

Terminated Pregnancy Report 2014



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Terminated Pregnancy Report

Indiana State Department of Health

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Disclaimer

The analysis presented in this report is not comparable to the results of former state reports of terminated pregnancies. Although similar characteristics (i.e. age, marital status) are explored, this is a new analysis conducted differently than past reports. Results from 2012 and 2013 data will not match results for these years previously published due to the change in analysis.

Trends identified in this report are based solely on data collected since 2012, and are subject to change in future reports due to reports being corrected and returned periodically. Reports may show a different number of terminations for a previous year because new analyses are rerun to incorporate any records that were not previously available for analysis and reporting.

This report shifts from previous reports by exploring demographics, such as education level, for a more comprehensive analysis of the occurrence of pregnancy termination in the state. Unlike previous reports, this report focuses on the occurrence of terminations and begins to examine trending; as such, data analysis based on residency will be more limited than previously reported.

Analyses conducted by the CDC that are referenced in this report were subject to data availability at the federal level. For details, please refer to the original document released by the CDC.¹

Executive Summary

The Terminated Pregnancy Report for Indiana is produced annually to provide a comprehensive overview of terminations performed in the state throughout the previous year. Data is reported to the Indiana State Department of Health's Division of Vital Records in accordance with Indiana Code § 16-34-2. This year's report is the first to provide analysis from an epidemiological perspective; prior reports consisted of the presentation of data tables for the information obtained from terminated pregnancy records.

Due to the required publication of this report by mid-year, a cut-off date was established to create a 2014 dataset for analysis. As such, there is the possibility that reports were submitted after this cut-off and were not included in the analysis; this may cause the number of terminations for the year to be slightly lower than the true total. Reports may show a different number of terminations for a previous year because new analyses are rerun to incorporate any records that were not previously available for analysis and reporting.

Total Abortions in Calendar Year 2014: 8,118

Summary of 2014 Terminations by Race	
White	58.36%
Black / African American	28.66%
Asian	3.12%
Pacific Islander / Native Hawaiian	0.06%
American Indian / Alaska Native	0.26%
Multiple Races	0.79%
Other	7.48%
Unknown	1.27%

Weeks of Gestation at Time of Termination	
≤8	78.82%
9-13	20.90%
14-15	0.07%
16-17	0.09%
18-20	0.11%

Procedure Used to Terminated Pregnancy in Indiana	
Dilation & Evacuation	0.33%
Mifepristone / Misoprostol	26.67%
Suction Curettage	73.00%

* Percentages may not add to 100 due to rounding

Table of Contents

Introduction	1–3
Indiana Reporting Requirements	1
Trends in Indiana	1
Methodology	4–6
Data Source	4
Measures	4
Analytic Procedures	5
Results	7–22
Demographic Information of Women Receiving Terminations	7
Age	7
Adolescents	8
Race and Ethnicity	9
Marital Status	10
Education Level	10
Pregnancy History of Women Receiving Terminations	12
Medical Information of Women Receiving Terminations	15
Procedure and Facility Type	15
Estimated Gestational Age	18
Geographic Information of Women Receiving Terminations	20
County of Termination	20
County of Residence	20
Discussion	23
Appendix A: State Form 36526 (R4 / 12-11)	24
Appendix B: State Form 36526 (R3 / 6-11)	25
Appendix C: Electronic Terminated Pregnancy Database	26
Appendix D: Glossary	27
References	28

List of Tables

- Table 1. Number, rate, and ratio of reported abortions – by selected reporting areas, United States, 2002–2011¹
- Table 2. Number and rate of reported terminations among Indiana residents of childbearing age occurring in Indiana, 2012–2014
- Table 3. Equivalence of race categories in this report
- Table 4. Terminations among resident and non-resident women in Indiana by Month, 2014
- Table 5. Age distribution of women obtaining terminations in Indiana, 2014
- Table 6. Age of women obtaining terminations in Indiana by Race, 2014
- Table 7. Race of women obtaining terminations in Indiana, 2014
- Table 8. Ethnicity of women obtaining terminations in Indiana, 2014
- Table 9. Marital status of women obtaining terminations in Indiana, 2014
- Table 10. Education level of women obtaining terminations in Indiana, 2014
- Table 11. Equivalence of education years and education level
- Table 12. Pregnancy history of women obtaining terminations in Indiana, 2014
- Table 13. Procedure used to terminate pregnancy in Indiana, 2012–2014
- Table 14. Terminations reported in Indiana by Facility, 2014
- Table 15. Procedure used to terminate pregnancy in Indiana by Facility type, 2014
- Table 16. Estimated gestational age at time of termination in Indiana, 2014
- Table 17. Estimated gestational age among women obtaining terminations in Indiana by Procedure, 2014
- Table 18. County where termination performed in Indiana, 2014
- Table 19. County of residence of Indiana residents receiving terminations in Indiana by Age, 2014
- Table 20. Number of Indiana residents receiving terminations in Indiana by County, 2014

List of Figures

- Figure 1. Number of terminations reported in Indiana, 2012–2014
- Figure 2. Age distribution of women obtaining terminations in Indiana, 2012–2014
- Figure 3. Ethnicity of women obtaining terminations in Indiana, 2012–2014
- Figure 4. Education level of women obtaining terminations in Indiana, 2014
- Figure 5. Pregnancy history of women obtaining terminations in Indiana by Race, 2014
- Figure 6. Pregnancy history of women obtaining terminations in Indiana by Age, 2014
- Figure 7. Estimated gestational age at time of termination in Indiana, 2012–2014

Introduction

The Centers for Disease Control and Prevention (CDC) has been reporting on Abortion Surveillance since 1969. Annually, CDC requests data from throughout the United States; however, participation by health agencies is voluntary.¹ The Indiana State Department of Health (ISDH) has provided data to CDC since 1973.⁹ The most recently reported abortion numbers, rates (number of abortions per 1,000 women aged 15-44 years), and ratios (number of abortions per 1,000 live births) for the United States during the time frame 2002–2011 are shown in Table 1.

Table 1. Number, rate, and ratio of reported abortions – by selected reporting areas, United States, 2002–2011¹

Year	All reporting areas [§]	Continuously reporting areas [¶]			
	Count	Count	Percent**	Rate	Ratio
2002	854,122	828,027	96.9	16.2	250
2003	848,163	824,230	97.2	16.1	245
2004	839,226	815,969	97.2	15.9	241
2005	820,151	805,725	98.2	15.7	236
2006	852,385 ^{††}	832,692	97.7	16.2	237
2007	827,609	817,222	98.7	15.8	230
2008	825,564	815,006	98.7	15.8	232
2009	789,217 ^{§§}	777,340	98.5	15.0	227
2010	765,651	753,065	98.4	14.6	228
2011	730,322	717,903	98.3	13.9	219

[§] Excludes states that did not report abortion numbers to CDC: Alaska (2002), California (2002-2011), Delaware (2009), Louisiana (2005), Maryland (2007-2011), New Hampshire (2002-2011), and West Virginia (2003-2004).

[¶] Only includes areas that reported abortion counts every year during the period of analysis (2002-2011).

** Abortions from areas that reported every year during 2002-2011 as a percentage of all reported abortions.

^{††} This number is greater than reported in the 2006 report because of numbers subsequently provided by Louisiana.

^{§§} This number is greater than reported in the 2009 report because of numbers subsequently provided by Delaware.

Indiana Reporting Requirements

Reports were submitted by mail on State Form 36526 (R4 / 12-11) (Appendix A). A minimal number of reports were submitted on the older form, State Form 36526 (R3 / 6-11) (Appendix B). Upon receipt, all forms were reviewed for completeness; incomplete forms were returned to the physician for correction. Completed forms were entered into the electronic terminated pregnancy database (Appendix C).

The performance of, and reporting requirements for, terminated pregnancy in Indiana are governed by Indiana Code Title 16, Article 34, Chapter 2 (§ 16-34-2).³ The pertinent Indiana Code can be found in its entirety at <https://iga.in.gov/legislative/laws/2014/ic/titles/016/articles/034/chapters/002/>.

Trends in Indiana

During calendar year 2014, 8,118 pregnancy terminations were reported by physicians to ISDH. Of these terminations, 7,621 (93.88%) were Indiana residents. In 2012 and 2013, 8,808 and 8,179 terminations were reported, respectively. There were 8,118 terminations reported for 2014 at the time of analysis.

The decrease in the total number of terminations performed in the State of Indiana from 2012 to 2014 can be seen in Figure 1.

