Induced abortions are not infrequent in our community. Invariably, the majority of these cases present late. We decided to study, among other things, the factors responsible for late presentations among these patients with the attendant frequency of complications and the outcome of management of these complications.

This was a prospective study that was conducted from January 2002 to December 2005 in the Gynae Unit of the St Luke’s Anglican Hospital, Wusasa, Zaria. All patients who presented with complications of induced abortion were included in the study.

In the four years period of the study, the total Gynae admissions were 652. There were 82 cases of induced abortions which give an incidence of 12.5%. Age range of the patients were 17–48 years, with a mean of 29 years.

More than half of the patients presented two to three weeks after the initial procedure 51(62.2%), while only 10 (12.2%) presented within 1 week. The commonest reason for late presentation was the desire to maintain secrecy 54 (65.9%) though majority gave several reasons 68 (82.9%).

Majority of the patients were single, of low parity and belong to the lower socioeconomic group and not using any form contraception. Thirty-seven patients (45.1%) presented with severe genital sepsis, 29 patients (35.4%) presented with heavy vaginal bleeding due to incomplete abortion.

Maternal motility in our study was 3 out of 82 cases (3.7%).

Induced septic abortions is a significant cause of maternal morbidity and mortality. Improving accessibility to hospital care, increasing literacy rate in our female population and effective family planning, women empowerment and utilizing several resources to develop awareness of the hazards of induced abortions in the community will lead to a reduction in its incidence.