A Choice Without Information Is Not a Choice

We have read with interest the article “The Incidence of Menstrual Regulation Procedures and Abortion in Bangladesh, 2014” [2017, 43(1):1–11, https://doi.org/10.1363/43e2417], by Susheela Singh et al. The article uses the Bangladeshi government’s definition of menstrual regulation (MR): “the procedure of regulating the menstrual cycle when menstruation is absent for a short duration.” When a search is made for “termination of pregnancy” in the thesaurus vocabulary for PubMed, the retrieved term is “abortion, contraception use and maternal mortality estimates, family planning, and, more recently, to medication MR (or MRM), the dual regimen of mifepristone and misoprostol, when provided within approved limits and by authorized providers. It is also the term that has been used since the MR procedure was first permitted by the Bangladesh government in 1979. It is thus not particularly surprising that studies indexed in PubMed using the term MR were all or almost all conducted in Bangladesh, because this term is widely understood and used in the country. Abortion is illegal in Bangladesh except to save the woman’s life, and abortion services would be against the law except when provided for this reason.

We agree that informed consent is a key component of all medical services, including sexual and reproductive health care. Previous research has found, however, that women in Bangladesh (including those living in rural or poorer areas) often do not distinguish MR, the safe procedure that is authorized by government, and illegal abortion services. This can actually be a barrier to receiving safe MR services from trained providers. In a report accompanying our article, we recommended that the government do more to educate women about the MR program as well as about sources for obtaining MR services from trained providers and the gestational limits under which it can be provided.

REFERENCES