Figure 1. Number of terminations reported in Indiana, 2012–2014

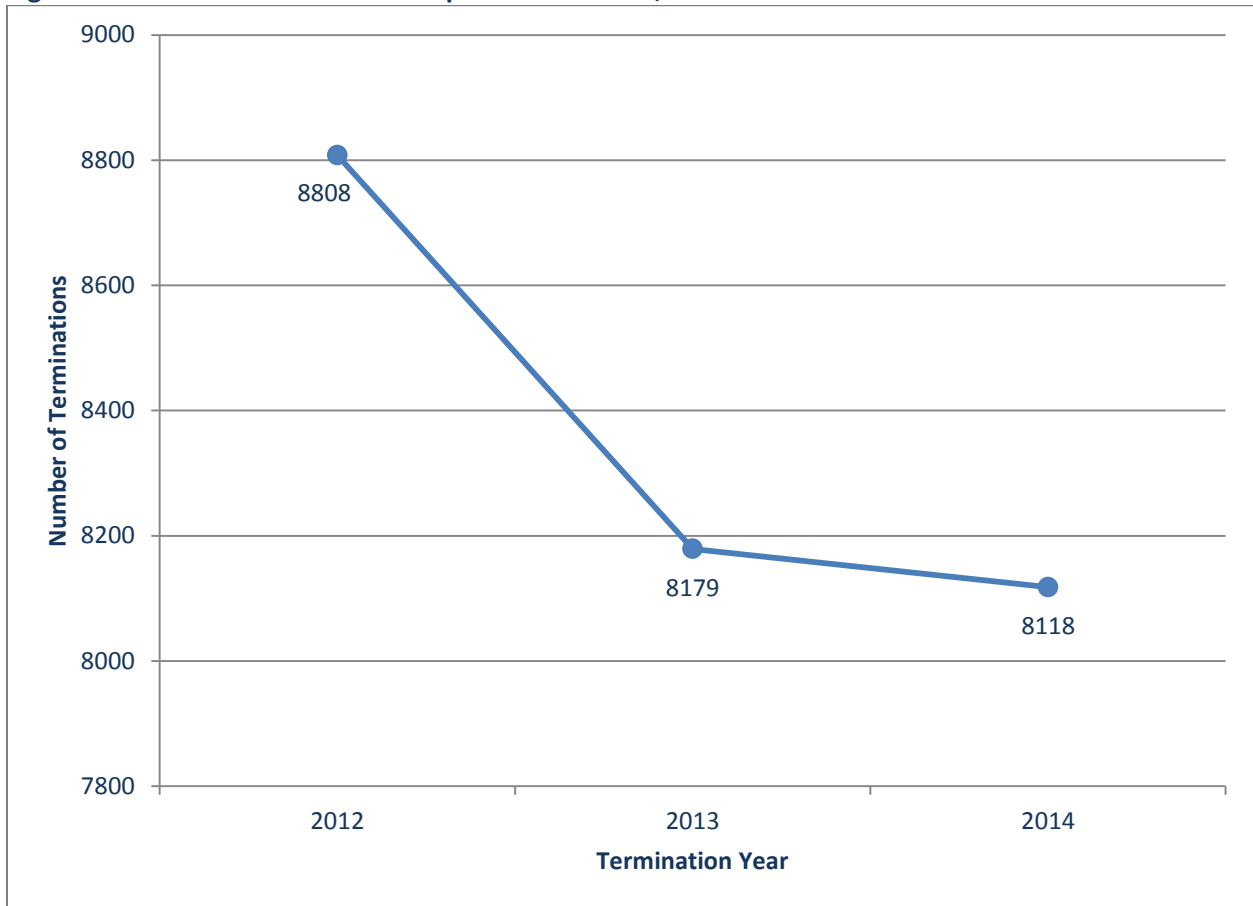


Table 2 shows the number of terminations among Indiana residents of childbearing age and the associated rates for 2012 to 2014. As rates are only based on Indiana residents, data is also provided to identify the percentage of all terminations reported that were Indiana residents. The count used to determine the rate is the number of Indiana residents receiving terminations from the entire population of pregnancy terminations.

Table 2. Number and rate of reported terminations among Indiana residents of childbearing age occurring in Indiana, 2012–2014

Year	Count	Population Est. [§]	Rate [†]	Percent [¶]
2012	8,272	1,287,150	6.4	93.9
2013	7,596	1,292,138	5.9	92.9
2014	7,621	1,295,431	5.9	93.9

[§] Estimation of females aged 15–44 that were Indiana residents during the specified year.⁴

[†] Rate per 1,000.

[¶] Percent of total terminations reported to the Indiana State Department of Health for the specified year.

True trends have yet to be established at the state level in Indiana due to the change in reporting, beginning with this 2014 report. This report will focus on the characteristics associated with terminations conducted in 2014, while beginning to identify trends since 2012.

Methodology

The data and information presented in this report resulted from the statutory requirements established by Indiana Code § 16-34.³

Data Source

The data source for this report was the electronic database where information provided on official reports is recorded by ISDH Division of Vital Records personnel. Reports do not include personally identifiable information.

Included in this report are analyses of demographic information provided by the patient, as well as medical information collected from reports. Demographic information is self-reported by the patient, and includes:

- Age;
- Marital status;
- Education level;
- Race;
- Ethnicity;
- County of residence (if an Indiana resident);
- State of residence.

Some medically relevant information is also reported by the patient, including the number of live births where the child is living, the number of live births where the child is deceased, the number of previous spontaneous terminations, the number of previous induced terminations excluding the termination being reported, dates of all past terminations, spontaneous and induced, and the date their last normal menses began.

Medical information collected on reports regarding the present termination is completed by the physician. This information includes:

- Date of termination;
- Fetus delivered alive;
- Viability of fetus;
- Completion of a pathological examination of the fetus;
- Results if pathological examination performed;
- Procedure employed for termination;
- Complications of the termination;
- Result in maternal death;
- Estimated gestational age and/or postfertilization age;
- Method used to determine gestational age.

Other information reported includes the name of the facility where the termination was completed, the city or town of termination, the county of termination, the physician's full name, address, and signature, and the name and age of the father, if known.

Measures

Measures in this report are primarily consistent with CDC categorizations and definitions. Aggregate counts of terminated pregnancies reported are for the following variables:

- Termination by month (Indiana resident, non-resident);
- Woman’s age in years (10-14, 15-17, 18-19, 20-24, 25-29, 30-34, 35-39, 40-44, ≥ 45);
- Race (White, Black/African American, American Indian/Alaska Native, Pacific Islander/Native Hawaiian, Multiple Races, Other Race);
- Ethnicity (Hispanic or non-Hispanic);
- Marital status (married or unmarried);
- Education level (8th grade or less, 9th-12th grade but no diploma, high school diploma or GED, some college credit but no degree, Associate’s Degree, Bachelor’s Degree, Master’s Degree, Doctoral or Professional Degree);
- Pregnancy history (0, 1, 2, ≥ 3, Unknown);
- Procedure (Dilation & Evacuation, Mifepristone/Misoprostol, Suction Curettage, Medical (Non-Surgical), Menstrual Aspiration, Unknown);
- Facility (Facility where termination performed);
- Estimated gestational age in weeks at the time of termination (≤ 8, 9-13, 14-15, 16-17, 18-20);
- County of termination (Indiana county of termination);
- County of residence (Indiana residents only, under specific criteria).

In addition to aggregate data, cross-tabulations are also provided in this report. Reported cross-tabulations include age by race, procedure by facility type, and gestational age by procedure. Figures are also shown for trending of data from 2012 to 2014 or to compare 2014 data across demographics. These figures demonstrate trends in age, ethnicity, education, pregnancy history (separately by race and by age), and gestational age.

Variables for race and ethnicity are based on specifications established by the Federal Office of Management and Budget (OMB). Women receiving terminations were asked to identify their ethnicity (i.e. Hispanic or Latino and/or non-Hispanic or non-Latino) and race. Race identification is based on five standard categories: White, Black/African American, Asian, American Indian/Alaska Native, and Pacific Islander/Native Hawaiian. If one of these OMB categories does not apply, women may identify as Other.²

Aggregate data for race is presented based on 1997 OMB standards; however, some analyses, such as cross-tabulations, were conducted with non-standard race categories. This change was made to provide a more accurate representation of the differences between races when analyzing particular variables.

Table 3. Equivalence of race categories in this report

1997 OMB Standards	Non-Standard Race Categories
White	White
Black / African American	Black
Asian	Other
American Indian / Alaska Native	Other
Pacific Islander / Native Hawaiian	Other
Other	Other

Analytic Procedures

Counts and percentages were calculated using SAS statistical software, version 9.3. Univariate and bivariate statistics are presented where applicable.

Ratios are not provided in this analysis due to the fact that Indiana's 2014 Natality file will not be considered complete until early 2015. Some records were removed from the dataset for reasons such as duplication or incomplete procedures, prior to analysis.

Results

During 2014, 8,118 terminations were reported to ISDH. Of these terminations, 7,621 were residents of Indiana. The most recent U.S. Census data estimates that 1,295,431 women of childbearing age (15–44 years) lived in Indiana in 2014.⁴ Based on this estimation, the termination rate for Indiana residents in 2014 was 5.9 per 1,000 women aged 15–44. Table 4 provides a breakdown of the number of terminations among resident and non-resident women who received terminations in Indiana in 2014 by month.

Table 4. Terminations among resident and non-resident women in Indiana by Month, 2014

Month	Resident Terminations (n = 7621)	Non-Resident Terminations (n = 497)
January	687	35
February	657	38
March	732	42
April	666	43
May	704	44
June	609	36
July	599	34
August	654	39
September	553	39
October	650	55
November	535	47
December	575	45

Demographic Information of Women Receiving Terminations

Demographic information collected and analyzed for this report includes age, race, ethnicity, marital status, and education level of the women receiving terminations in Indiana in 2014.

