

## INCOMPLETE ABORTION IN BOSOMTWE DISTRICT, ASHANTI, GHANA

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### ABSTRACT

*Strategies for preventing unsafe abortion have been unyielding as a result of which many women die and develop complications from unsafe abortion including those resulting in induced abortion ending up as incomplete abortion. There is increase in incidence of death due to abortion at Bosomtwe district.*

*This study was an un-matched case-control study with the objective of assessing the specific differences in obstetric history and abortion experiences between incomplete abortion clients (cases) and normal delivery clients (controls) attending St. Michael's Hospital, Bosomtwe district. A comparative analysis of 61 cases and 129 controls revealed that, there was a statistical difference in both the obstetric history and abortion experiences between groups. Cases were 12.7 times more likely to have had abortion; 19.0 times more likely to have attempted to stop the index pregnancy; and 6 times more likely to have self-induced index pregnancy as a means of termination as compared to controls.*

*It is recommended that stakeholders, especially the district health directorate should use specific predictors for incomplete abortion among women to educate and encourage them to live a healthy reproductive life.*

**KEYWORDS:** Incomplete Abortion, Normal Delivery, Obstetric History, Abortion Experiences