

ASSISTANCE TO ABORTION IN ADOLESCENTS SEEN AT A MATERNITY IN THE AMAZON REGION, FROM JANUARY TO JUNE 2021

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Introduction: Adolescence, according to the World Health Organization (WHO), is a phase of human development that goes from 10 to 19 years of age, constituting a time of discoveries and uncertainties, especially with regard to sexual and reproductive development. At this stage, many young women start their sexual life early, where many times, due to the non-use or misuse of contraceptive methods, they end up in cases of unplanned pregnancy, which, due to the confluence of some factors, leads to the abortion process. Maternal medical-obstetric complications of teenage pregnancy often include spontaneous or induced abortion, anemia, birth dystocia, and gestational hypertension. Of these, without a doubt, the complication that is most associated with physical and psychological damage is abortion. In addition, complications of pregnancy, childbirth and the postpartum period are the 10th leading cause of death among Brazilian adolescents. Abortion among adolescents is associated with cultural factors, the social role of the adolescent, social class, economic resources and access to health services, thus becoming an important cause of maternal mortality, especially in countries where it is not legal.

Goal: To evaluate the obstetric profile of adolescents attended at the maternity hospital for abortion care, from January to June 2021

Methods: Cross-sectional study of data collected in the statistical base of the Maternity Hospital.

Results: From January to June 2021, 409 women were assisted for abortion care, of which 57 (13.93%) were adolescents aged between 13 and 19 years. As for the type of abortion, 32 (56.15%) were incomplete abortions, 20 (35.08%) were missed abortions, 04 (7.02%) were unavoidable abortions and 01 (1.75%) were legal abortions. Regarding the type of procedures, 40 (70.18%) uterine curettage and 17 (29.82%) performed

manual intrauterine aspiration (MVA). When contraceptive methods were offered to adolescents, 22 (38.60%) opted for the intrauterine device (IUD), 18 (31.58%) for the quarterly injectable contraceptive, 08 (14.04%) for the monthly injectable contraceptive, 03 (5, 26%) without information and 06 (10.52%) did not accept any method.

Conclusions: The data suggest the need to adopt educational strategies, which must be implemented early, even before starting the period described as adolescence, starting from elementary school, aiming to encourage the prevention of unplanned pregnancy and its consequences, clarifying the young women about the risks they are exposed to when having unprotected relationships, the possibility of an unwanted or unplanned pregnancy and the complications that women are subject to when they experience an abortion. In this context, we emphasize the need for greater involvement of professionals in the areas of health and education, in order to promote sexual health and offer immediate assistance to women affected by abortion, especially in the group of adolescents, in which pregnancy prevention could prevent the occurrence of abortion and consequently a better quality and appreciation of life.