Age

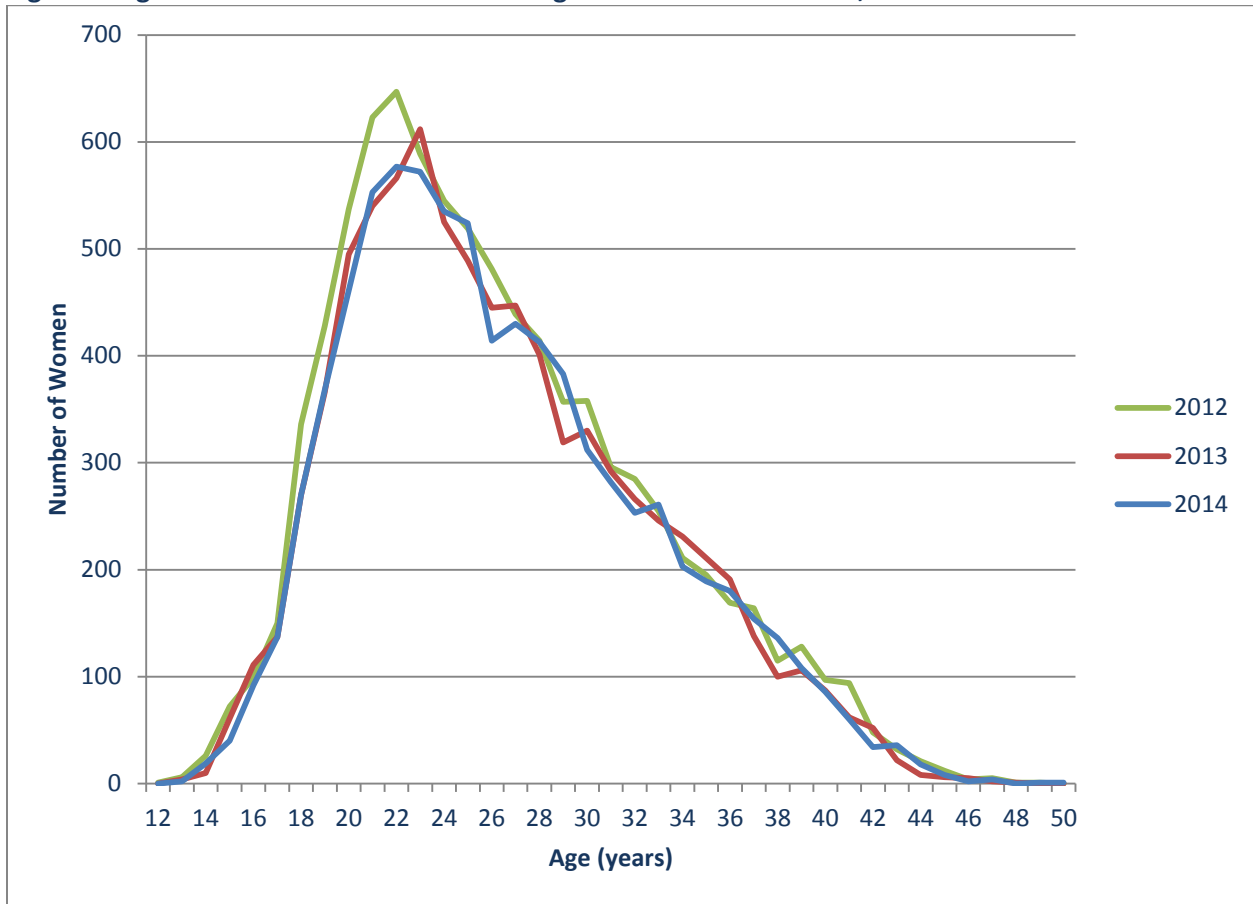
The age range for women receiving terminations in Indiana in 2014 was 13 to 50 years. The average age of a woman who obtained a termination was 26.4 years (SD= 6.2 years), with a median age of 25.

Table 5. Age distribution of women obtaining terminations in Indiana, 2014

Age (years)	Count	Percent
10-14	21	0.26
15-17	269	3.31
18-19	638	7.86
20-24	2,698	33.23
25-29	2,164	26.66
30-34	1,311	16.15
35-39	767	9.45
40-44	234	2.88
≥ 45	16	0.20
Total	8,118	100.0

Approximately 59.89% of terminations were for women in their twenties (20–29 years). Women aged forty and older received the smallest percentage of terminations, 3.08%.

Figure 2. Age distribution of women obtaining terminations in Indiana, 2012–2014



For each age group, more than half of the women were white. Based on cross-tabulation of age group by race, white women in their twenties received the most terminations in Indiana in 2014.

Table 6. Age of women obtaining terminations in Indiana by Race, 2014

Age Group	Race								Total
	White		Black		Other		Unknown		
	Count	Percent	Count	Percent	Count	Percent	Count	Percent	
Adolescent (≤ 19)	546	58.84	251	27.05	121	13.04	10	1.08	928
Twenties (20-29)	2,834	58.29	1,436	29.54	536	11.02	56	1.15	4,862
Thirties (30-39)	1,201	57.80	591	28.44	253	12.18	33	1.59	2,078
Forties & Over (≥ 40)	157	62.80	49	19.60	40	16.00	4	1.60	250
Total	4,738		2,327		950		103		8,118

Adolescents

Adolescents, any female under twenty, accounted for 11.43% of terminations in Indiana in 2014. Females aged 18-19 were the most likely group of adolescents to receive terminations (68.75%)

compared to those aged 15-17 (28.99%) and 10-14 (2.26%). This aligns with CDC's 2011 analysis, which identified that 18-19 year olds accounted for 65.3% of adolescent terminations.¹

Race and Ethnicity

The largest percentage of women reported their race as white, accounting for 58.36% of all records in 2014; 28.66% of women identified their race as black. In 2012, 60.30% and 28.2% of women identified as white and black, respectively; while in 2013, 58.45% and 28.79% identified as white and black, respectively.

Table 7. Race of women obtaining terminations in Indiana, 2014

Race	Count	Percent
White	4,738	58.36
Black / African American	2,327	28.66
Asian	253	3.12
Pacific Islander / Native Hawaiian	5	0.06
American Indian / Alaska Native	21	0.26
Multiple Races	64	0.79
Other	607	7.48
Unknown	103	1.27
Total	8,118	100.0

Women who marked more than one race checkbox on the report were classified under the multiple race category for this analysis. Some women who were classified as multiple race identified as combinations such as black and white, Asian and American Indian/Alaska Native (AI/AN), black and Asian, black and AI/AN, or white and Pacific Islander/Native Hawaiian (PI/NH).

The frequency with which women identified as AI/AN or PI/NH decreased in 2014 after remaining approximately the same in 2012 and 2013. In 2012 and 2013, about 0.7% of women identified as AI/AN while 0.12% identified as PI/NH. In 2014, only 0.26% of women identified as AI/AN and 0.06% identified as PI/NH. However, it is of note that women categorized as multiple race may have identified as AI/AN or PI/NH but were not classified as such because they also identified with at least one other race.

Only 7.4% of women receiving a termination in Indiana self-identified as being either Hispanic or Latino in 2014. In 2013, 7.37% of women reported as either Hispanic or Latino and 7.28% reported as such in 2012.

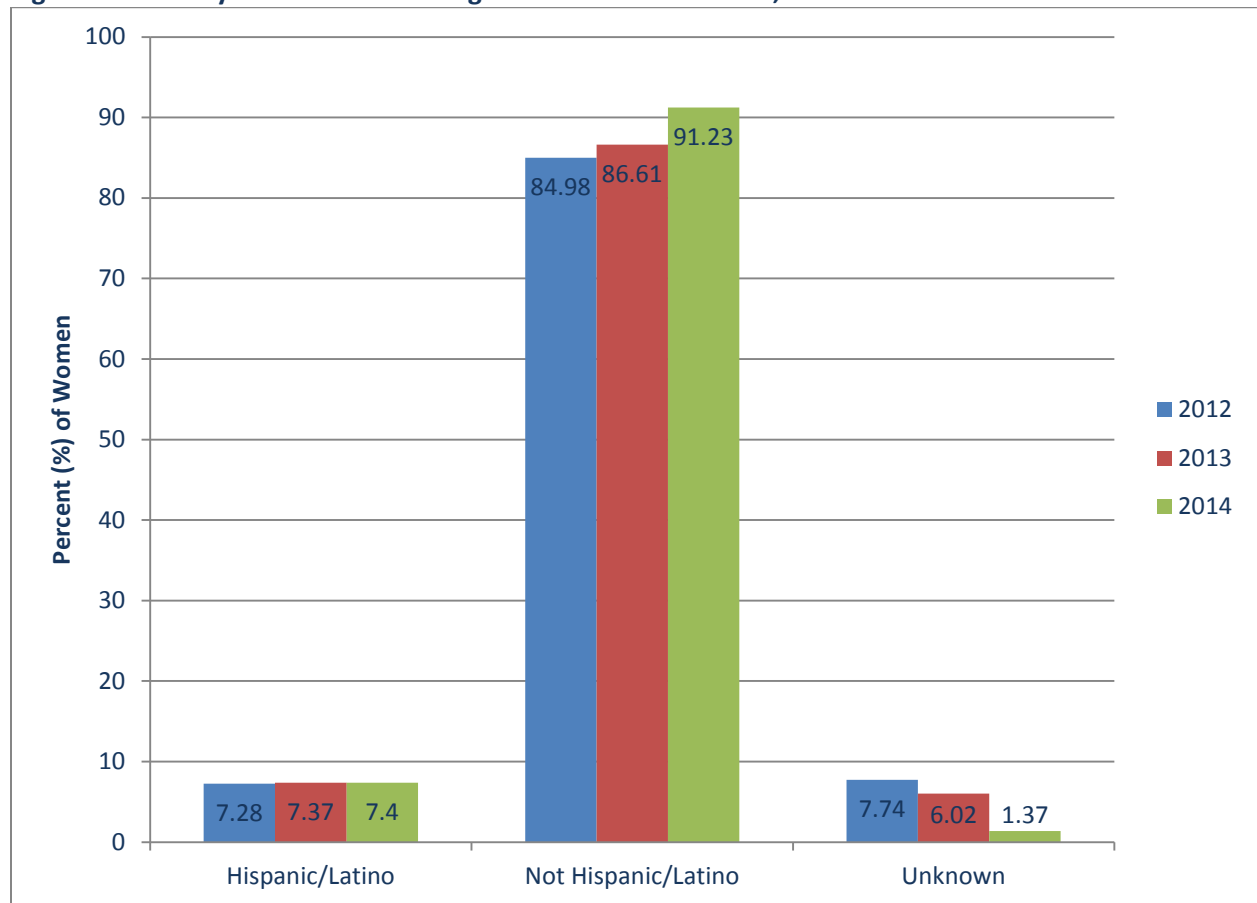
Table 8. Ethnicity of women obtaining terminations in Indiana, 2014

