason they decided to have this abortion: not a good time to have a baby (28,2%) and socioeconomic reasons (26,4%); did not want more children (15,5%). 37,3% clients were explained how to care for yourself at home, after leaving the hospital; only 16,4% clients received family planning counseling prior to discharge. 15%report that they received no instructions about when to get a follow-up exam. Several conclusions we draw from these data are: The prevalence repeated abortion is high; contraceptive counseling in women's health services is currently inadequate.