

Termination of Pregnancy: A Comprehensive Overview

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Abstract

Termination of pregnancy, commonly known as abortion, is a critical public health issue that encompasses various medical, ethical, and socio-cultural dimensions. This abstract explores the two primary types of abortion: medical and surgical. Medical abortion involves the use of medications to safely terminate a pregnancy, typically within the first 10 weeks, while surgical abortion employs various techniques to remove the contents of the uterus, often performed in clinical settings. The legal landscape surrounding abortion varies widely, with some countries allowing it under specific circumstances, while others impose stringent restrictions, leading to unsafe practices that significantly contribute to maternal morbidity and mortality. Access to safe and legal abortion services is essential for safeguarding women's health and well-being, as unsafe abortions remain a leading cause of complications and death among women, particularly in regions with limited healthcare access. The psychological impact of abortion is also significant, with women experiencing a range of emotions post-procedure. These emotional responses can be influenced by individual circumstances, including societal stigma, personal beliefs, and available support systems. Consequently, access to counseling and mental health resources is crucial for helping women navigate their feelings after termination.

Introduction

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Mifepristone:

Mifepristone is a synthetic progesterone antagonist that is used in medical abortion. It works by blocking the action of progesterone, a hormone that is essential for the development of the fetus. This leads to the detachment of the fetus from the uterine wall and its subsequent passage through the vagina.

Misoprostol:

Misoprostol is a synthetic prostaglandin that is used in medical abortion. It works by causing the uterus to contract, which leads to the detachment of the fetus from the uterine wall and its subsequent passage through the vagina.