Ethnicity	Count	Percent
Hispanic / Latino	601	7.40
Non-Hispanic / Non-Latino	7,406	91.23
Unknown	111	1.37
Total	8,118	100.0

Although the number of women reported as Hispanic or Latino has stayed approximately the same, the number reporting as neither Hispanic or Latino and unknown have shown change. There has been a decrease in the number of women whose ethnicity is unknown. In 2012 and 2013, 682 (7.74%) and 492

(6.02%) women had an unknown ethnicity, respectively. In contrast, the number of women reporting as non-Hispanic/non-Latino has increased each year. These changes can be seen in Figure 3.

Figure 3. Ethnicity of women obtaining terminations in Indiana, 2012–2014



Marital Status

Of the women receiving terminations in 2014, 86.22% were unmarried and 13.39% were married. Similar to ethnicity reporting, the number of women whose marital status is unknown has continued to decrease since 2012. In both 2012 and 2013, 1.45% of women had an unknown marital status; however, that number is down in 2014, with unknown marital status for only 0.39% of women.

Table 9. Marital status of women obtaining terminations in Indiana, 2014

Marital Status	Count	Percent
Married	1,087	13.39
Unmarried	6,999	86.22
Unknown	32	0.39
Total	8,118	100.0

Education Level

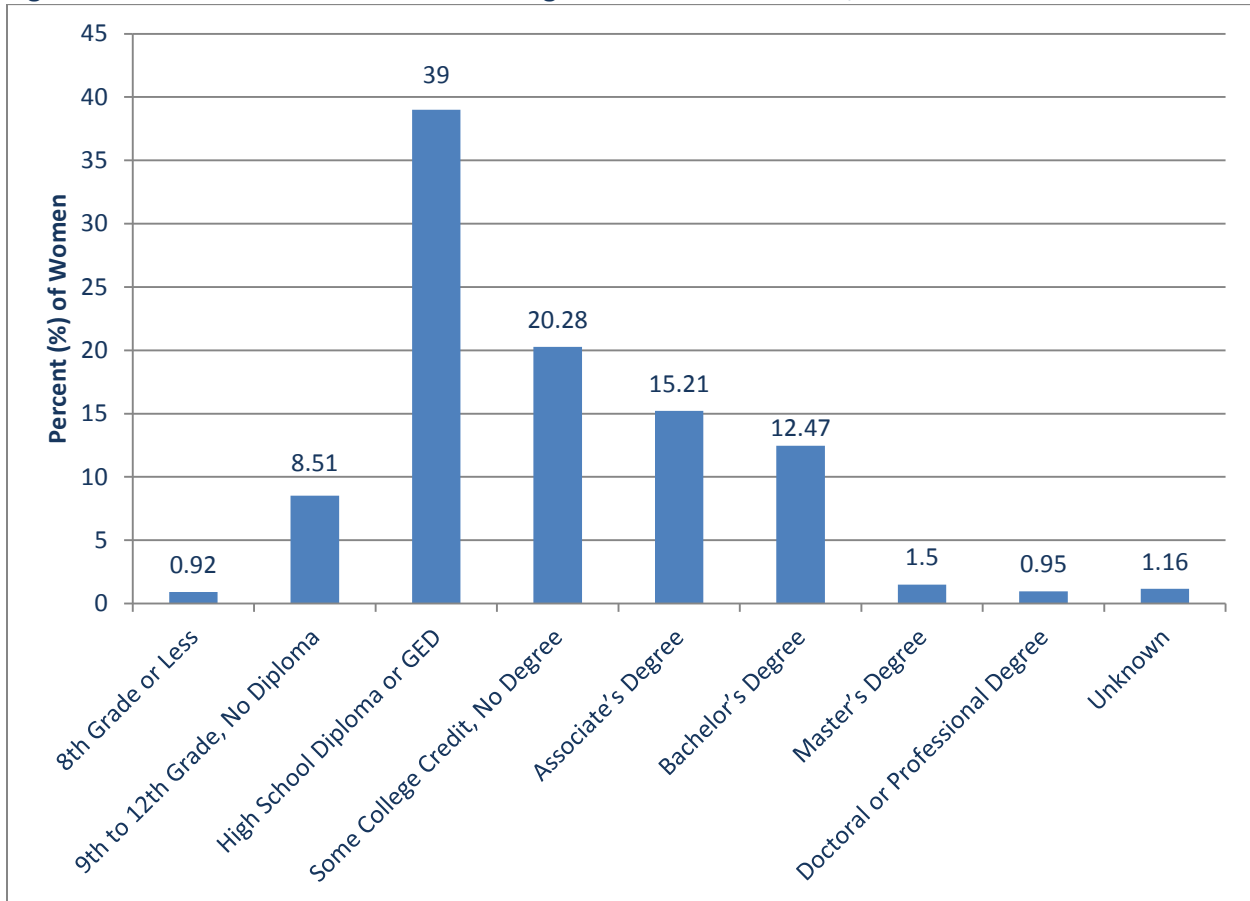
In 2014, 39% of women reported a high school diploma or General Educational Development (GED) as the highest level of education they completed. This is similar to 2012 and 2013, with 40.05% and 37.32% reporting the same level of education in each year, respectively.

The second most identified education level was some college credit, but no college degree. In 2014, 20.28% of women had achieved this level of education. This is a decrease from the previous two years where 22.98% and 24.39% of women reported earning some college credit in 2012 and 2013, respectively.

Table 10. Education level of women obtaining terminations in Indiana, 2014

Education Level	Count	Percent
8th Grade or Less	75	0.92
9th to 12th Grade, No Diploma	691	8.51
High School Diploma or GED	3,166	39.00
Some College Credit, No Degree	1,646	20.28
Associate's Degree	1,235	15.21
Bachelor's Degree	1,012	12.47
Master's Degree	122	1.50
Doctoral or Professional Degree	77	0.95
Unknown	94	1.16
Total	8,118	100.0

Figure 4. Education level of women obtaining terminations in Indiana, 2014



When the education field was completed by writing the number of years of education, inference was made by ISDH personnel to identify what education category was most applicable. Table 11 shows the equivalence for years of education in education levels.

Table 11. Equivalence of education years and education level

Years of Education	Education Level
≤ 8	8th Grade or Less
9 – 11	9th to 12th Grade, No Diploma
12	High School Diploma or GED
13, 15	Some College Credit, No Degree
14	Associate’s Degree
16 – 17	Bachelor’s Degree
18 – 19	Master’s Degree
≥ 20	Doctoral or Professional Degree

Pregnancy History of Women Receiving Terminations

The number of previous pregnancies was calculated by adding the values reported for previous live births living, previous live births deceased, previous spontaneous terminations, and previous induced terminations, when the values were reported. The number of previous live births was calculated by combining the reported values for previous live births living and previous live births deceased, when available.

Prior to July 2014, the fields for previous live births living, previous live births deceased, previous spontaneous terminations, and previous induced terminations were entered as null values when the ‘None’ checkbox was marked or zero (0) was written. To confirm the true values for these fields, all original reports where null values were reported in one of these four fields were pulled and true unknowns were identified.

