

Misoprostol in obstetrics and gynaecology

Dosage Guidelines

INDICATION	DOSAGE	NOTES
Induced abortion ¹ (1st Trimester)	800mcg vaginally or sublingual 3-hrly (max x3 within 12 hrs) ^a	Ideally used 48h after mifepristone 200mg
Missed abortion (1st Trimester)	800mcg vaginally 3-hrly (max x2) or sublingual 600mcg 3-hourly (max x2) ^b	Give 2 doses and leave to work for 1-2 weeks (unless heavy bleeding or infection)
Incomplete abortion ^{2,3} (1st Trimester)	600mcg orally single dose ^a or 400mcg sublingual single dose ^a	Leave to work for 2 weeks (unless heavy bleeding or infection)
Cervical ripening pre-instrumentation (1st Trimester)	400mcg vaginally 3-hrs or sublingually 2-3 hrs before procedure ^a	Use for insertion of intrauterine device, surgical termination of pregnancy, dilatation and curettage, hysteroscopy
Induced abortion ^{1,4} /Interruption of pregnancy (2nd Trimester)	400mcg vaginally or sublingually 3-hrly (max x5) ^a	Most effective when used 48h after mifepristone 200mg.
Intrauterine fetal death	Intrauterine fetal death4:13-17 wks: 200mcg vaginally 6-hrly (max x4) ^c . Intrauterine fetal death4:18-26 wks: 100mcg vaginally 6-hrly (max x4) ^c .	Reduce doses in women with previous caesarean section. For fetal death in the third trimester see 'Induction of Labour' below.
Induction of labour ^{2,5}	25mcg vaginally 6-hrly or 25 mcg orally 2-hrly ^d	Do not use if previous caesarean section. Instructions on preparing the oral solution can be found here.
PPH prophylaxis ²	600mcg orally single dose ^e	Not as effective as oxytocin. Exclude second twin before administration.
PPH treatment	800mcg sublingually single dose ^f	

Notes

1. Only use where legal and with mifepristone, where available
2. Included in the WHO Model List of Essential Medicines
3. Leave to work for 1-2 weeks unless excessive bleeding or infection
4. Halve dose if previous caesarian section or uterine scar
5. Make sure you use the correct dosage – overdose can lead to complications. Do not use if previous caesarian section.

References

- a) WHO/RHR. Safe abortion: technical and policy guidance for health systems (2nd edition), 2012
- b) Gemzell-Danielsson et al. IJGO, 2007
- c) Gomez Ponce de Leon et al. IJGO,2007
- d) WHO recommendations for induction of labour, 2011
- e) FIGO Guidelines: Prevention of PPH with misoprostol, 2012
- f) FIGO Guidelines: Treatment of PPH with misoprostol, 2012