



1D.

INDUCED TERMINATIONS OF PREGNANCY

In July 1976, the Arizona Department of Health Services (ADHS) began an Abortion Surveillance Program (*Arizona Administrative Code, R9-19-302D*, as authorized by the *Arizona Revised Statute 36-344*). The program required the reporting of induced terminations of pregnancy performed in hospitals, outpatient treatment centers and physicians' offices throughout the State.

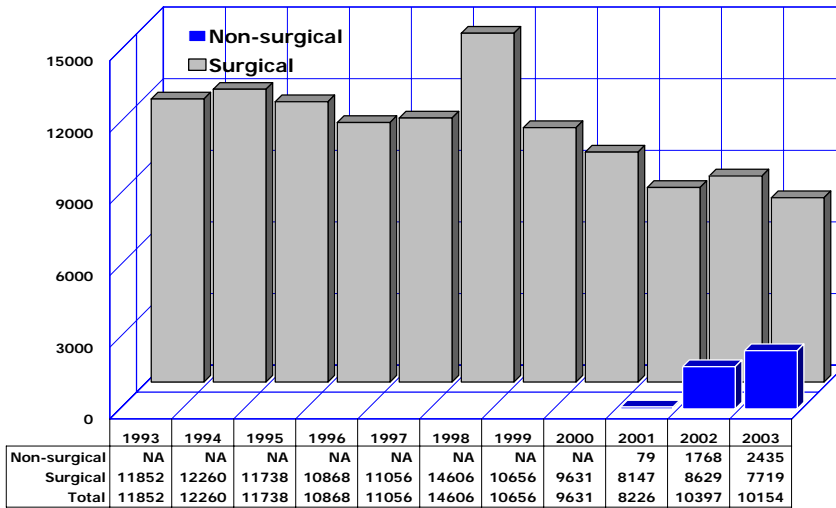
According to the Model State Vital Statistics Act and Regulations*, "induced termination of pregnancy" or abortion means "*the purposeful interruption of pregnancy with the intention other than to produce a live-born infant or to remove a dead fetus which does not result in a live birth*". This definition excludes management of prolonged retention of products of conception following fetal death. In this publication, the term "abortion" refers to induced termination of pregnancy in the above sense, and these two terms are used interchangeably.

The data in Sections 1D and 5D represent the number of abortions reported to ADHS not the actual number of abortions which occurred in the State. Although Arizona law requires that all abortions performed within the State be reported to the ADHS, complete reporting is not assured. Also, available data about abortions on residents do not include those induced terminations of pregnancy performed on Arizona residents in out-of-State facilities.

*1992 Revision published by the National Center for Health Statistics. Available online at cdc.gov/nchs/data/misc/mvsact92b.pdf

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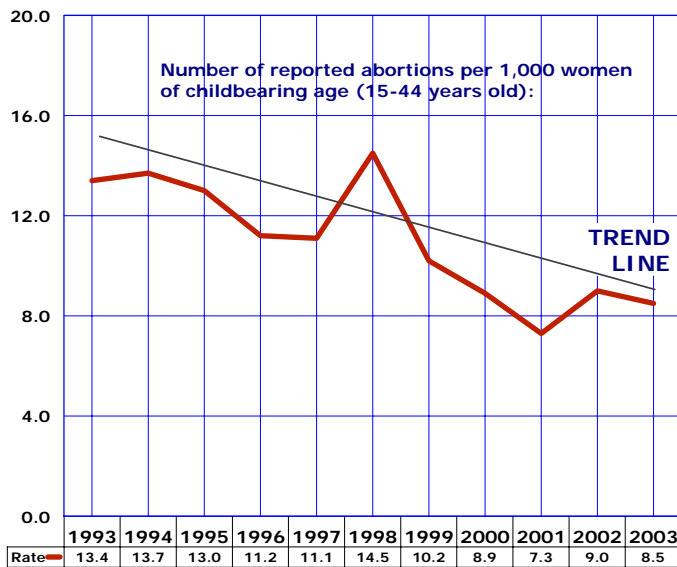
Figure 1D-1
Trends in the Number of Reported Abortions by Year,
Arizona Residents, 1993-2003



In calendar year 2003, the Arizona Department of Health Services received 10,154 reports of abortions obtained by Arizona residents, 2.3 percent less than the 10,397 reported in 2002 (**Figure 1-D1, Table 1D-1**). The number of reported *non-surgical abortions* (i.e., terminations of pregnancy by the administration of a medication such as methotrexate or mifepristone each used in conjunction with misoprostol) increased from 1,768 in 2002 to 2,435 in 2003. The number of surgical abortions (performed by curettage or by intrauterine instillation) decreased from 8,629 in 2002 to 7,719 in 2003

Most reported abortions in Arizona in 2003 were performed in non-hospital clinics (90.1 percent) and physicians' offices (9.8 percent, based on data in **Table 1D-1**). Seven out of ten (65.1 percent) women who reported to have an abortion in 2003 had the procedure for the first time. Eighty-five percent of all reported abortions occurred before 13 weeks of pregnancy.