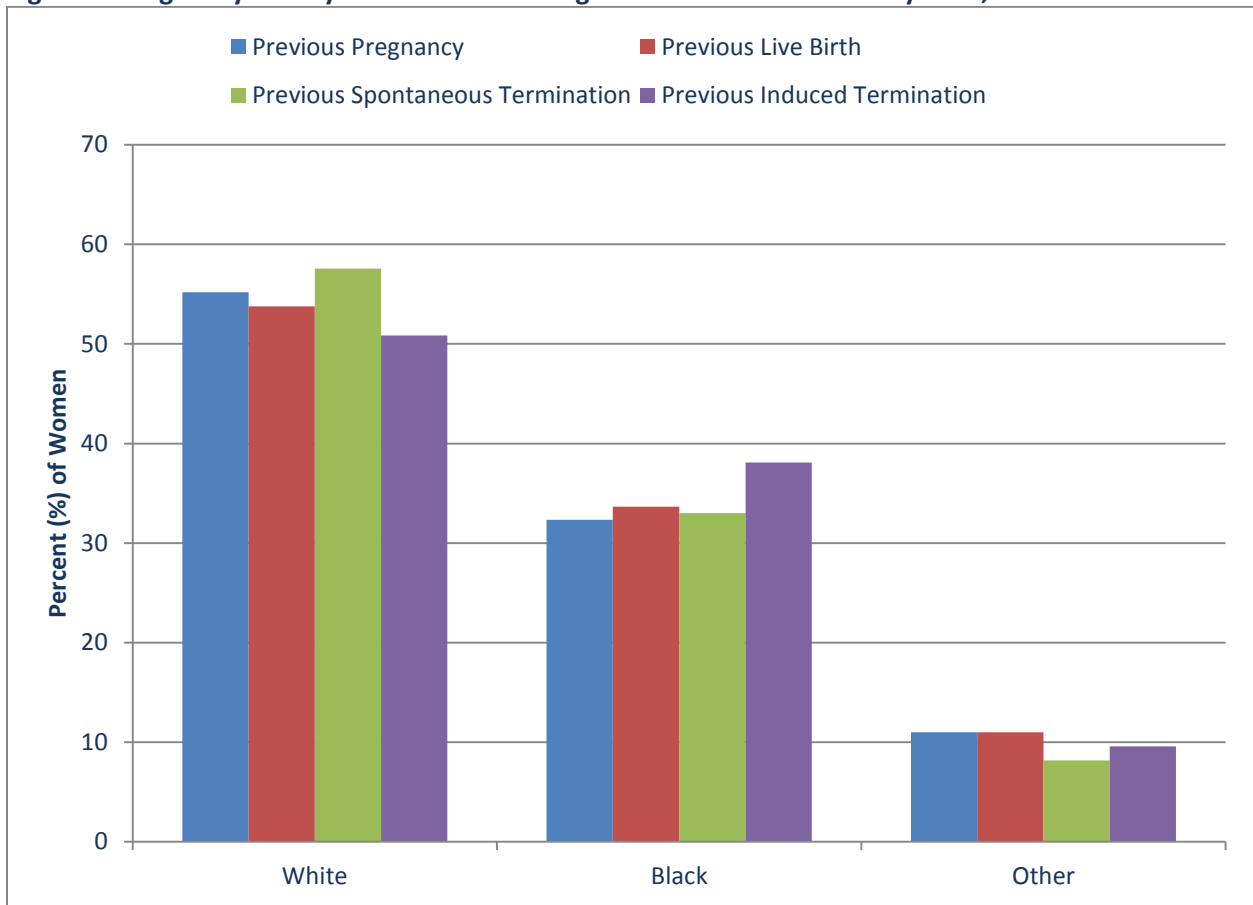
Table 12. Pregnancy history of women obtaining terminations in Indiana, 2014

Pregnancy History	Count	Percent
Previous pregnancies		
0	2,293	28.25
1	1,584	19.51
2	1,477	18.19
≥ 3	2,714	33.43
Unknown	50	0.62
Previous live births		
0	3,037	37.41
1	2,135	26.30
2	1,688	20.79
≥ 3	1,221	15.04
Unknown	37	0.46
Previous spontaneous terminations		
0	6,680	82.29
1	1,087	13.39
2	232	2.86
≥ 3	90	1.11
Unknown	29	0.36
Previous induced terminations		
0	5,173	63.72
1	1,986	24.46
2	640	7.88
≥ 3	301	3.71
Unknown	18	0.22

Due to the omission of unreported variables, there were reports where the number of previous pregnancies and/or previous live births was unknown; the counts and percentages reported are based on the entire population.

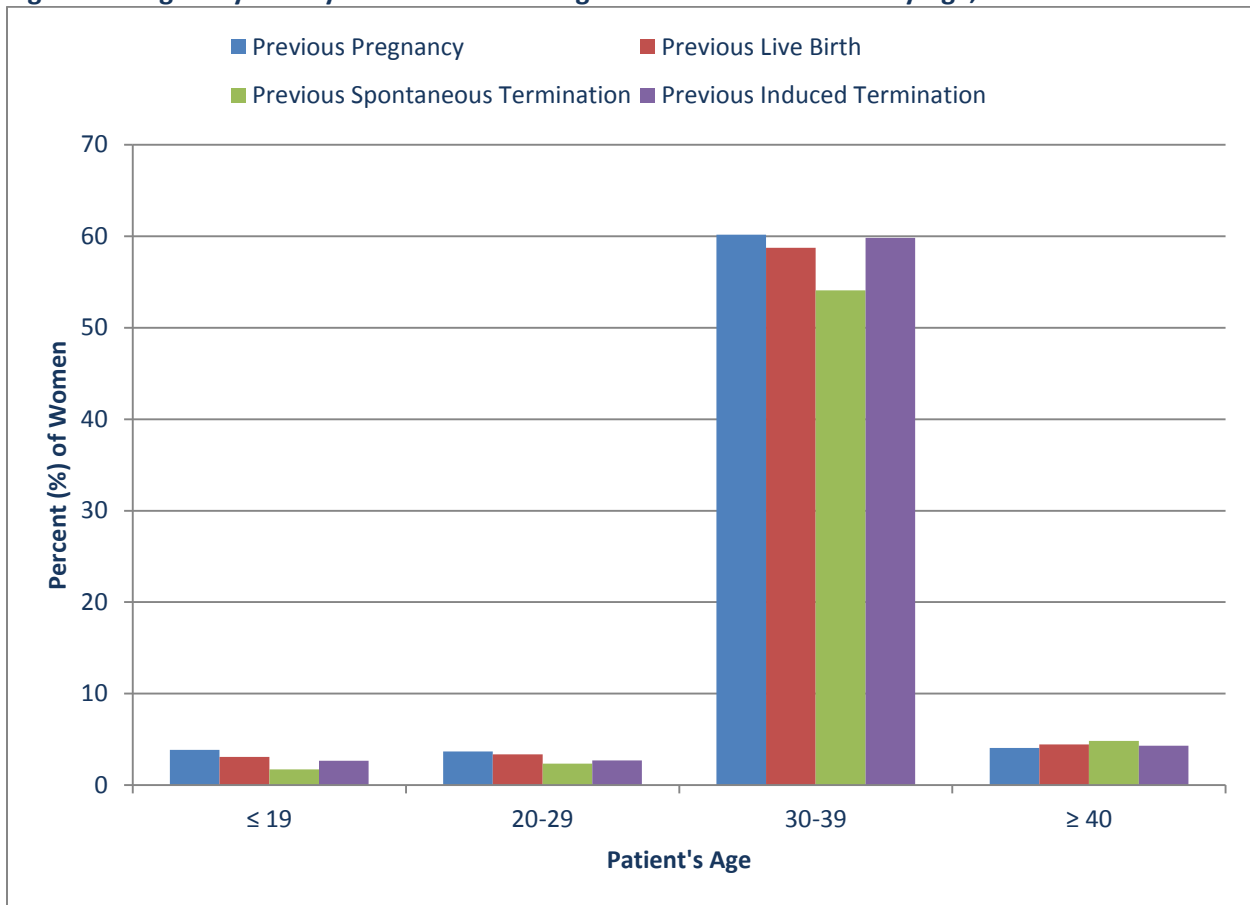
As seen in Figure 5, white women have the greatest number of reported previous pregnancies, live births, spontaneous terminations, and induced terminations; however, spontaneous terminations were more common than live births or induced terminations. Among black women, induced terminations were more frequent than live births or spontaneous terminations; while all other race categories showed similar percentages between previous pregnancies and live births, and spontaneous and induced terminations, respectively.

Figure 5. Pregnancy history of women obtaining terminations in Indiana by Race, 2014



It can be further seen in Figure 6 that women in their thirties (30–39) had the highest percentages for all parts of pregnancy history: previous pregnancies, previous live births, previous spontaneous terminations, and previous induced terminations. All age groups, except women aged forty or older, had greater numbers of pregnancies, live births, and induced terminations than spontaneous terminations. Women forty and over had a higher occurrence of spontaneous terminations than pregnancies, live births, or induced terminations; although the increased occurrence was minimal.

Figure 6. Pregnancy history of women obtaining terminations in Indiana by Age, 2014



Medical Information of Women Receiving Terminations

Medical information analyzed and presented in this report includes the procedure used to terminate a pregnancy, the facility type where the termination occurred, and the gestational age of the fetus at the time of termination.

Procedure and Facility Type

Only three procedures were reported as having been used to terminate a pregnancy in 2014 in Indiana: Dilation and Evacuation (D&E), Mifepristone/Misoprostol, and Suction Curettage. Although D&E is not a specific field to be selected on the reporting form, all procedures reported as medical (surgical) specified D&E as the procedure used for termination. There were two reports where medical (non-surgical) was identified as the procedure; however, the report specified D&E. Based on the definition of D&E, these two reports were considered medical (surgical) procedures for reporting purposes and included in the data as D&E.

The administration of the pharmaceuticals Mifepristone and/or Misoprostol was the most commonly used technique to terminate a pregnancy in 2014, accounting for 26.67% of terminations. This is an increase in the use of the drug combination from 2012 and 2013, where it was only reported for 1.82% and 19.94%, respectively, as the technique employed for termination.

Some reports from 2012 and 2013 listed the procedure used as medical (non-surgical) with Mifeprex and/or Misoprostol listed as the pharmaceuticals used. The reporting form includes a specific 'Mifepristone/Misoprostol' checkbox; as such, these reports were regarded as procedures completed with Mifepristone/Misoprostol due to the fact that Mifeprex® is a brand name for Mifepristone.

All other occasions when medical (non-surgical) was identified as the primary procedure, specific details were not provided on the report, thus leading to the reporting of unspecified medical non-surgical procedures.

Suction curettage was the most commonly employed technique for pregnancy termination in 2014, accounting for 73% of terminations. The majority of suction curettage procedures were completed at abortion clinics (99.9%); however, the use of this procedure declined in 2014. In 2012 and 2013, 79.6% and 79.7% of terminations were completed with suction curettage.

