

1D.

INDUCED TERMINATIONS OF PREGNANCY

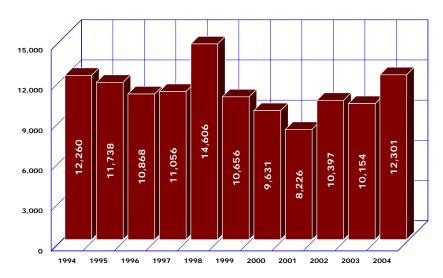
In July 1976, the Arizona Department of Health Services (ADHS) began an Abortion Surveillance Program (*Arizona Administrative Code, R9-19-302D*, as authorized by the *Arizona Revised Statute 36-344*). The program required the reporting of induced terminations of pregnancy performed in hospitals, outpatient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

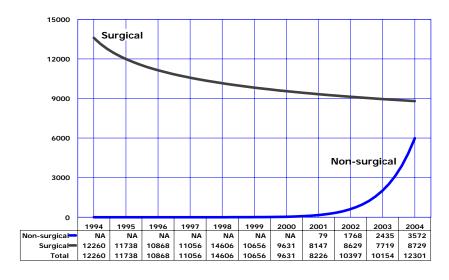
Figure 1D-1
Number of Reported Abortions by Year,
Arizona Residents, 1994-2004



In calendar year 2004, the Arizona Department of Health Services received 12,301 reports of abortions obtained by Arizona residents, 21.1 percent more than the 10,154 reported in 2003 (Figure 1-D1, Table 1D-1). It is unclear, whether this substantial increase represents a true increase in the number of abortions performed or, perhaps, the implementation of the new abortion reporting form in January 2004 may have contributed to the improved response rate from providers. The new reporting form is available online at www.azdhs.gov/plan/aform.pdf.

The number of reported non-surgical (i.e., terminations abortions of pregnancy by the administration of a medication such as methotrexate mifepristone each used conjunction with misoprostol) increased from 2,435 in 2003 to 3,572 in 2004. The number of surgical abortions (performed by curettage or by intrauterine instillation) also increased from 7,719 in 2003 to 8,729 in 2004.

Figure 1D-2
Trends in the Number of Surgical and Non-Surgical
Abortions by Year, Arizona Residents, 1994-2004



The rate of induced terminations of pregnancy 1,000 female per residents aged 15-44 increased from 8.5 in 2003 to 10.0 in 2004. However, a time series analysis of annual abortion data for 1994-2004 continues to reveal a declining trend (Figure 1D-2) in surgical terminations of pregnancy in Arizona, while an upward trend applies to non-surgical abortions.

Practically all reported abortions in Arizona in 2004 were performed in non-hospital clinics (99.8 percent) and physicians' offices (0.2 percent, based on data in **Table 1D-1**). Seven out of ten (63.2 percent) women who reported to have an abortion in 2004 had the procedure for the first time. Eighty-seven percent of all reported abortions occurred before 13 weeks of pregnancy.

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 20 years and women 40 years of age and over (Figure-1D-3).

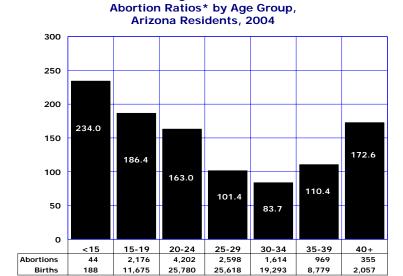
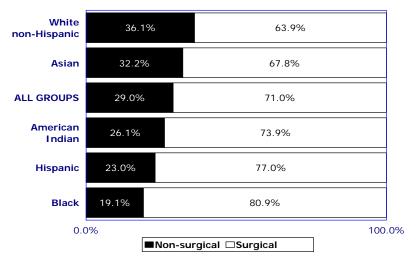


Figure 1D-3

In 2004, non-surgical (also called "medical") abortions made up approximately 29 percent of all procedures reported in Arizona. Only among White non-Hispanic and Asian women the proportions of non-surgical abortions exceeded average for all groups (Figure 1D-4). The ratios of non-surgical abortions among Black and Hispanic women were the lowest among ethnic groups.

Figure 1D-4
Proportional Contribution of Non-Surgical and Surgical
Abortions by Race/Ethnicity, Arizona, 2004



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

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