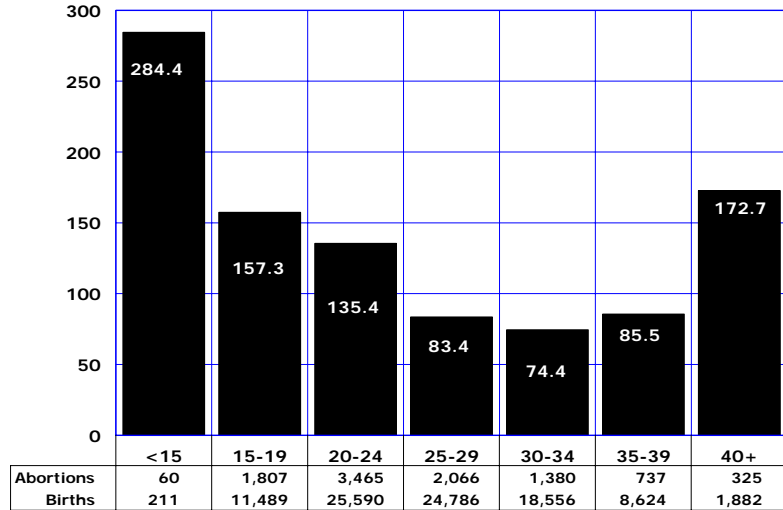
Figure 1D-2
Trends in Abortion Rates by Year,
Arizona Residents, 1993-2003



The rate of induced terminations of pregnancy per 1,000 female residents aged 15-44 decreased from 9.0 in 2002 to 8.5 in 2003. A time series analysis of annual abortion data for 1993-2003 reveals a declining trend (**Figure 1D-2**) in (perhaps only surgical) terminations of pregnancy in Arizona.

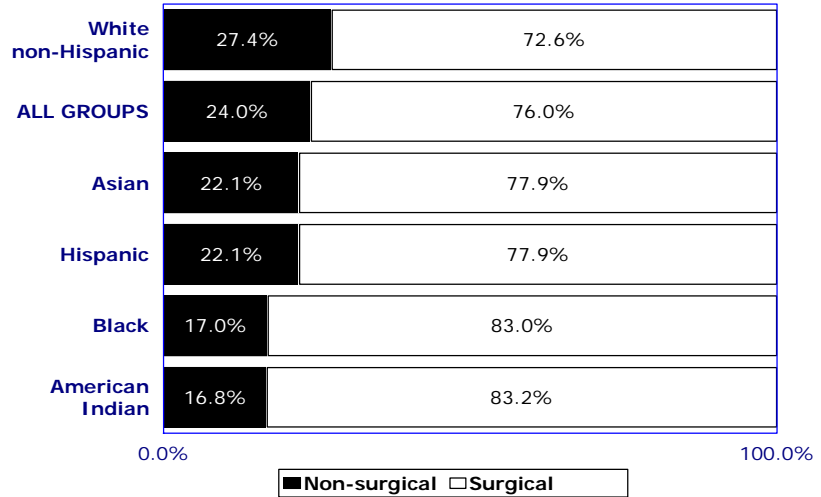
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Figure 1D-3
Abortion Ratios* by Age Group,
Arizona Residents, 2003



*Number of reported abortions per 1,000 live births in specified age group.

Figure 1D-4
Proportional Contribution of Non-Surgical and Surgical
Abortions by Race/Ethnicity, Arizona, 2003



Non-surgical: Mifepristone, Methotrexate, RU486, etc.

Abortion ratios (the number of abortions per 1,000 live births in each age group) vary by age of women at reported termination of pregnancy. Ratios tend to be higher at the extremes of the age distribution of the childbearing period, i.e. among girls under 15 years and women 40 years of age and over (Figure-1D-3).

In 2003, non-surgical (also called "medical") abortions made up approximately 24 percent of all procedures reported in Arizona. Only among White non-Hispanic women the proportion of non-surgical abortions exceeded the average for all groups (Figure 1D-4). The ratios of non-surgical abortions among Black and American Indian women were the lowest among ethnic groups.