ABSTRACT

BACKGROUND: Second trimester termination of pregnancy is one of the greatest challenges in modern obstetric practice and more risky than during first trimester. The main concern of obstetrician is to provide the most effective, safest and cost-effective regimen with least or no complications. Induced abortion means willful termination of pregnancy before the period of viability.

METHODS: This is the comparative study of foley induction and misoprostol versus mifepristone and misoprostol in second trimester abortion

Total of 100 eligible women were enrolled for this study and were divided into two groups of 50 each. This study was conducted in Government Mohan Kumaramangalam Medical College Hospital, Salem.

GROUP A (Foley induction with misoprostol)- Intracervical foley catheter was inserted and Vaginal Misoprostol 400mcg was repeated every 4 hours for the maximum of 4 doses

GROUP B (Mifepristone and misoprostol)- Oral Mifepristone 200mg given orally followed by Vaginal misoprostol 400mcg every 4 hours for the maximum of 4 doses

RESULTS: The mean induction to abortion interval in foley induction with misoprostol is 8.84 hours whereas in mifepristone and misoprostol group is 8.14 hours which is not statistically significant. Success rate in foley induction with misoprostol
group is 92% where as in the mifepristone group it is 100%. Side effects and complications are almost equal in both the groups.

CONCLUSION:

Mifepristone- misoprostol combination is an effective option for second trimester abortion where cost is not a consideration. In places where mifepristone is not affordable, intracervical foley catheter and misoprostol is a safe and effective method which is comparable to the mifepristone-misoprostol group with lower cost and no additional maternal risks.