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Clinical experience with synthetic osmotic dilators in cervical preparation to abortion

Introduction: Reducing maternal morbidity and mortality related to pregnancy termination is one of the main objectives of female reproductive health preservation. Cervical preparation is an important aspect of safe abortion practice. Forceful cervical dilatation increases the risk of traumas, hemorrhages, and other complications. Thus, the searching of safe methods of cervical preparation remains relevant. Dilapan-S is a hygroscopic cervical dilator, which does not contain any pharmacological agents. The aim of our study is to assess the results of pregnancy termination in the second trimester using synthetic osmotic dilators.

Materials and methods: The study included 216 women who had medical pregnancy termination in the second trimester in gestational age over 12 and up to 21 weeks 6 days. Group 1 included 135 patients who underwent medical abortion. Surgical abortion was performed in group 2 (n=81). Three Dilapan-S for nulliparous women and four for parous women provided sufficient cervical preparation. In group 1, we used two doses of sublingual misoprostol (400 microg) in 4hour intervals after removing of Dilapan-S. The mean duration of cervical preparation by Dilapan-S was 12±0.5 hours.

Results: The interval between the misoprostol intake and pregnancy termination in group 1 averaged 8.8±0.5 hours: 9.5±0.8 hours in nulliparous and 7.8±0.6 hours in multiparous. In group 2, neither woman required additional mechanical dilatation. There were no difficulties associated with the insertion of Dilapan-S in any of the patients. Infectious or inflammatory complications have not been recorded in any of the patients both in the early and late post-termination period.

Conclusion: The additional use of Dilapan-S for cervical preparation allows for faster pregnancy termination and reduces the length of hospital stay without increasing complications rate and side effects.

Biography

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