

Evaluating Patient Satisfaction and Acceptance of Manual Vacuum Aspiration in Outpatient Care



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Introduction

The Covid-19 pandemic demanded new and innovative approaches to work. With severely constrained operating theatre capacity, the emphasis turned to expanding outpatient surgeries and reducing inpatient hospital stays. This shift combined with guidance from the national abortion care service, resulted in implementation of MVA as an outpatient surgical abortion procedure at Southend University Hospital from April 2020.

Objective

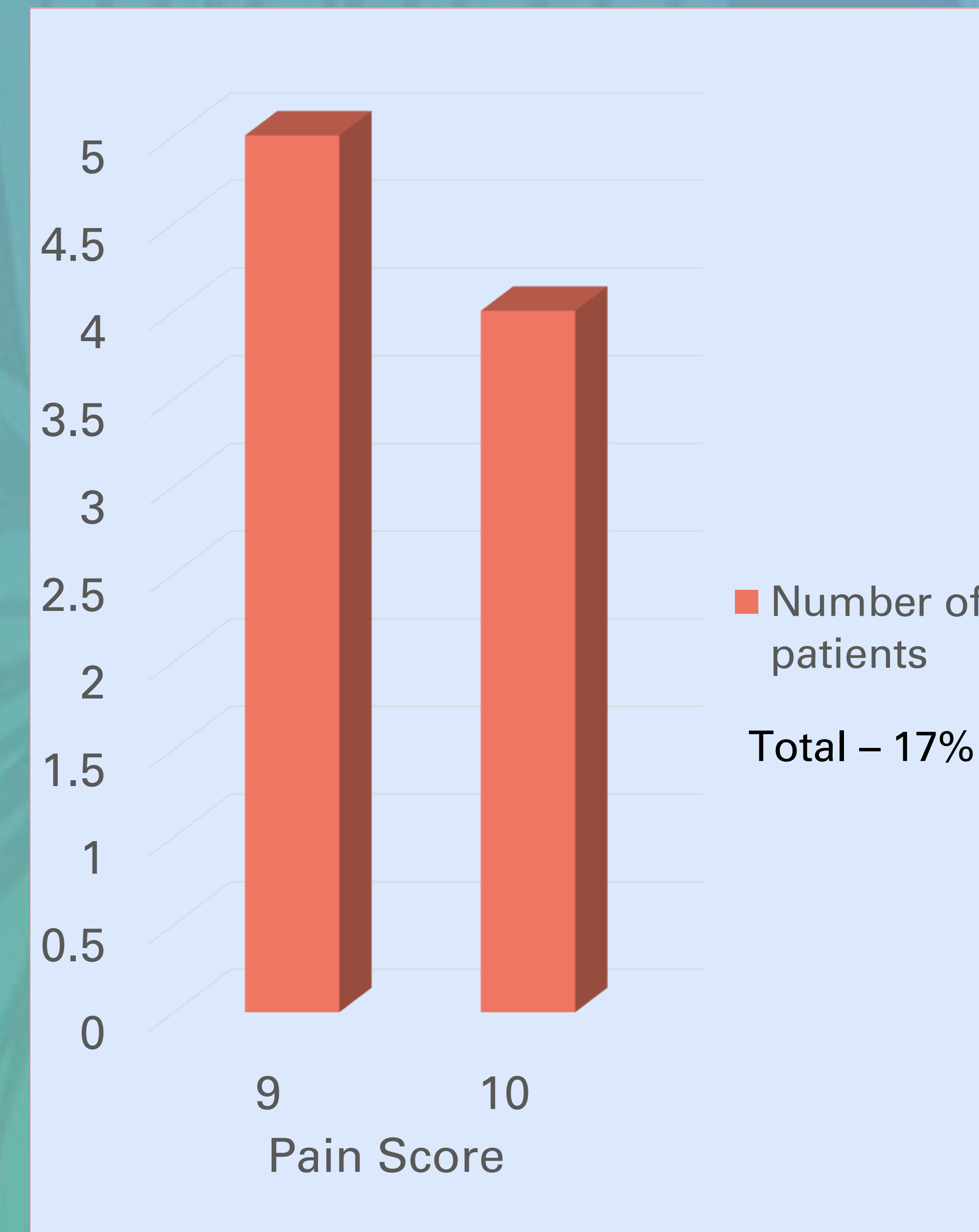
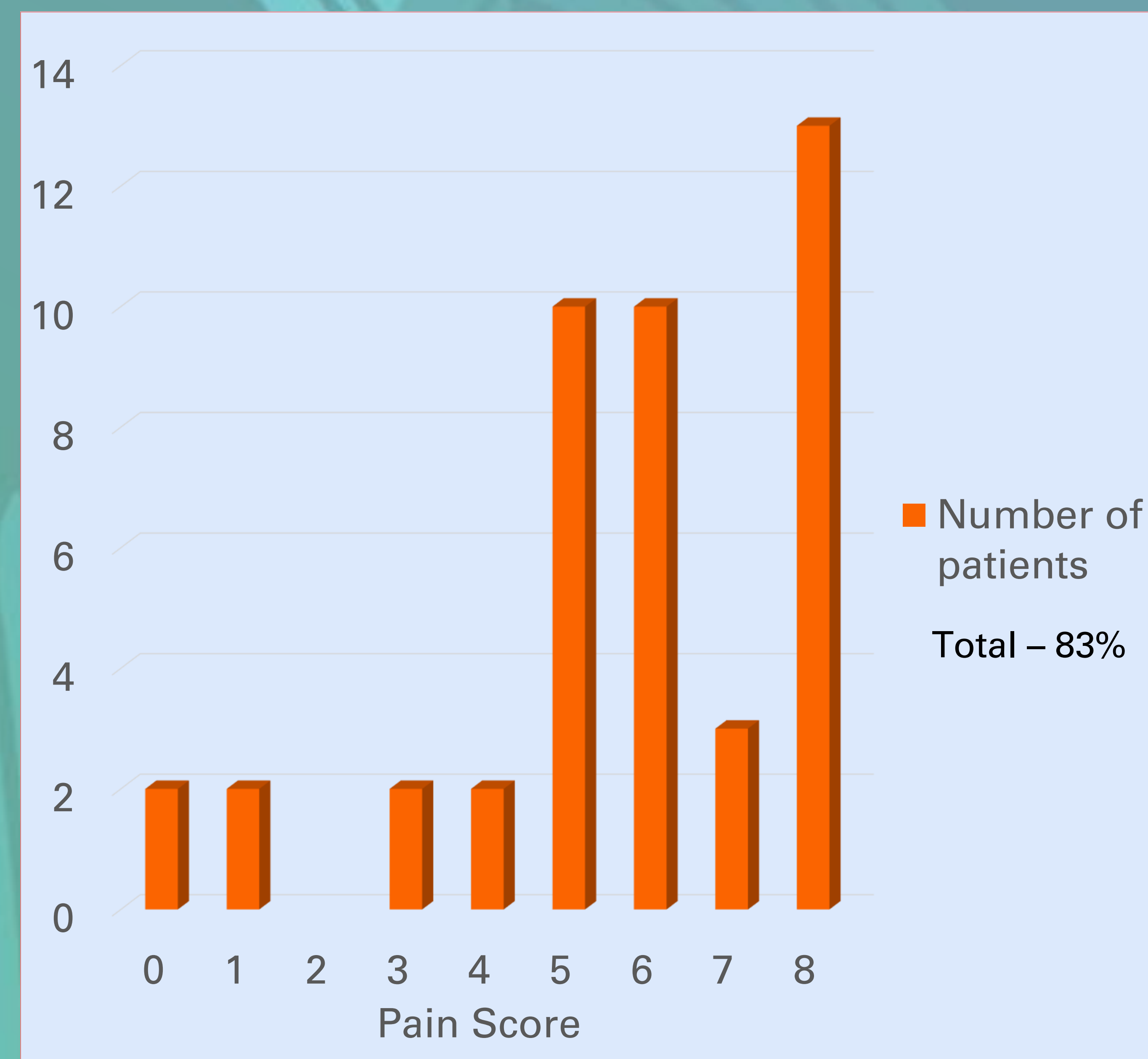
Evaluating patient satisfaction and acceptability of MVA performed under local anaesthesia for early abortion care.

Method

Prospective collection of patient feedback analysed after MVA procedures from April 2020 to December 2021 using quantifiable opinion scales and descriptive comments. A remarkable 96% response rate was achieved, with 53 out of 55 women returning completed questionnaires.

Results

All women felt well-informed and were given alternative treatment options. They had the chance to ask questions and were treated with respect. Staff were friendly, and doctors listened attentively, boosting confidence in care. Pain score analysis revealed 83% with scores less than or equal to 8, and 17% of women, scoring 9 to 10. A significant 98.1% of women expressed willingness to undergo MVA in the future and would recommend it to family and friends. Overall care was rated as excellent by 98.1% and good by 1.9% of respondents. While the majority gave **positive feedback** regarding the support they received, a few noted challenges in contacting the gynaecology ward for queries.



Conclusion

MVA performed under local anaesthesia as outpatient procedure is an acceptable alternative to electric vacuum aspiration (EVA), has low pain scores and high patient acceptance rates. Following this survey, women are encouraged to contact TOP clinic helpline instead of gynaecology ward.