

Abortion does not increase mental health problems in women, shows review

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Having an abortion makes no difference to a woman's mental health, shows a major review of the evidence to date.

The finding, from a review carried out by the National Collaborating Centre for Mental Health at the Royal College of Psychiatrists, should put an end to research investigating the psychological effects of abortion, said Tim Kendall, director of the centre and a member of the review's steering group.

"A more fruitful line of inquiry is to look at the mental health needs of [women] with an unwanted pregnancy—not the resolution of that pregnancy," he told a press briefing to launch the review.

The review claims to be the most comprehensive and systematic review to date of the evidence of mental health problems in women with unwanted pregnancies. Funded by the Department of Health for England, it was set up to provide an answer to women who seek an abortion and ask about the risks to their mental health.

Many studies and reviews have examined the question, but the quality of the results and interpretation of the findings are variable and conflicting.

In the latest review, the researchers identified 180 potentially relevant studies published between 1990 and 2011, 44 of which, involving many hundreds of thousands of women, met their inclusion criteria. All of these studies measured mental health outcomes in women more than 90 days after they had had an abortion or had given birth.

The review concluded that it makes no difference to a woman's mental health whether she chooses to have an abortion or to continue with an unwanted pregnancy. However, it also found that about a third of women who have an unwanted pregnancy have mental health problems, whether it results in an abortion or a birth. This is three times higher than the rate of 11-12% of people with mental health problems among the general population.

"This [mental health problem] could have been there before [the unwanted pregnancy], or it could be there because of the pregnancy," said Professor Kendall.

Women who have had mental health problems before an abortion are at greater risk of mental health problems after the abortion, says the review. And some other factors may be associated with mental health problems after an abortion, such as a woman having a negative attitude towards abortion in general, being under pressure from her partner to have an abortion, or experiencing other stressful life events.

The review, a draft of which was put out for a three month consultation in April, has led to 300 pages of comments to which the steering group has responded.

Although the studies they looked at had used varied methods, the researchers carried out a meta-analysis of four of the studies and confirmed their original finding: that women who have an abortion are no more likely to have mental health problems afterwards than women who give birth. Professor Kendall said that other meta-analyses have found the opposite result because they have not controlled for previous mental health problems.

The Royal College of Psychiatrists has said it is revising its position statement on abortion to reflect the findings of this latest review, and the Royal College of Obstetricians and Gynaecologists has already revised its guidelines on the care of women requesting an abortion in light of the review.

Kate Guthrie, a spokeswoman for the Royal College of Obstetricians and Gynaecologists, said, "It is important that all women, and particularly those with a history of previous mental health problems, are offered appropriate support and, if needed, follow up."

Induced Abortion and Mental Health: A Systematic Review of the Mental Health Outcomes of Induced Abortion, Including their Prevalence and Associated Factors, together with comments and responses from the Academy of Royal Medical Colleges, is at www.nccmh.org.uk/publications_SR_abortion_in_MH.html.

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