TABLE 1. Criteria for classification of postabortion care patients

Certainly had an induced abortion (at least one of the following)
Patient reported having done something to cause the abortion
Provider reported suspecting that patient did something to cause the abortion
Provider reported evidence of trauma or foreign body in patient's genital tract

Probably had an induced abortion (both of the following)
Provider reported evidence of sepsis/peritonitis
Patient reported that pregnancy was unplanned†

Possibly had an induced abortion (one of the following)
Provider reported evidence of sepsis/peritonitis
Patient reported that pregnancy was unplanned†

Likely had a spontaneous abortion
Remaining postabortion care patients

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†Patient reported not using a contraceptive method at the time of conception, or that she did not want the pregnancy at the time or at all.

TABLE 2. Medical criteria for classification of abortion-related morbidity

Signs of abortion, but no morbidity (requires all of the following)
Woman reported using misoprostol
No symptoms/signs of morbidity†
Temperature ≥35.1°C but ″38.9°C with no clinical signs of infection‡
Admitted for <24 hours and discharged in good health

Mild morbidity (requires all of the following)
Woman used misoprostol and was hospitalized for ≥24 hours or woman did not use misoprostol
Temperature ≥35.1°C but ″38.9°C with no clinical signs of infection‡
Hemorrhage not requiring blood transfusion

Moderate morbidity (requires ≥1 of the following)
Temperature 37.3–38.9°C with clinical signs of infection‡
Clinical signs of infection alone‡
No sign of shock§
No organ or system failure††
Hemorrhage not requiring blood transfusion

Severe morbidity (requires ≥1 of the following)
Death
Shock§
Organ/system failure††
Temperature ≥39°C or <35°C (hypothermia) with clinical signs of infection‡
Generalized peritonitis
Hemorrhage requiring blood transfusion

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†No clinically significant bleeding (i.e., clinical intervention not required) or signs of infection.
‡Can include temperature ≥37.3°C and abdominal/uterine tenderness with or without foul smelling vaginal discharge, pelvic abscess or pelvic peritonitis. §Can manifest as a persistent systolic blood pressure ″80 mmHg alone or a persistent systolic blood pressure ″90 mmHg with a pulse rate at least 120 bpm, and restlessness, reduced consciousness, cold clammy peripheries, requiring administration of IV fluids.††Can include liver failure, renal failure, cardiac arrest or failure, respiratory distress syndrome, coma or disseminated intravascular coagulopathy.

FIGURE 1. Percentage distribution of postabortion care patients at Kinshasa health facilities, by abortion category, 2016

12%

16%

72%

Certainly induced
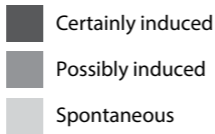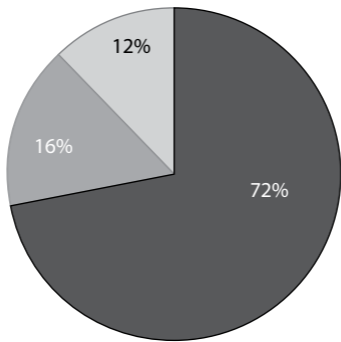
Possibly induced

Spontaneous

TABLE 3. Percentage distribution of postabortion care patients in Kinshasa health facilities, by selected characteristics; and odds ratios (and 95% confidence intervals) from logistic regression analyses assessing the likelihood that patients had had an induced abortion, by selected characteristics, according to abortion type

Characteristic	% (N=867)	Odds ratio‡	
		Possibly/certainly induced vs. spontaneous	Certainly induced vs. possibly induced and spontaneous
Age			
15–19	15.7	1.42 (0.71–2.84)	na
20–24	22.9	1.19 (0.52–2.71)	2.13 (1.08–4.19)*
25–29	26.7	1.09 (0.57–2.07)	na
30–34	17.3	1.07 (0.57–2.03)	na
35–49 (ref)	17.4	1.00	1.00
Marital status			
Not married§	59.5	13.59 (6.50–28.41)**	3.45 (2.13–5.59)**
Married (ref)	40.5	1.00	1.00
Education			
"primary	13.2	1.11 (0.45–2.74)	na
Incomplete secondary	35.7	1.74 (0.79–3.85)	na
Completed secondary	35.5	1.50 (0.82–2.76)	na
Tertiary (ref)	15.7	1.00	na
Poverty status			
Poor	40.4	1.42 (0.93–2.15)†	na
Nonpoor (ref)	59.6	1.00	na
Previous abortion			
0 (ref)	72.9	1.00	na
≥1	27.1	2.05 (1.12–3.74)*	na
Gestational age at time pregnancy ended			
First trimester (ref)	80.9	1.00	na
After the first trimester††	19.1	0.75 (0.44–1.27)	na
Total	100.0	na	na

*Significant at p<.05. **Significant at p<.01. †Significant at p<.10. ‡Results from a partial proportional odds model using gologit2 in Stata; variables with only one set of odds ratios meet the proportional odds assumption. §Includes those who reported being never-married (38%), living together with a man (18%) and separated/divorced (4%). ††Includes five cases with reported pregnancy termination in the third trimester. *Notes*: na=not applicable. ref=reference category. Percentages were calculated with weights.

