Misoprostol Dosages for Reproductive Health

| Indication | Dosage | Notes |
|---|--|---|
| Induced abortion ¹ | 800mcg vaginally or | Ideally used 48 hours after mifepristone |
| (1 st Trimester) | sublingually 3-hrly | 200mg. |
| Missed abortion | (max x3 within 12hrs) ^a 800mcg vaginally 3-hrly (max | Give 2 doses and leave to work for 1-2 weeks |
| (1 st Trimester) | x2) or 600mcg sublingually 3- | (unless heavy bleeding or infection) |
| , | hrly (max x2) ^b | (* 111 11 , 111 3 1 1 1 1 1 1 |
| Incomplete abortion ^{2,3} | 600mcg orally single dose ^a or | Leave to work for 2 weeks (unless heavy |
| (1 st Trimester) | 400mcg sublingually single | bleeding or infection). |
| Compign vinening nue | dose ^a | Her for incortion of interpretaring device granical |
| Cervical ripening pre- instrumentation | 400mcg vaginally 3 hrs or sublingually 2-3 hrs before | Use for insertion of intrauterine device, surgical termination of pregnancy, dilatation and |
| (1 st Trimester) | procedure ^a | curettage, hysteroscopy |
| Induced abortion ^{1,4} / | 400mcg vaginally or | Most effective when used 48 hrs after |
| Interruption of | sublingually 3-hrly (max x5) ^a | mifepristone 200mg. |
| pregnancy | | |
| (2 nd Trimester) | 12.17 | |
| Intrauterine foetal death ⁴ | 13-17 wks: 200mcg vaginally | Reduce doses in women with previous caesarean section |
| (2 nd Trimester) | 6-hrly (max x4) ^c 18-26 wks: 100mcg vaginally | Caesarean Section |
| (2 Timester) | 6-hrly (max x4) ^c | |
| Intrauterine foetal | 25mcg vaginally 6-hrly or | Reduce doses in women with previous |
| death ⁵ | 25mcg orally 2-hrly ^d | caesarean section |
| (3rd Trimester) | | |
| Induction of labour ^{2,5} | 25mcg vaginally 6-hrly or | Do not use if previous caesarean section. |
| (3 rd Trimester) | 25mcg orally 2-hrly ^d | |
| PPH prophylaxis ² | 600mcg orally single dose ^e | Not as effective as oxytocin. Exclude second |
| (Post-Partum) | | twin before administration. |
| PPH treatment | 800mcg sublingually single dose ^f . | |
| | uose. | |

PPH = postpartum haemorrhage

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 caesarean section or uterine scar
- **5** Make sure you use the correct dosage overdose can lead to **f** FIGO Guidelines: Treatment of PPH with misoprostol, 2012

complications. Do not use if previous caesarean 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 Gómez Ponce de León et al. IJGO, 2007
- d WHO recommendations for induction of labour, 2011
- e FIGO Guidelines: Prevention of PPH with misoprostol, 2012