

Self-managed abortion: How well does misoprostol alone work to end pregnancies even at later gestation periods?

As more than a dozen states banned abortion in the past year, women with unwanted pregnancies have turned in growing numbers to self-managed medication abortions.

But the arduous and time-consuming methods needed to procure the drugs create delays, often meaning pregnancies are more advanced by the time the drugs arrive. The [new study](#), one of the first to report on self-managed medication abortions carried out after the first trimester of pregnancy, offers these women some reassurance, researchers said.

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The two-drug regimen of mifepristone and misoprostol is approved by the Food and Drug Administration for use through only 10 weeks of pregnancy, under the supervision of a health care provider.

But the W.H.O., taking into account shortages of health care providers in much of the developing world, endorses self-managed medical abortions in pregnancies of up to 12 weeks without medical supervision.

The new report was a sub-analysis of a larger study that looked at 1,352 women who self-managed abortion at different stages of pregnancy, and the number with more advanced gestations was relatively small.

Only three participants self-managed abortions with gestations of 17 weeks and longer, and the study's authors called for more research into medication abortion and later pregnancies.

[**This is an excerpt. Read the full article here**](#)