FIGURE 2. Percentage distribution of postabortion care patients, by severity of complications

- Severe — 16%
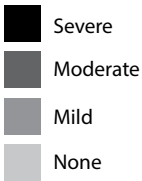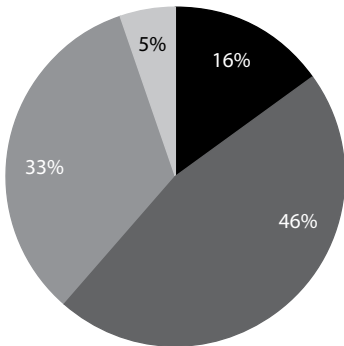- Moderate — 46%
- Mild — 33%
- None — 5%

TABLE 4. Odds ratios (and 95% confidence intervals) from logistic regression analyses assessing the likelihood that postabortion care patients experienced complications, by selected characteristics, according to severity of abortion-related morbidity

Characteristic	Odds ratio†	
	Moderate/severe vs. none/mild	Severe vs. none/mild/moderate
Age		
15–19	0.68 (0.41–1.12)	na
20–24	0.51 (0.30–0.86)*	na
25–29	0.67 (0.37–1.15)	0.29 (0.15–0.56)**
30–34	0.62 (0.34–1.14)	na
35–49 (ref)	1.00	1.00
Marital status		
Single	1.84 (1.12–3.03)*	na
Married (ref)	1.00	na
Living together with a man	1.87 (1.14–3.08)**	na
Separated/divorced	0.96 (0.41–2.22)	na
Education		
″primary	1.75 (0.82–3.71)	na
Incomplete secondary	1.11 (0.57–2.18)	na
Completed secondary	1.38 (0.75–2.54)	na
Tertiary (ref)	1.00	na
Poverty status		
Poor	1.90 (1.24–2.90)**	na
Nonpoor (ref)	1.00	na
Previous abortion		
0 (ref)	1.00	1.00
≥1	1.28 (0.87–1.87)	0.56 (0.32–0.95)*
Gestational age at time pregnancy ended		
First trimester (ref)	1.00	1.00
After the first trimester‡	1.06 (0.66–1.70)	3.66 (2.26–5.93)*
Reported inducing the abortion		
Yes	1.73 (1.05–2.84)*	na
No (ref)	1.00	na

*Significant at p<.05. **Significant at p<.01. †Results from a partial proportional odds model using gologit2 in Stata; variables with only one set of odds ratios meet the proportional odds assumption. ‡Includes five cases with reported pregnancy termination in the third trimester. *Notes:* na=not applicable. ref=reference category. See Table 2 for classification of abortion-related morbidity.

TABLE 5. Percentage distribution of postabortion care patients, by measures of clinical management and treatment, according to severity of abortion-related morbidity

Measures	All (N=867)	None/mild (N=349)	Moderate (N=351)	Severe (N=167)
Method of evacuation†				
Dilation and curettage	49.2	45.3	51.6	51.6
Manual/electric vacuum aspiration	13.9	17.2	11.8	11.7
Misoprostol	10.2	9.6	10.2	11.7
Digital curettage	22.8	24.9	23.0	17.2
Forceps evacuation	0.5	0.1	0.0	3.1
Others	3.5	2.9	3.5	4.8
Provider type*				
Physician	54.2	54.3	49.6	67.4
Midlevel provider	45.9	45.7	50.4	32.6
Patient received medication for pain				
Yes	10.9	8.9	11.3	14.5
No/no response	65.9	65.7	65.1	68.4
Not needed‡	23.3	25.5	23.6	17.1
Gestational age at time pregnancy ended**				
First trimester	80.9	81.2	87.1	61.8
Second trimester	18.7	18.2	12.5	38.0
Third trimester	0.4	0.6	0.4	0.2
Time patient spent in facility**				
<24 hours	58.6	73.2	57.6	25.9
≥24 hours	41.4	26.8	42.4	74.1
Induced abortion suspected by provider*				
Yes	52.0	41.1	58.2	60.3
No	44.9	54.6	39.1	37.9
Don't know	3.2	4.3	2.7	1.9
Patient reported inducing the abortion*				
Yes	41.6	33.3	47.2	45.3
No	58.4	66.7	52.8	54.7
Patient received a contraceptive method				
Yes	15.0	12.8	15.8	20.3
No	84.5	86.6	83.5	79.7
Don't know	0.5	0.6	0.7	0.0
Total	100.0	100.0	100.0	100.0

*Significant at p<.05. **Significant at p<.01. †Significant at p<.10. ‡Used misoprostol for treatment. *Notes*: na=not applicable. Asterisks were based on the p-value of the Pearson chi-square test of association between severity and type of service received and characteristics of abortion. See Table 2 for classification of abortion-related morbidity.