

Induced Abortion Compared to Spontaneous Abortion: Psychological Differences

Unlike the pain of spontaneous abortion (miscarriage) which tends to lessen over time, the pain of abortion may worsen in the months and years following the procedure [1-2].

There are a number of reasons why induced abortion can lead to more severe and insidious psychological distress than miscarriage [3].

1. Miscarriage is an involuntary loss. Even so, some women blame themselves for their loss insisting they could have done something differently to prevent it from happening. Abortion however is voluntary. Thus, many women experience guilt, self-criticism, or even self-loathing [4,5,6, 14].

2. Sadness and grief are culturally recognized with miscarriage; whereas grief after induced abortion is not. As a result, women may suppress abortion-related emotions, as Kluger-Bell, a psychotherapist stated: *"When other people are reluctant to listen to us, when there are no ceremonies to publicly acknowledge the impact of our experiences, we receive the covert message that others would rather not hear what we have to say, and this makes it difficult to even identify our reactions to our losses."* [7]

3. The grief process after abortion is likely to be more complicated than with miscarriage because grief resolution requires acknowledgment of loss, in this case a death. Rather than acknowledging the existence of their fetal child and/or their role in his/her death,, women who have aborted may find themselves either in denial and avoidance or having unwanted reexperiencing and intrusive feelings, neither of which they can successfully control. The traumagenic nature of abortion and how this complicates grief resolution has been previously reported. [15] Unhealthy coping mechanisms can include escalating dependencies on alcohol, drugs, food, work and sex which can in turn increase symptoms of anxiety and depression.

4. The available peer reviewed scientific research indicates that adverse mental health effects of induced abortion persist longer than the negative effects of miscarriage [9- 13].

Repression of grief, lack of support, self-recrimination, exacerbation or development of anxiety or depression, and/or abuse of substances are all factors that may render voluntary perinatal loss potentially more difficult to move beyond when compared to involuntary perinatal loss.

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