

MISO-FEM[®] misoprostol 200 mcg

Tablets containing 200 mcg of Misoprostol.

An effective, patient-centered, and safe option
for uterine evacuation.



CHARACTERISTICS



MISO-FEM[®] (200 mcg of misoprostol) is a synthetic prostaglandin analogue used in the management of obstetric and gynecological conditions.



Prequalified by the
World Health
Organization.*

*Only applicable to specific
manufacturer



Available Presentation:
Pack of 4 tablets and Pack
of 12 tablets.



2 years shelf life.

EFFECTIVENESS

- For first-trimester medical abortion: effective both alone (87%)¹ and in combination with mifepristone (96%)².

MECHANISM OF ACTION

- Misoprostol acts to soften the cervix and contract the uterus to expel uterine contents.

BENEFITS

- **Easy to use:** The dosage for this method is simple and straightforward, making it user-friendly and easy to administer.
- **Convenience:** It can be taken privately at home, providing a convenient option for individuals seeking privacy and comfort during the process.
- **Non-invasive:** This method does not require anesthesia or surgery, eliminating the need for invasive procedures and their associated risks.

CONTRAINDICATIONS

Contraindications to medical abortion drugs include suspected ectopic pregnancy, bleeding disorders, allergies, or the presence of an IUD.

USES

- Miscarriage management: effective and highly acceptable for treating miscarriage or incomplete abortion.
- Cervical ripening: effective ripening agent prior to first-trimester aspiration abortion, used prior to endometrial biopsy or IUD insertion.
- Labor induction: highly effective for inducing vaginal delivery at a dose of 25 mcg.
- Postpartum hemorrhage (PPH): used for prevention and treatment of PPH.

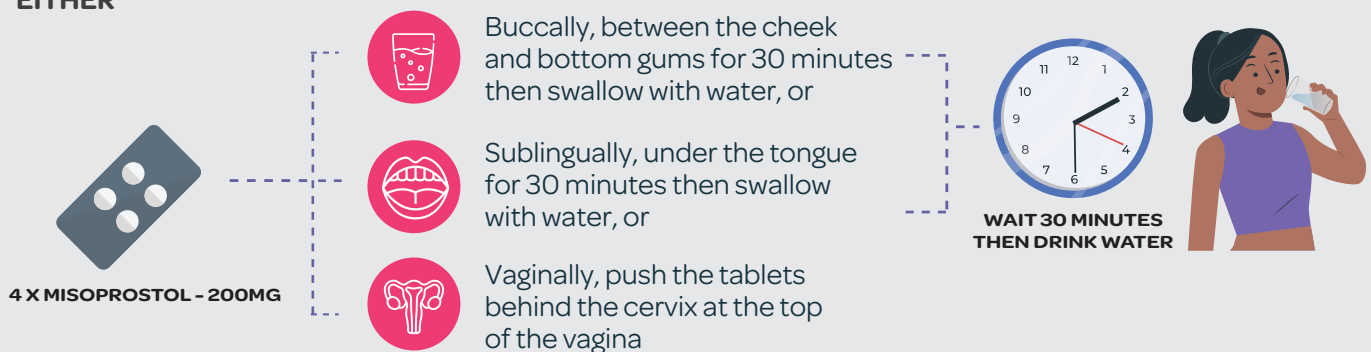
ADMINISTRATION

Administer 4x200mcg misoprostol pills³:

- Offer a non-steroidal inflammatory drug such as ibuprofen to take 30 minutes before giving misoprostol. An anti-emetic can also be prescribed to manage side effects.

CHOOSE A MODE OF ADMINISTRATION:

EITHER



Consider repeat doses of misoprostol to complete evacuation, especially as gestation increases.

WHAT TO EXPECT:

- Misoprostol may cause shivering, fever, diarrhea, or vomiting.
- After 1-4 hours, women will experience painful cramps and bleeding and pass clots of blood and tissue.
- This lasts for several hours until the pregnancy is passed.
- Cramping and bleeding will subside, but pain may persist on and off for 2-3 days.
- Bleeding and spotting may persist for several days or longer.

AFTERCARE

- If pain or bleeding worsens, or if there is no bleeding after taking misoprostol advise the women to seek medical advice.
- Provide information and counseling for contraception and signpost to other services.
- Offer psychological support.
- Routine follow-up is not always required, check local protocols.

¹ Raymond, Elizabeth G. MD, MPH; Harrison, Margo S. MD, MPH; Weaver, Mark A. PhD. Efficacy of Misoprostol Alone for First-Trimester Medical Abortion: A Systematic Review. *Obstetrics & Gynecology* 133(1):p 137-147, January 2019.

² Chen, Melissa J. MD, MPH; Creinin, Mitchell D. MD. Mifepristone With Buccal Misoprostol for Medical Abortion: A Systematic Review. *Obstetrics & Gynecology* 126(1):p 12-21, July 2015.

³ Abortion care guideline. Geneva: World Health Organization; 2022.