

# Maintaining a first-trimester termination of pregnancy service in an Australian regional hospital during the COVID-19 pandemic

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## Introduction:

Rural and regional women face challenges accessing abortion care, including financial and geographical barriers. <sup>1</sup>

## Hypothesis:

The COVID-19 pandemic would cause significant dysfunction to the flow and safety of our abortion service.

## Study aim:

To maintain our abortion care service and document the specific strategies used.

## Background:

Access to abortion must be timely.

- Medical terminations  $\leq 9$  weeks
- Surgical terminations  $\leq 12$  weeks
- $> 12$  weeks  $\rightarrow$  referred to city
- $> 24$  weeks  $\rightarrow$  legal restrictions ++



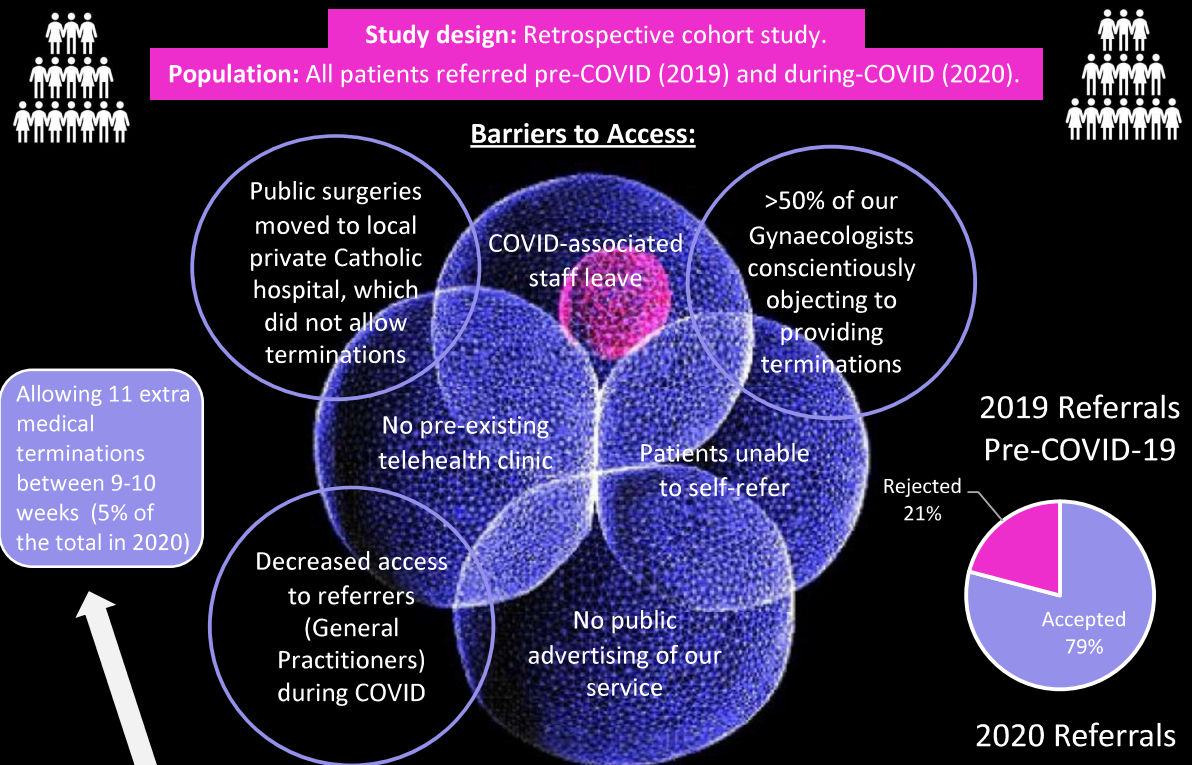
Women were disproportionately less likely to access health services during COVID-19. <sup>2</sup>

Why access is important: 1-in-4 pregnancies in Australia are electively terminated. <sup>3</sup>

**Study design:** Retrospective cohort study.

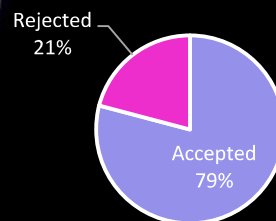
**Population:** All patients referred pre-COVID (2019) and during-COVID (2020).

## Barriers to Access:

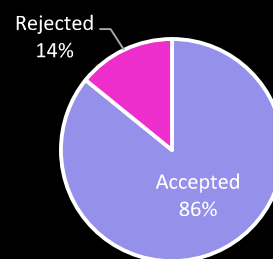


Allowing 11 extra medical terminations between 9-10 weeks (5% of the total in 2020)

## 2019 Referrals Pre-COVID-19



## 2020 Referrals During COVID-19



Extending medical termination access to 10 weeks gestation.

Accepting self referrals

**Methods:** Actions taken to maintaining abortion care during the pandemic

A motivated and passionate clinical team.

Reduced Anti-D provision as per updated national guidelines.

## Results:

Using these methods, we increased access to local abortion care during the pandemic.

	Referrals	Accepted	Medical termination	Surgical termination
2019	239	189	177	12
2020	219	188	171	17

## References:

1. Shankar M, Black KI, Goldstone P, et al. Access, equity and costs of induced abortion services in Australia: a cross-sectional study. *Australian and New Zealand Journal of Public Health*. 2017;41:309-314. doi.org/10.1111/1753-6405.12641
2. Pujolar G, Oliver-Anglès A, Vargas I et al. Changes in Access to Health Services during the COVID-19 Pandemic: A Scoping Review. *Int J Environ Res Public Health*. 2022;19(3):1749. doi:10.3390/ijerph19031749
3. Wright SM, Bateson D, McGeechan K. Induced abortion in Australia: 2000-2020. *Family Planning NSW*. 2021.

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