Table 13. Procedure used to terminate pregnancy in Indiana, 2012–2014

Procedure	2014		2013		2012	
	Count	Percent	Count	Percent	Count	Percent
Dilation & Evacuation	27	0.33	23	0.28	29	0.33
Mifepristone / Misoprostol	2,165	26.67	1,631	19.94	160	1.82
Suction Curettage	5,926	73.00	6,519	79.70	7,011	79.60
Medical (Non-Surgical)	0	0.00	1	0.01	1,601	18.18
Menstrual Aspiration	0	0.00	3	0.04	5	0.06
Unknown	0	0.00	2	0.02	2	0.02
Total	8,118		8,179		8,808	

Rarely, a secondary procedure was identified on a record as necessary for the completion of termination. However, due to the rarity, these values are not reported and the report is associated with the primary procedure that was identified on the record. If only a secondary procedure was reported, that procedure was considered the primary procedure.

There were also a handful of records that were submitted as terminations; however, receipt of a new record informed ISDH that the original procedure had been unsuccessful and a new procedure was conducted to complete the termination. In these cases, the initial record has been removed from the dataset as a termination was not completed in association with the record, and the new record was maintained to account for a completed termination.

In 2014, there were eight abortion clinics licensed in Indiana; there were also 123 licensed acute care hospitals and 131 licensed ambulatory surgical centers. Of the 8,118 procedures performed in the state, 99.59% were performed at abortion clinics, 0.39% at acute care hospitals, and 0.01% at ambulatory surgical centers.

Table 14 provides a breakdown of the number of terminations performed by each reporting facility in 2014. Affiliated Women's Services, Inc. closed June 27, 2014, leading to the low count of terminations at the facility.

Table 14. Terminations reported in Indiana by Facility, 2014

Facility Type	Facility Name	Facility Address	Count	Percent
Abortion Clinic	Affiliated Women’s Services, Inc.	2215 Distributors Dr. Indianapolis	32	0.39
	Clinic for Women	3607 W. 16 th St. Indianapolis	998	12.29
	Friendship Family Planning Clinic of Indiana	3700 Broadway Gary	158	1.95
	Indianapolis Women’s Center	1201 N. Arlington Ave. Indianapolis	1,179	14.52
	Planned Parenthood of Indiana and Kentucky– Indianapolis	8590 Georgetown Rd. Indianapolis	2,973	36.62
	Planned Parenthood of Indiana and Kentucky – Bloomington	421 S. College Ave. Bloomington	718	8.84
	Planned Parenthood of Indiana and Kentucky – Lafayette	964 Mezzanine Dr. Lafayette	169	2.08
	Planned Parenthood of Indiana and Kentucky – Merrillville	8645 Connecticut St. Merrillville	1,070	13.18
	Women’s Pavilion	2010 Ironwood Cir. South Bend	788	9.71
Acute Care Hospital	Indiana University Health University Hospital	550 University Blvd. Indianapolis	4	0.05
	Sidney & Lois Eskenazi Hospital	720 Eskenazi Ave. Indianapolis	28	0.34
Ambulatory Surgical Center	Community Surgery Center North	8040 Clearvista Pkwy. Indianapolis	1	0.01
Total			8,118	99.98*

* Percentages may not add to 100.0 due to rounding.

Terminations at abortion clinics accounted for 99.59% of procedures, as well as 100% of terminations using Mifepristone and/or Misoprostol, and 99.9% of terminations employing suction curettage. All surgical terminations (D&E) were performed at acute care hospitals, and only one termination was performed at an ambulatory surgical center.

Table 15. Procedure used to terminate pregnancy in Indiana by Facility type, 2014

Procedure	Facility Type						Total
	Abortion Clinic		Acute Care Hospital		Ambulatory Surgical Center		
	Count	Percent	Count	Percent	Count	Percent	
Dilation & Evacuation	0	0.00	27	100.0	0	0.00	27
Mifepristone/Misoprostol	2,165	100.0	0	0.00	0	0.00	2,165
Suction Curettage	5,920	99.90	5	0.08	1	0.02	5,926
Total	8,085		32		1		8,118

Suction curettage was the only procedure that was practiced at all three facility types, with 99.9% occurring in abortion clinics, 0.08% at acute care hospitals, and 0.02% at ambulatory surgical center. No terminations were reported from other clinics or physician offices.

Estimated Gestational Age

The gestational age range was 1 to 20 weeks, with an average gestational age of 6.6 weeks (SD= 2.2 weeks) and a median gestational age of 6 weeks.

In Indiana, 78.82% of terminations occurred prior to the ninth week of pregnancy, 20.90% occurred during the 9-13 week timeframe, and those more than 13 weeks accounted for less than one percent of terminations in 2014. Data from 2012 and 2013 show a similar trend, with 77.99% and 75.41% of terminations occurring prior to week nine, respectively.

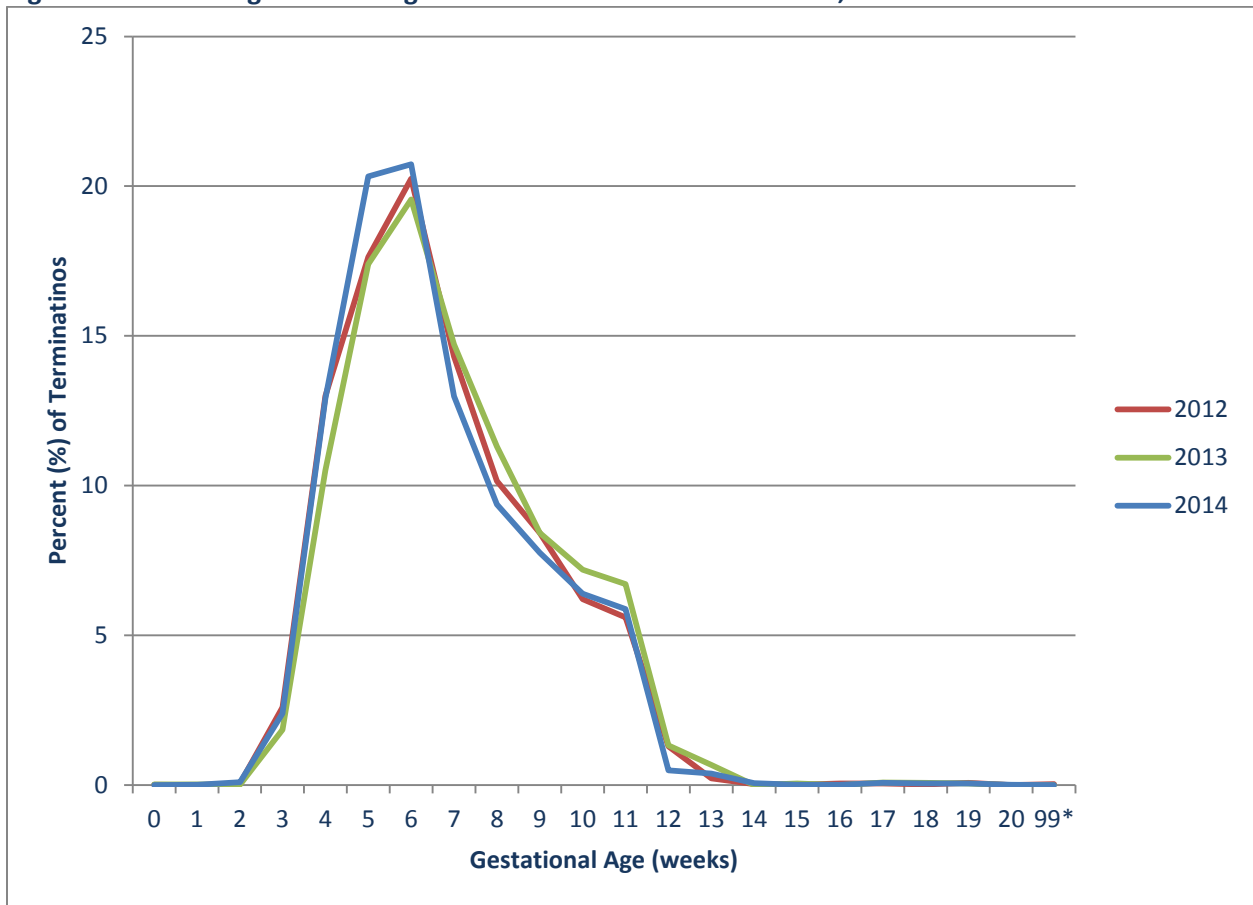
Table 16. Estimated gestational age at time of termination in Indiana, 2014

Weeks of Gestation	Count	Percent
≤ 8	6,399	78.82
9-13	1,697	20.90
14-15	6	0.07
16-17	7	0.09
18-20	9	0.11
Total	8,118	99.99*

* Percentages may not add to 100.0 due to rounding.

Further detailed analysis of data from 2012 to 2014 shows that a gestational age of six weeks is reported most frequently by physicians; compared to 2012 and 2013, 2014 showed a secondary peak at gestational age of five weeks. The majority of terminations are also consistently completed prior to the thirteenth week of gestation.

Figure 7. Estimated gestational age at time of termination in Indiana, 2012–2014



* Indicates percentage of terminations where the gestation age in weeks was not provided on the report.

Indiana Code dictates that the gestation of the fetus is determined by the physician’s determination of postfertilization age; as such, estimated gestational age, in weeks, is based on this value. When postfertilization age is not reported, estimated gestational age was used to approximate the gestational age. Where neither was reported, the gestational age was unknown. There were no occurrences where the gestational age was unknown in 2013 or 2014; however, 0.03% of terminations in 2012 were of unknown gestational age.

