

**From: Redacted**

**Sent:** 08 January 2018 22:32

**To: Redacted**

**Subject:** Fwd: TOP - taking Misoprostol at home

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**From: Redacted**

**Sent:** Monday, January 8, 2018 6:10:29 PM

**To: Redacted**

**Cc: Redacted**

**Subject:** RE: TOP - taking Misoprostol at home

Dear **Redacted**,

Happy New Year to you and many thanks for this reminder. Here is what I have found – speak soon!

Best wishes

**Redacted**

1. Astle et al (2011) data from Edinburgh where unscheduled follow-up and contraception uptake of MTOP in different settings (in – and outpatient) were compared.
2. Lohr et al 2010 – encouraging data on what women want in terms of place of treatment
3. Hamoda et al 2005 - this is the original UK paper from Aberdeen
4. Norwegian experience (long distance travel to access healthcare being a major factor there)

5. Swedish study (Kopp-Kallner et al 2010) of large population here

<https://doi.org/10.1093/humrep/deq099>

6. same author examining women's acceptability of home administration in Sweden here

[http://www.contraceptionjournal.org/article/S0010-7824\(11\)00482-3/fulltext](http://www.contraceptionjournal.org/article/S0010-7824(11)00482-3/fulltext)

7. finally, the WHO bulletin Meta-analysis is also reassuring, but France is the only EU country contributing data. They conclude:

#### Implications

There is no evidence that home-based medical abortion is less effective, safe or acceptable than clinic-based medical abortion. Simplified protocols could give greater access to medical abortion to women living in restrictive and/or resource-limited settings where mortality related to unsafe abortion remains high.<sup>36</sup> Adequate safety measures and support systems should be in place before homebased medical abortion can be offered. To further clarify the comparative effectiveness,

safety and acceptability of homebased medical abortion, further studies should be conducted to explore different regimens, routes of administration and its use for gestational ages, as well as on the use of misoprostol only for home-based medical abortion, given the high cost of mifepristone and the fact that its use is restricted in many settings. ■

**From: Redacted**

**Sent:** 08 January 2018 14:49

**To: Redacted**

**Cc: Redacted**

**Subject:** TOP - taking Misoprostol at home

Dear **Redacted**

Happy New Year to you. It was very good to meet up with you both before Christmas, and extremely helpful to hear your perspectives on a number of practical aspects on the sexual health and TOP services.

You mentioned that you would be able to send some information to us about quality and safety aspects of your proposal that taking Misoprostol at a woman's home address ( as licenced premises) was a viable and safe option. In particular, we were interested to see the inclusion/exclusion criteria and safety audits where this has been in practice, I think you mentioned Scotland.

Kind regards, and very best wishes for 2018

**Redacted**

**Redacted**

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