

# **Abortion Safety by Facility Type:**

## What the evidence shows

Decades of research confirm that abortion is one of the safest outpatient procedures performed.<sup>1</sup> Major complications are rare,<sup>2</sup> and a pregnant person is 14 times more likely to die from childbirth than from abortion.<sup>3</sup>

To understand if the safety of abortion varies depending on the type of facility in which the abortion is provided, researchers compared rates of complications for abortions performed in Ambulatory Surgical Centers (ASCs) versus office-based facilities.<sup>4</sup>

The study, published in the *Journal of the American Medical Association*, found:

- Major complications occurred only in one third of one percent of cases (0.3%),<sup>4</sup> corroborating previous findings that abortion is very safe.<sup>1, 2</sup>
- The study also found no statistically significant differences in abortion complication rates by facility type.<sup>4</sup>

This means that abortions performed in office-based settings are just as safe as abortions performed in ASCs.<sup>4</sup> This is the case both for first and second trimester abortion. These findings suggest that laws requiring that abortions be performed in ASCs are unnecessary for patient safety.

Another study, which examined complications following miscarriage treatment across facility types, found no significant difference in complications between ASCs and office-based settings for miscarriages treated with procedures. <sup>5</sup> Miscarriage treatment procedures are very similar to abortion procedures.

Finally, a systematic review of how facility characteristics affect safety found no difference in patient safety for outpatient procedures performed in ASCs vs. office-based settings for all procedure types (not just abortion).<sup>6</sup>

### **Experts Agree**

A body of health professionals reviewed available evidence related to abortion facility type, and concluded that there are no identifiable safety concerns based on facility type. Similarly, in their review of the scientific evidence, the National Academies of Engineering, Sciences, and Medicine (NASEM) concluded that most abortions can be safely provided in office-based settings. 1

#### Abortion safety Abortion safety in office-based in Ambulatory **Surgical Centers** settings 96.7% 96.7% No complications No complications 3.0% Minor 3.0% Minor complications complications 0.3% Major 0.3% Major complications complications

Abortions performed in office-based settings are just as safe as abortions performed in Ambulatory Surgical Centers.<sup>4</sup>

#### **Evidence-Based Bottom Line**

Abortions performed in office-based settings are just as safe as abortions performed in Ambulatory Surgical Centers. Laws that require that abortions be performed in ASCs are not justified based on scientific evidence.

#### References

- National Academies of Sciences, Engineering, and Medicine. The safety and quality of abortion care in the United States: National Academies Press; 2018.
- Upadhyay UD, Johns NE, Barron R, Cartwright AF, Tapé C, Mierjeski A, McGregor AJ. Abortion-related emergency department visits in the United States: An analysis of a national emergency department sample. *BMC Medicine*. 2018;16(1):88.
- 3. Raymond EG, Grimes DA. The comparative safety of legal induced abortion and childbirth in the United States. *Obstetrics & Gynecology*. 2012;119(2):215-9.
- Roberts SCM, Upadhyay UD, Liu G, Kerns JL, Ba D, Beam N, Leslie DL. Association of facility type with procedural-related morbidities and adverse events among patients undergoing induced abortions. *Journal of the American Medical* Association. 2018;319(24):2497-506.

- Roberts SCM, Beam N, Liu G, Upadhyay UD, Leslie DL, Ba D, Kerns JL. Miscarriage treatment–related morbidities and adverse events in hospitals, ambulatory surgery centers, and office-based settings. *Journal of Patient Safety*. 2018.
- Berglas NF, Battistelli MF, Nicholson WK, Sobota M, Urman RD, Roberts SCM. The effect of facility characteristics on patient safety, patient experience, and service availability for procedures in non-hospital-affiliated outpatient settings: A systematic review. *PloS One*. 2018;13(1):e0190975.
- Levy BS, Ness DL, Weinberger SE. Consensus guidelines for facilities performing outpatient procedures: cvidence over ideology. Obstetrics & Gynecology. 2019;133(2):255-60.

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