Of the terminations that were completed at more than thirteen weeks gestation, 95.45% were D&E. Suction curettage accounted for 73.18% of terminations thirteen weeks or less; 26.74% of procedures at thirteen weeks or less were completed with the pharmaceuticals Mifepristone and/or Misoprostol.

Table 17. Estimated gestational age among women obtaining terminations in Indiana by Procedure, 2014

Weeks of Gestation	Procedure						Total
	Dilation & Evacuation		Mifepristone/Misoprostol		Suction Curettage		
	Count	Percent	Count	Percent	Count	Percent	
≤ 8	0	0.00	2,161	33.77	4,238	66.23	6,399
9-13	6	0.35	4	0.24	1,687	99.41	1,697
14-15	6	100.0	0	0.00	0	0.00	6
16-17	7	100.0	0	0.00	0	0.00	7
18-20	8	88.89	0	0.00	1	11.11	9
Total	27		2,165		5,926		8,118

Geographic Information of Women Receiving Terminations

Geographic information provided on terminated pregnancy reports consists of the county where the termination was performed and the state and county of the woman’s residence. While county of termination must be indicated on all reports, county of residence is not always provided.

County of Termination

In 2014, reported terminations were only performed in five counties: Lake, Marion, Monroe, St. Joseph, and Tippecanoe. Of these, Marion County had the most, accounting for 64.24% of terminations; Tippecanoe County had the fewest, accounting for only 2.08% of terminations.

Table 18. County where termination performed in Indiana, 2014

County of Termination	Count	Percent
Lake	1,228	15.13
Marion	5,215	64.24
Monroe	718	8.84
St. Joseph	788	9.71
Tippecanoe	169	2.08
Total	8,118	100.0

Marion County continues to see the most terminations, with 61.51% in 2012 and 63.08% in 2013. In 2012 and 2013, terminations were also reported in Allen County, 2.99% and 4.32%, respectively.

County of Residence

There were 7,621 terminations for Indiana residents in 2014. County of residence was only analyzed for women who were Indiana residents. Table 19 breaks down the number of terminations by county of residence and age (less than 20 and at least 20), for the counties that accounted for at least one percent of the total number of residential women.

Table 19. County of residence of Indiana residents receiving terminations in Indiana by Age, 2014

County of Residence*	Count		Percent of All Residents
	Adolescent (< 20)	Adult (≥ 20)	
Allen	33	297	4.33
Bartholomew	4	77	1.06
Delaware	24	103	1.67
Elkhart	13	144	2.06
Hamilton	25	268	3.84
Hendricks	24	140	2.15
Howard	13	81	1.23
Johnson	21	160	2.38
Lake	86	624	9.32
LaPorte	14	120	1.76
Madison	20	116	1.78
Marion	250	2,419	35.02
Monroe	29	219	3.25
Porter	32	163	2.56
St. Joseph	47	290	4.42
Tippecanoe	33	224	3.37
Vanderburgh	9	117	1.65
Vigo	15	90	1.38

* Counties that accounted for at least one percent of the total number of residential women.

Similar to the occurrence of terminations by county, Marion County also had the largest number of female residents obtaining terminations in 2014 (35.02%). Lake County accounted for 9.32% of residential terminations, while St. Joseph and Allen counties each accounted for just over 4% of residential terminations.

Table 20 provides a breakdown of the number of residents from each Indiana County that received terminations in 2014.

Table 20. Number of Indiana residents receiving terminations in Indiana by County, 2014

County of Residence	Count	County of Residence	Count	County of Residence	Count
Adams	8	Hendricks	164	Pike	5
Allen	330	Henry	33	Porter	195
Bartholomew	81	Howard	94	Posey	5
Benton	12	Huntington	13	Pulaski	7
Blackford	9	Jackson	18	Putnam	28
Boone	41	Jasper	31	Randolph	16
Brown	8	Jay	5	Ripley	12
Carroll	14	Jefferson	14	Rush	16
Cass	20	Jennings	16	St. Joseph	337
Clark	20	Johnson	181	Scott	13
Clay	14	Knox	22	Shelby	31
Clinton	23	Kosciusko	41	Spencer	5
Crawford	2	LaGrange	7	Starke	14
Daviess	15	Lake	710	Steuben	5
Dearborn	7	LaPorte	134	Sullivan	7
Decatur	17	Lawrence	39	Tippecanoe	257
DeKalb	19	Madison	136	Tipton	6
Delaware	127	Marion	2,669	Union	2
Dubois	20	Marshall	34	Vanderburgh	126
Elkhart	157	Martin	5	Vermillion	6
Fayette	19	Miami	11	Vigo	105
Floyd	10	Monroe	248	Wabash	27
Fountain	12	Montgomery	27	Warren	2
Franklin	3	Morgan	54	Warrick	17
Fulton	16	Newton	14	Washington	6
Gibson	20	Noble	21	Wayne	52
Grant	51	Ohio	1	Wells	13
Greene	16	Orange	8	White	21
Hamilton	293	Owen	9	Whitley	16
Hancock	62	Parke	8	Unknown	40
Harrison	9	Perry	7	Total	7,621

Discussion

This report has started to identify consistencies among women receiving pregnancy terminations in Indiana by exploring new data from 2014 in conjunction with retrospective data from 2012 and 2013; however, retrospective data is not comparable to previously published reports. All demographic and pregnancy history information was self-reported by the woman obtaining a termination, while medical information was provided by the performing physician.

The largest portion of pregnancy terminations are for women in their twenties (59.89%). Women were also more likely to identify as white (58.36%), non-Hispanic or Latino (91.23%), and unmarried (86.22%). The most frequently reported education levels were completion of a high school diploma or GED (39%) or some college credit, but no degree (20.28%).

Women in their thirties (30–39) were identified as showing the highest numbers of previous pregnancies, previous live births, previous spontaneous terminations, and previous induced terminations, when compared to all other age groups. Regardless of age group, 82.29% of women reported no previous spontaneous terminations and 63.70% of women reported no previous induced terminations.

In 2014, there were no records identifying medical (non-surgical) procedures where the procedure was not specified, compared to 1,601 such procedures in 2012. There were also no records without an identified procedure in 2014. The use of Mifepristone and/or Misoprostol continued to increase each year, while the use of suction curettage has decreased over the same time period. The majority of terminations in 2014 were performed in licensed abortion clinics (99.59%); and terminations with reported gestational age less than nine weeks accounted for 78.82% of reports.

Marion County was reported as the most common county of termination (64.24%) as well as the most common county of residence (35.02%), for Indiana residents. Lake County was identified just behind Marion County for terminations and residency, accounting for 15.13% of all terminations and 9.32% of Indiana residents.

There are some key limitations to this report. Due to the fact that demographic and pregnancy history are reported by the women receiving terminations, the information is subject to bias. There is also the possibility that women who required a second procedure to complete the termination were reported as a new record, or they attended a different facility to complete the procedure; each of these scenarios would lead to an increase in the number of terminations reported to ISDH. A third scenario that may increase the number of reported terminations would be if the woman had an incomplete procedure but chose not to return for follow-up, instead choosing to have the child, because the reported termination would have been incomplete.

As this is the first report for Indiana like this, there is a limitation to what can be reported, particularly in terms of trending data. Finally, all data is from reported terminated pregnancies; as such, there is the possibility for terminations to occur of which ISDH is not informed and cannot be included in this report.

Appendix A: State Form 36526 (R4 / 12-11)



TERMINATED PREGNANCY REPORT
 State Form 36526 (R4 / 12-11)
 INDIANA STATE DEPARTMENT OF HEALTH – VITAL RECORDS
 Per IC 16-34-2

PLEASE CHECK IF AN AMENDED FORM.

Mail completed form to: **Indiana State Department of Health**
 P. O. Box 7125
 Indianapolis, IN 46204

**** If the patient is less than fourteen (14) years of age** the physician performing the termination shall transmit this report to the Department of Child Services within **three (3) days after** the termination is performed via email at dcshotlinereports@dcs.in.gov. Further, this **report shall also be mailed** to the Indiana State Department of Health within three (3) days of the termination. (See IC 16-34-2-5)

Reports for all other patients shall be mailed to the Indiana State Department of Health **no later than July 30 for each termination performed in the first six (6) months of that year** and **no later than January 30 for each termination performed for the last six (6) months of the preceding year**. Each failure to file this report on time as required is a Class B misdemeanor per IC 16-34-2-5-(b).

