

Research Briefing

How satisfied were clients with their telemedical abortion at BPAS?

Marielle E. Meurice, Katherine C. Whitehouse, Rebecca Blaylock, Jenny J. Chang, Patricia A. Lohr

Background

In response to the COVID-19 pandemic, the British Pregnancy Advisory Service (BPAS) rapidly transformed its service to provide predominantly telemedical abortions. We define telemedical abortion as a medical abortion with initial consultation over the phone and using abortion pills at home, either after collecting the pills from a clinic, or receiving them in the post.

To understand BPAS patients' experience with this new service, we invited those who had a telemedical abortion during the COVID-19 pandemic to take a web-based survey.

Methods

This is an evaluation of a selection of patients who used abortion medications at home from 11 May to 10 July 2020 at BPAS. We invited patients via text message to complete a websurvey 2-3 weeks after their abortion. We asked patients about their satisfaction and their overall experience with the telemedical abortion. We used statistical analysis to explore whether there was relationship between characteristics (such as their age or whether they have previously given birth) and how satisfied they were with the abortion. We also looked at whether they had contacted a healthcare provider during their abortion, as a way of assessing whether they needed help or had any concerns during the process.

Key Findings

A total of 1,333 patients completed the survey. Most (76%) described using the

abortion pills at home as "straightforward". The majority (97%) were "very satisfied" or "satisfied" with their overall experience.

We found some correlations between certain patient characteristics and their satisfaction. For example, patients who had previously given birth were more than twice as likely to be satisfied with their abortion experience. Patients who said they were satisfied with pain control during the abortion were also more likely to be satisfied overall. On the other hand, patients who were not satisfied with pain control were more likely to contact a healthcare provider.

Approximately 15% of patients said they contacted a healthcare provider during their abortion. Most of these patients (77%) contacted the BPAS telephone service. When asked hypothetically if they needed another abortion in the future, most patients (78%) said they would choose telemedicine again.

Conclusions

Our study showed that the majority of patients were satisfied with telemedical abortion. We also found that most patients do not need healthcare provider support when taking medicines at home or during the abortion process. Telemedicine has the potential to significantly reduce people's barriers to accessing abortion care, both during the pandemic and beyond.

Read the paper

https://www.contraceptionjournal.org/article/S00 10-7824(21)00143-8/fulltext