Unsafe Abortion And Its Grave Effects -A Case To Understand Them All

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Abstract- Unsafe abortion refers to an abortion that is unclean or unhealthy, conducted by an incompetent or untrained birth attendant using improper procedures. According to the World Health Organization (WHO) (2011), an unsafe abortion is the termination of an unplanned pregnancy by incompetent personnel or in an atmosphere devoid of minimal medical standards, or both. [1] Many social, physical, and biological factors contribute to unsafe abortions and their related problems. A botched abortion may result in life-threatening consequences.

Herein, I discuss the example of a 25-year-old woman in her third pregnancy who used over-the-counter abortion medication, resulting in significant bleeding and hypovolemic shock. Only prompt treatment and check curettage could avert maternal suffering and more dangerous consequences. This study aims to examine the prevalence of unsafe abortions in India, as well as their causes and complications.

Index Terms- Abortion, anemia, infection, hypovolemic shock.

I. INTRODUCTION

Unsafe abortion is the termination of a pregnancy by incompetent personnel or in a setting devoid of minimal medical standards, or both. Unsafe abortion is a significant cause of <u>maternal mortality</u> and <u>morbidity</u> in the world. The majority of unsafe abortions occur in countries where abortion is prohibited, in underdeveloped nations where affordable, well-trained medical practitioners are scarce, or where modern contraception are unavailable. Unsafe abortion contributes to estimated 8- 18% of maternal mortality and is one of the leading causes of maternal mortality. About one in eight pregnancy-related deaths worldwide is associated with unsafe abortion[2]. Methods of unsafe abortion include:

• Attempting to rupture the amniotic sac within the uterus with a sharp object or wire (for example an unbent wire clothes hanger or knitting needle). This procedure can end in mortality due to infection or damage to internal organs (such as perforating the uterus or intestines). During pregnancy, the uterus relaxes and becomes relatively simple to pierce, hence one old approach was using a huge feather.

• Injecting the woman with hazardous combinations, such as chilli peppers and chemicals such as alum, Lysol,

This publication is licensed under Creative Commons Attribution CC BY. https://dx.doi.org/10.29322/IJSRP.13.09.2023.p141XX permanganate, or plant poison. This procedure may result in toxic shock and death for the woman.

• Inducing an abortion without medical supervision by self-administering abortifacient over-the-counter or illegal medications, or by utilising drugs not indicated for abortion but known to cause miscarriage or uterine contraction. Prostaglandins, ergot alkaloids, and oxytocin (whose synthetic counterparts are Pitocin and Syntocinon) are contraction-inducing drugs. Hazards include uterine rupture, irregular heartbeat, an increase in blood pressure (hypertension), a decrease in blood pressure (hypotension), anaemia needing transfusion, cardiovascular issues, pulmonary edoema, mortality, and severe bronchospasms in women with asthma. [3]

Unsafe abortions pose a variety of health hazards that can compromise women's well-being. The major and most lifethreatening complications that stem from unsafe abortions are incomplete abortion, heavy bleeding, infection, uterine perforation, etc[4].

II. CASE STUDY-

A 25 years third gravid presented in casuality in the condition of hypovolemic shock with severe bleeding p/v. on examination the patient was restless and irritable whereas the other vitals were normal. Patient had a history of 2 months of amenorrhea and unsafe abortion of pregnancy by over the counter drugs. Lab reports showed decreased Hb(3.00gm/dl, indicating severe anemia). US Doppler revealed retained products of conception. The patient was admitted and 2 units of blood was transfused after which a decision of check curettage was made under GA. After the procedure the patient was kept on observation and thereafter discharged with an uneventful admission.

III. DISCUSSION-

Ten women die of unsafe abortions every day in India which sees nearly 68 lakhs pregnancy terminations every year. Unsafe abortion is the third leading cause of maternal deaths in the

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country, contributing eight per cent of all such deaths annually. It is estimated that 68 lakh abortions occur in the country every year and only a small percentage is related to sex selections.[5] Unwanted or unplanned pregnancies (most usually), coerced abortions, rape, inadequate counselling from guides (medical professionals, NGOs, etc.), and pregnancy-related abuse and violence are the leading reasons of unsafe abortions. According to the World Health Organization (2015), "an estimated 21.6 million unsafe abortions occurred globally in 2008, virtually mostly in developing countries," and "one in ten pregnancies worldwide result in an unsafe abortion" (WHO, 2011). In developing nations, two out of five women under the age of 25 and one out of seven women under the age of 20 get unsafe abortions[6]. Many social, physical, and biological factors contribute to unsafe abortions and their related problems. A botched abortion may result in life-threatening consequences. WHO (2011) reports that 25% of women with severe problems require emergency medical care. Among these problems are incomplete abortion, severe bleeding, infection, and uterine perforation, among others. [7].

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