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Induced abortion: not an independent risk factor for pregnancy outcome, but a challenge for health counseling.

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PURPOSE: Low birth weight (LBW), preterm births, abnormal placentation, and miscarriages have been associated with prior induced abortions. An incidence-related effect has been suggested. The objective of this study is to assess the effects of prior induced abortions on obstetric risk factors and pregnancy outcome in conditions of free high-standard maternity care used by almost the entire pregnant population in Finland. **METHODS:** We analyzed a population-based database including 26,976 singleton pregnancies from 1989 to 2001, of which 2364 were among women with one prior induced abortion and 355 women had had at least two prior induced abortions. Data included maternal risk factors, pregnancy characteristics, and obstetric outcome measures and were based on results of a self-administered questionnaire at 20 weeks of pregnancy and clinical records. Odds ratios (ORs) concerning pregnancy outcomes were calculated in multiple logistic regression analysis. **RESULTS:** Induced abortions were associated with several known pregnancy risk factors; specifically, maternal age older than 35 years, unemployment, unmarried status, low educational level, smoking, alcohol consumption, overweight condition, and chronic illnesses. Preterm birth (OR, 1.19; 95% confidence interval, 1.01-1.41) in women with one prior abortion (7.3% versus 6.2%) and LBW (OR, 1.54; 95% confidence interval, 1.02-2.32) in women with two or more prior abortions (7.0% versus 4.7%) appeared to be more common, but after logistic regression analysis, we found no evidence of adverse pregnancy outcomes. **CONCLUSIONS:** Induced abortion is not an independent risk factor for adverse obstetric outcome. Marked health behavioral pregnancy risks are associated with prior induced abortions. Health counseling of these women is a challenge, but this objective has not yet been achieved.

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