

Science Says

Telehealth medication abortion care is safe and effective

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The Society of Family Planning, with critical leadership from Leah Koenig, MSPH, Andréa Becker, PhD, and Ushma Upadhyay, PhD, MPH, compiled the following high-level summary of key evidence on the safety and effectiveness of telehealth medication abortion care to serve as a resource to members and advocates.

Telehealth medication abortion care involves remote patient-provider interactions, delivery of abortion medications by mail, and remote follow-up care.

- The expansion of telehealth medication abortion care follows longstanding trends toward removing barriers and expanding access to abortion care.¹
- Telehealth medication abortion care in the US initially took place entirely under a site-to-site model, with a patient located in one health center interacting remotely with a provider located in another health center.²⁻⁸ Due to a now-removed in-person distribution requirement on mifepristone, medications were dispensed in person. These patients received screening tests including ultrasounds to establish pregnancy duration and rule out ectopic pregnancy.
 - This model was first used in Iowa in 2008. By 2019, site-to-site models had expanded to other states including Alaska, New York, Maryland, Montana, and Nevada.⁸
- From 2016-2021, the TelAbortion study provided direct-to-patient telehealth abortion care in 13 states and Washington, DC, within the context of a clinical study. In this model, all patients still obtained a screening ultrasound before receiving the medications by mail at home or another location.⁹
- During the COVID-19 pandemic, direct-to-patient “no-test” telehealth medication abortion care, which forgoes routine screening tests such as ultrasound, became the prevailing telehealth abortion care model. Omitting an ultrasound and in-clinic medication dispensing facilitates abortion access by reducing travel and costs and increasing privacy. See details on the safety and efficacy of this model below.

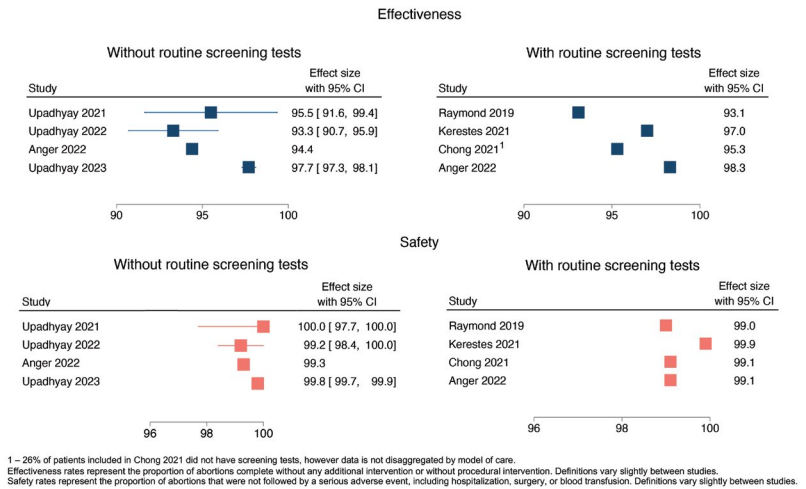
- State laws related to telehealth medication abortion care are complex and frequently changing.*
- Some patients also self-manage medication abortions using online services. This model is distinct from telehealth medication abortion care because it takes place outside of the US healthcare system. This model has also been demonstrated to be safe and effective.^{10,11}

Medication abortion care provided by telehealth is highly safe and effective.

- Research has demonstrated that the safety and effectiveness of telehealth medication abortion care is comparable to in-clinic medication abortion care models, which are 95-97% effective and have a serious adverse event (including hospitalization, blood transfusion, or surgery) rate of 0.3%.^{12,13}
 - Among patients who had abortions through the TelAbortion study, which required screening tests, nearly all (95%) had complete abortions and <1% experienced a serious adverse event. These rates are similar to clinic-based models.^{9,14}
 - Another TelAbortion study in Hawaii found an effectiveness rate of 97% among patients who had telehealth abortions with delivery by mail.¹⁵
 - Evidence supports the provision of telehealth medication abortion care with or without screening tests.
 - A study of 141 patients in California who obtained no-test telehealth abortion care from a virtual abortion clinic found an effectiveness rate of 95%.¹⁶
 - One multi-center study included 3,779 patients who received no-test medication abortion either in-person or through telehealth. This study found similar effectiveness and safety rates among those provided care in person or by telehealth.¹⁷ Additionally, both no-test models were as safe and effective as in-clinic care with screening tests.
 - A study of 334 patients in Hawaii found similar rates of effectiveness when patients did and did not receive screening ultrasound (97% vs. 96%).¹⁵
 - One TelAbortion study that included 412 patients compared telehealth abortions provided with and without screening ultrasound and found similar rates of ongoing pregnancy and serious adverse events. However, this study found higher rates of post-abortion interventions among the group that did not receive a screening ultrasound (6% vs. 2%).¹⁸
 - Studies have found low rates of ectopic pregnancy among patients who obtain no-test telehealth abortion care, suggesting that telehealth abortion care screening using patient history is effective at identifying patients at risk of ectopic pregnancy.^{14,16-19}
- Research demonstrates that abortion care models that forego Rh testing and anti-D immunoglobulin administration are safe due to very low risk of Rh sensitization following early abortion.^{20,21}

*See www.rhites.org for more information.

Safety and Effectiveness of Telehealth Medication Abortion



- Recent findings from a large national study suggest that multiple models of no-test telehealth medication abortion care, including synchronous with real-time phone and/or videoconferencing between patient and provider or asynchronous, which is entirely using secure messaging, are comparably safe and effective.¹⁹
- Evidence from outside of the US also supports the safety and effectiveness of telehealth medication abortion care.

- Evidence from Canada, where telehealth abortion care has been available since 2017, found comparable safety and effectiveness between medication abortion care provided by telehealth and from a clinic.²²
- A 2021 national study in the United Kingdom of over 50,000 abortions found similar rates of safety and effectiveness among patients who received in-clinic medication abortion with screening ultrasound and those who obtained telehealth without routine ultrasound.²³
- A study evaluating the implementation of no-test telehealth abortion care in Scotland in 2020 found an effectiveness rate of 98%.²⁴

- Clinical guidance, including guidelines from the American College of Obstetricians and Gynecologists, Society of Family Planning, and the National Abortion Federation, support the provision of telehealth medication abortion care.²⁵⁻²⁶

Telehealth medication abortion care offers benefits beyond safety and effectiveness and may contribute to expanded abortion access.

- Research has demonstrated that patients are highly satisfied with telehealth medication abortion care.^{9,14,27,28}
 - Patients cite greater privacy, convenience, faster access to care, and lower cost as reasons for using telehealth.^{27,29,30}
 - These features may be especially beneficial to those who face the most barriers to abortion clinics, including young people, people of color, people who reside in rural areas or far from abortion clinics, and trans and nonbinary people.³¹⁻³⁴
- Telehealth medication abortion care reduces abortion-related travel and expands geographic access to abortion.^{31,35}

Note: Terminology (eg, no-test, provider) reflects language used in the research cited in this document. However, the Society recognizes that some of these terms may be less commonly used outside of family planning research and may not be appropriate to use with all audiences. Recommended language will continue to evolve.

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