Facility name (If not a hospital or clinic, please enter address.)		City or town, of pregnancy termination		County of pregnancy termination	
Patient's age**	Married <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of pregnancy termination (month, day, year)		Education (Enter highest grade completed.)	
Race (Select one or more.) <input type="checkbox"/> Black or African American		<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Asian	Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander		<input type="checkbox"/> White	<input type="checkbox"/> Other		
Live Births:	Number now living (enter number or check None) <input type="checkbox"/> None		Number now deceased (enter number or check None) <input type="checkbox"/> None		
Other Terminations:	Number of spontaneous terminations (enter number or check None) <input type="checkbox"/> None		Number of induced terminations (enter number or check None) <input type="checkbox"/> None		
Dates of terminations (Do not include this termination.)					
1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____					
7. _____ 8. _____ 9. _____ 10. _____ 11. _____ 12. _____					
Fetus delivered alive? <input type="checkbox"/> Yes <input type="checkbox"/> No		Fetus viable? <input type="checkbox"/> Yes <input type="checkbox"/> No		If viable, medical reason for termination:	
Pathological examination performed? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, results:			
Procedure that Terminated pregnancy (check one only)		Type of Termination Procedures		Complication(s) of Pregnancy Termination (Check all that apply.)	
<input type="checkbox"/> Medical (nonsurgical) Mifepristone / Misoprostol	<input type="checkbox"/>	Additional Procedures used for this termination, if any (check all that apply)		<input type="checkbox"/> None <input type="checkbox"/> Uterine Perforation	
<input type="checkbox"/> Suction Curettage	<input type="checkbox"/>			<input type="checkbox"/> Hemorrhage <input type="checkbox"/> Cervical Laceration	
<input type="checkbox"/> Menstrual Aspiration	<input type="checkbox"/>			<input type="checkbox"/> Infection <input type="checkbox"/> Retained Products	
<input type="checkbox"/> Medical (Nonsurgical) Specify Medication(s) _____	<input type="checkbox"/>			<input type="checkbox"/> Other (Specify): _____	
<input type="checkbox"/> Medical (Surgical) Other (Specify) _____	<input type="checkbox"/>			Did this termination of pregnancy result in a maternal death? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Date last normal menses began (month, day, year)		Physician estimate of gestation (in weeks)		Postfertilization age of the fetus (in weeks)	
How determined:					

My signature certifies this termination was performed according to IC 16-34-2.

Signature of physician performing termination	Full name of physician performing termination
Address of physician performing termination (number and street, city, state, and ZIP code)	

Patient Identification Number (optional)	County of Residence	State of Residence
Name of father, if known	Age of father	If age not known, approximate age

DATE RECEIVED BY ISDH (month, day, year): _____

Appendix B: State Form 36526 (R3 / 6-11)

(R3 / 6-11)



TERMINATED PREGNANCY REPORT
 State Form 36526 (R3 / 6-11)
 INDIANA STATE DEPARTMENT OF HEALTH -- VITAL RECORDS
 Per IC 16-34-2

PLEASE CHECK IF AN AMENDED FORM.

Mail completed form to:	Indiana State Department of Health P. O. Box 7125 Indianapolis, IN 46204
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If the patient is less than fourteen (14) years of age the physician performing the termination shall transmit this report to the Department of Child Services within three (3) days after the termination is performed via email at dcsHotlineReports@dcs.in.gov. Further, this report shall also be mailed to the Indiana State Department of Health within three (3) days of the termination. (See IC 16-34-2-5)

Reports for all other patients shall be mailed to the Indiana State Department of Health **no later than July 30 for each termination performed in the first six (6) months of that year and no later than January 30 for each termination performed for the last six (6) months of the preceding year.** Each failure to file this report on time as required is a Class B misdemeanor per IC 16-34-2-5-(b).

Facility name (If not a hospital or clinic, please enter address.)		City or town, of pregnancy termination		County of pregnancy termination	
Patient's age**	Married <input type="checkbox"/> Yes <input type="checkbox"/> No	Date of pregnancy termination (month, day, year)		Education (Enter highest grade completed.)	
Race (Select one or more.) <input type="checkbox"/> Black or African American		<input type="checkbox"/> American Indian or Alaska Native	<input type="checkbox"/> Asian	Ethnicity <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino	
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander		<input type="checkbox"/> White		<input type="checkbox"/> Other	
Live Births:	Number now living (enter number or check None) <input type="checkbox"/> None		Number now deceased (enter number or check None) <input type="checkbox"/> None		
Other Terminations:	Number of spontaneous terminations (enter number or check None) <input type="checkbox"/> None		Number of induced terminations (enter number or check None) <input type="checkbox"/> None		
Dates of terminations (Do not include this termination.)					
1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____					
7. _____ 8. _____ 9. _____ 10. _____ 11. _____ 12. _____					
Fetus delivered alive? <input type="checkbox"/> Yes <input type="checkbox"/> No	Fetus viable? <input type="checkbox"/> Yes <input type="checkbox"/> No	If viable, medical reason for termination:			
Pathological examination performed? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, results:			
Procedure that terminated pregnancy (check one only)		Type of Termination Procedures	Additional Procedures used for this termination, if any (check all that apply)		Complication(s) of Pregnancy Termination (Check all that apply.)
<input type="checkbox"/> Medical (nonsurgical) Mifepristone / Misoprostol		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> None <input type="checkbox"/> Uterine Perforation
<input type="checkbox"/> Suction Curettage		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Hemorrhage <input type="checkbox"/> Cervical Laceration
<input type="checkbox"/> Menstrual Aspiration		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Infection <input type="checkbox"/> Retained Products
<input type="checkbox"/> Medical (Nonsurgical) Specify Medication(s) _____		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/> Other (Specify): _____
<input type="checkbox"/> Medical (Surgical) Other (Specify) _____		<input type="checkbox"/>	<input type="checkbox"/>		Did this termination of pregnancy result in a maternal death? <input type="checkbox"/> Yes <input type="checkbox"/> No
Date last normal menses began (month, day, year)	Physician estimate of gestation (in weeks)		Postfertilization age of the fetus (in weeks)		
How determined:					

My signature certifies this termination was performed according to IC 16-34-2.	
Signature of physician performing termination	Full name of physician performing termination
Address of physician performing termination (number and street, city, state, and ZIP code)	

Patient Identification Number	Country of Residence	State of residence	County of residence	City or Town of residence	Patient's ZIP code
Name of father, if known			Age of father	If age not known, approximate age	

DATE RECEIVED BY ISDH (month, day, year): _____

Appendix C: Electronic Terminated Pregnancy Database

IVER - Terminated Pregnancy
submit | cancel

Facility *

Patient's Age *

Married

Yes No

Date of Termination *

Education

Race

American Indian or Alaska Native Asian Black or African American

Native Hawaiian or Pacific Islander White Other

Ethnicity

Hispanic or Latino Not Hispanic or Latino

Live Births

Number now living:

Number now deceased:

Other Terminations

Spontaneous Terminations:

Induced Terminations:

Previous Termination Dates

1) -

2) -

3) -

4) -

5) -

6) -

Fetus delivered alive?

Yes No

Fetus viable?

Yes No

Pathological exam?

Yes No

Type of Termination Procedures

Procedure that Terminated Pregnancy

Medical (nonsurgical) Mifepristone/Misoprostol

Suction Curettage

Menstrual Aspiration

Medical (nonsurgical)

Medical (surgical) Other

Additional Procedures used for this termination

Complication(s) of Termination (check all that apply)

None Uterine Perforation

Hemorrhage Cervical Laceration

Infection Retained Products

Other

Did this termination of pregnancy result in a maternal death?

Yes No

Date last normal menses began

Physician estimate of gestation *

(In weeks)

Postfertilization age of the fetus *

(In weeks)

How determined?

Physician *

Patient *

Identification Number:

State of Residence:

County of Residence:

Zip Code:

Father

Name:

Age: approximate

Date Received By ISDH:

Comments

Indiana State Department of Health - Vital Records
submit | cancel

Appendix D: Glossary

Childbearing years: The reproductive age span of women, assumed for statistical purposes to be 15–44 or 15–49 years of age.¹⁰

Dilation & Evacuation (D&E): Dilation & Evacuation is a surgical abortion that is typically performed midway during the second trimester of pregnancy and in which the uterine cervix is dilated and fetal tissue is removed using surgical instruments (as a forceps and curette) and suction. It is also referred to as D&E.⁵

Induced abortion: An intentional termination of pregnancy before the fetus has developed enough to live if born. From 20% to 50% of pregnancies are terminated deliberately at the request of the mother or for medical indications, during the first trimester by vacuum aspiration and/or curettage or during the second trimester by dilation and evacuation, induction of labor, or hysterotomy.¹¹ This report references induced terminations regarding pregnancy history.

Terminated pregnancy or abortion: “Abortion” means the termination of human pregnancy with an intention other than to produce a live birth or to remove a dead fetus. The term includes abortions by surgical procedures and by abortion inducing drugs (IC § 16-18-2-1).³

Mifepristone (RU-486): RU-486, also known as Mifepristone, is a drug taken orally to induce abortion, especially early in pregnancy, by blocking the body’s use of progesterone. The chemical formula for Mifepristone is $C_{29}H_{35}NO_2$.⁶ Mifepristone may also be identified by the proprietary names Korlym® and Mifeprex®.⁸

Misoprostol: Misoprostol is a synthetic prostaglandin analog used to induce abortion in conjunction with RU-486 and to prevent stomach ulcers associated with nonsteroidal anti-inflammatory drug (NSAID) use. The chemical formula for Misoprostol is $C_{22}H_{38}O_5$.⁷

Pregnancy history: Pregnancy history is a calculated variable that is the sum of the number of previous live births, the number of previous spontaneous terminations, and the number of previous induced terminations.

Previous live births: The number of previous live births is a calculated variable that is the sum of the number of previous live births living and previous live births deceased.

Rate: The number of terminations per 1000 women aged 15–44 years estimated as living in Indiana in 2014. Terminations where age was unknown were excluded from the numerator.

Spontaneous abortion or miscarriage: A termination of pregnancy before the twentieth week of gestation as a result of abnormalities of the conceptus or maternal environment. Up to 30% of pregnancies may end as spontaneous abortions, many caused by blighted ova that have congenital defects incompatible with life.¹¹ This report references spontaneous terminations regarding pregnancy history.

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