

All of these methods kill the baby. Possible complications to the mother are not unusual including risk to future pregnancies.

Fetal Development**Chemical Methods****Surgical Methods****1st Trimester****(0 to 12 weeks)**

The medical community divides the baby's development into 3 period or trimesters.

RU 486 - 5 to 7 weeks; use 6 wk model

Process includes 2 drugs; the first drug blocks nutrients from getting to the baby; baby withers and dies; the second drug produces labor contractions to expel the dead baby from the mother's body; procedure takes place at home, not at a medical facility.
Possible Complications: *bleeding, nausea, vomiting, pain, incomplete abortion requiring surgery, psychological trauma as a result of seeing her dead baby.*

SUCTION - 8 to 12 weeks; use 10 wk model

Most common abortion; cervix is stretched open; a suction tube with a knife sharp edge is inserted in the womb; the baby is pulled apart by this suction/vacuum machine into a mesh bag; scraping of the womb occurs to insure all the parts of the baby are out of the womb.
Possible Complications: *Heavy bleeding, infection, perforation of the uterus, incomplete abortion.*

2nd Trimester**(13 to 24 weeks)****Prostaglandin - 13 to 24 weeks; use 14 wk. model**

Hormone drugs that induce violent contractions; brings about premature labor; causes the baby to be born so early that he or she cannot survive.
Possible Complications: *Heavy bleeding, extremely hard contractions, blood clots, uterine rupture, and the baby can be born alive.*

Saline - after 16 weeks; use 18 wk model

Salt poisoning - a strong salt solution injected into the womb; the baby breathes & swallows the salt; the salt solution suffocates him; the baby's skin is burned; after the baby dies, labor begins.
Possible Complications: *infection, blood clots, extreme pain, severe psychological disturbances from feeling & seeing death.*

Intracardiac Injection - approx. 24 weeks; use largest model

Used as selective reduction on multiple babies in the womb (twins or more); used to kill babies with defects or handicaps; a poison solution is injected into the baby's heart; stops beating and the baby dies.
Possible Complications: *could cause death of all the babies*

D & E - 13 to 24 weeks; use 14 wk. model

The Cervix is stretched open; a tong like instrument is inserted to grab parts of the baby; the baby is dismembered & removed piece by piece; the skull is crushed to fit through the opening.
Possible Complications: *profuse bleeding, uterine perforation, incompetent cervix, and blood clots.*

Hysterotomy - approx. 24 weeks; use largest model

Called a "C" Section abortion; an incision is made in the womb; the premature baby is lifted out; the child's umbilical cord is cut; he or she is left in a basin to die, although children born this early can survive.
Possible Complications: *heavy bleeding, infection, blood clots; psychological trauma from experiencing a death.*

3rd Trimester**(25 to 38 weeks)****Instructions for Teacher:**

Create a chart on a board in your classroom using the "bold titles" on this chart of Fetal Development (include the weeks), Chemical Methods, Surgical Methods, and all the types (only headings) under each method. The italicized descriptions under each method are intended to be given verbally. See Appendix F for more detailed information. Familiarize yourself as much as possible with this information.

Partial Birth - see news paper ad - Performed in the late

2nd & 3rd Trimester; cervix is stretched and opened; using forceps the legs are pulled through the birth canal; the legs & entire body are pulled out of the mother leaving the head inside; while the baby is kicking, medical scissors are inserted in the back of the baby's skull making a hole to suction out the brain; At this point the baby dies, the head collapses and the dead baby is extracted.
Possible Complications: *cervical incompetence; uterine rupture; puncture of the uterus; infection & heavy bleeding.*