Misoprostol
General Information

**Definition:**
Misoprostol (Cytotec) is a medication that is currently used to prevent gastric ulcers in patients taking aspirin and Non-Steroidal Anti-Inflammatory drugs. Most recently, it holds promise as a product that assists women in more rapidly delivering pregnancy losses without surgery.

**Anatomy/Physiology:**
Misoprostol is a synthetic prostaglandin E1 analog. Misoprostol increases the stomach mucus section and increases bicarbonate ion secretion. It also inhibits stomach acid secretion. The medication also seems to induce ripening/softening of the cervix while inducing uterine contractions.

**Indications:**
Misoprostol may be considered in the patient with a spontaneous pregnancy loss. Those with a embryo/fetus (Missed Abortion) or an empty sac (Blighted Ovum) are potential candidates. The ideal candidate for the medication would be someone who has a history of past damage to her uterine cavity such that she is trying to avoid surgical intervention. It should be made quite clear that the medication is not FDA approved to augment pregnancy loss. While research is ongoing, we here at SRMS will limit the use of Misoprostol to $\leq 12$ weeks gestational age.

**Contraindications:**
Unless otherwise directed, women with any of the following should not use misoprostol:
- Individuals with a viable pregnancy
- Patients with a history of Inflammatory Bowel Disease
- History of sensitivity to the drug

**Administration:**
Current recommendations are to place four 200 mg pills into the vagina each day for two consecutive days.

**Complications:**
- Abdominal pain and diarrhea (13%)
- Uterine Cramps (100%)
Misoprostol Patient Information (cont.)

- Uterine Bleeding (100%)
- Uterine rupture when there is a history of past Cesarean Section and a term gestation. (4%)

**General Results:**
It is estimated that about 80% will lose the pregnancy tissue without surgical intervention within two days. Since the process is hastened, the actual blood loss is reduced when compared to a natural pregnancy loss. For those who do not pass all of the tissue, a D&C is usually required to remove all the uterine contents. Oral pain medications are usually sufficient to combat the pain experienced during the process.

The majority (90%) of those taking the medication expressed satisfaction with that alternative therapy.

**Summary Comments:**
While not for everyone, Misoprostol has the potential to hasten the natural pregnancy loss process. It supplies an alternative treatment compared to the surgical or natural pregnancy loss options.

**Reference:**