Federation of Medical Women of Canada
Fédération des femmes médecins du Canada

MYTHS AND STEREOTYPES

INDUCED ABORTION AND MEDICAL ABORTION

Canadian women facing an unplanned pregnancy may now obtain surgical or medical abortion. Since July 2015, Health Canada approved the use of the therapeutic combination of mifepristone and misoprostol for the medical termination of a pregnancy up to 63 days (up to 70 days according to evidence).

Several myths and stereotypes NOT supported by scientific evidence are transmitted in the population. This fact sheet aims to bring facts and put these myths and stereotypes in perspective. It is intended to assist health care professionals in their counseling of people who have concerns with induced abortion.

#	Myths and stereotypes	Facts
1	"Abortion can lead to breast cancer."	Abortion does not increase a woman's subsequent risk of developing breast cancer.
2	"Abortion can lead to infertility. The risks of becoming infertile are greater with medical abortion."	Medical and surgical abortions have no impact on future fertility. Sexually transmitted diseases are the number one factor responsible for infertility and must be ruled out before any type of gynecological procedure.
3	"Abortion is more dangerous than childbirth."	Abortion is between 10 and 14 times safer than childbirth, regarding the risk of death and overall morbidity. Abortion is very safe when it is provided by registered health care professionals.
4	"Abortion causes emotional distress that leads to a mental illness such as post-abortion syndrome."	No such syndrome is scientifically or medically recognized. Since 1989, the psychological and medical communities have not found any evidence of the existence of a "post-abortion syndrome".
5	"Women use abortion as a contraceptive."	One in three Canadian women will have an abortion by the age of 45. You don't have to be "irresponsible" to need an abortion. The number of induced abortions performed yearly in Canada has been declining over the last 20 years. Studies show that better access to contraceptives and adequate sexual education are key factors in decreasing the number of unplanned pregnancies.
6	"Risks associated with medical abortion are significantly higher than those associated with surgical abortion."	First trimester medical abortion is as safe as first-trimester surgical abortion as shown by studies conducted over the last 30 years.
7	"Fetus feels pain during a medical or surgical abortion."	Studies show that the fetus is unable to feel pain before the third trimester of the pregnancy. Close to 90% of abortions are performed in the first trimester when the fetus is incapable of feeling pain.
8	"Medical abortion can be reversed."	Medical and surgical abortions are irreversible.
9	"Women can abort whenever they want and kill a perfectly healthy baby."	Late termination of pregnancy in the third trimester (28 weeks +) are performed for medical reasons (viability of the pregnancy or health risks for the woman).

While surgical abortion is performed with instruments in a specialized facility, medical abortion is induced by two medications. It is a process similar to a natural miscarriage that a woman experience in the discretion of her home. These

medication are mifepristone and misoprostol. Mifepristone blocks progesterone which supports of the early pregnancy. It is taken first, orally. Then, 24 to 48 hours later, misoprostol is absorbed between the gum and the inner cheek. Misoprostol stimulates uterine contractions and expulsion of the products of conception.

This therapeutic combination has few contraindications that must be ruled out by a health professional before use. Its effectiveness is 95% to 98% up to 63 days of gestation. The most notable side-effects are short-lived bleeding and cramping. Complications, such as hemorrhage or infection, are rare. They may require emergency care. It can be provided in primary care and every provincial government insurance plan covers it.

More information on Induced Abortion, Medical Abortion and unplanned pregnancy can be obtained on:

- https://www.sexandu.ca/pregnancy/unplanned-pregnancy/
- https://www.arcc-cdac.ca/resources/

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