

# Abortion Curettage Procedures by General Practitioners (A Review of Ethical, Legal, and Justice Aspects)

## Abstract

Curettage is a gynecological surgical procedure involving the scraping or removal of tissue from the uterine cavity using a curette, usually after cervical dilation, for diagnostic or therapeutic purposes. The purpose of this study is to analyze the ethical, legal, and justice aspects of curettage performed by general practitioners.

This study employed a normative research method with a legislative approach intended to analyze all regulations related to curettage.

The results indicate that general practitioners, when performing curettage, must adhere to the principles of medical ethics: beneficence, non-maleficence, autonomy, and justice. The legal principles upheld include: professional standards, service standards, service standards, standard operating procedures, and applicable regulations. The principle of justice in medical procedures refers to the fair and equitable distribution of benefits, risks, and costs of healthcare services among all members of society. Conclusion: When performing curettage in a Type D hospital, a general practitioner must always adhere to ethical and legal aspects, and consider the principle of justice.

**Keywords :** *curettage, ethical aspects, legal aspects, principle of justice*

## INTRODUCTION

Curettage is a gynecological surgical procedure involving the scraping or removal of tissue from the uterine cavity using a curette, usually after cervical dilation, for diagnostic or therapeutic purposes<sup>1</sup>. In Williams Obstetrics, curettage is generally discussed as part of dilation and curettage, and is performed to, among other things<sup>2</sup>:

- a. Remove remaining products of conception (incomplete abortion/missed abortion);
- b. Stop abnormal uterine bleeding;
- c. Collect endometrial tissue for histopathological examination.

This procedure is performed by skilled medical personnel. In cases of incomplete abortion, curettage is generally used<sup>3</sup>. Incomplete abortion is the expulsion of products of conception before 20 weeks of gestation, when some of the products of conception remain in the uterus. There are various abortion methods, of which curettage is one. This procedure is performed by trained healthcare professionals and in accordance with applicable laws in each country. Curettage is done by cleaning the products of conception using a curettage tool (scraping spoon).

Health facilities used for abortion procedures must comply with established regulations. These health facilities include community health centers, primary clinics, equivalent primary clinics, and hospitals, as follows<sup>4,5</sup>:

- a. Community health centers (Puskesmas) that are qualified to provide abortion services are those capable of providing Basic Emergency Obstetrics and Neonatal Care (PONED) and are staffed by trained doctors;
- b. Primary clinics are clinics that provide basic medical services and are staffed by trained doctors;

- c. Primary clinics or their equivalents are clinics that provide specialist obstetrics and gynecology services, or basic and specialist obstetrics and gynecology services and are staffed by trained doctors;
- d. Hospitals that are qualified to provide specialist obstetrics and gynecology services must have trained doctors.

In addition to being assisted by a specialist, the curettage procedure must also be performed at a government-designated health facility. Regulation of the Minister of Health of the Republic of Indonesia Number 3 of 2016 concerning Training and Provision of Abortion Services for Medical Emergency Indications and Pregnancy<sup>6</sup>. Consequences of Rape requires that curettage can only be performed in hospitals with an obstetrician and gynecologist. However, in reality, not all hospitals in Indonesia have an obstetrician and gynecologist. The purpose of this study is to analyze the ethical, legal, and justice aspects of curettage performed by general practitioners.

## RESEARCH METHOD

This research uses a qualitative method with a normative juridical approach. Qualitative methods aim to understand phenomena in depth through non-numerical data collection such as interviews, observations, and document analysis<sup>7</sup>. Meanwhile, normative juridical research focuses on the analysis of applicable legal norms or rules, encompassing the study of legislation, legal doctrine, court decisions, and relevant legal literature. This research aims to examine the interpretation and application of law and identify the legal principles underlying the relevant regulations.

This research uses a statute approach, a case approach, and a conceptual approach. Data collection techniques include literature analysis related to the research object. Data are analyzed using descriptive and systematic techniques to present the research results clearly and in detail<sup>8</sup>. To gain a comprehensive understanding of the principle of justice in general practitioner curettage, the researcher utilized three types of legal sources: primary, secondary, and tertiary.

Primary legal sources are legal sources with directly binding force, including legislation, court decisions, and international documents. Secondary legal sources provide explanations and analysis of primary legal sources. The sources included legal literature, such as books, journals, scientific articles, and theses discussing human rights, medical ethics, and the concept of justice in medical practice. Furthermore, commentaries and legal doctrines from experts provided broader insights and analysis of legal regulations and their application, enriching the perspective of this research<sup>9</sup>. Tertiary legal materials were used to aid in understanding and locating primary and secondary legal materials. These sources included legal encyclopedias explaining relevant legal concepts, indexes and abstracts assisting in locating relevant legal literature, and legal dictionaries providing definitions of specific legal terminology used in this research<sup>10</sup>.

## RESULTS AND DISCUSSION

### Ethical Aspects of Curettage by General Practitioners

Curettage, when performed for legitimate medical indications (such as miscarriage, molar pregnancy, or abnormal bleeding), adheres to the principles of general medical ethics<sup>11</sup> :

1. Beneficence: Physicians are obligated to perform actions that benefit the patient, such as removing residual tissue to prevent infection or other serious complications that could endanger the mother's health or life;
2. Non-maleficence: Curettage must be performed carefully by medical professionals to minimize the risk of side effects or complications such as infection or uterine perforation;
3. Patient Autonomy: Patients have the right to receive a complete explanation of the procedure, risks, and alternatives, and to provide informed consent based on this information;
4. Justice: Ensuring that medical services, including curettage, are available and accessible equitably to all patients who require them for medical reasons.

A major ethical dilemma arises when curettage is associated with induced abortion (the termination of a live pregnancy). In this context, views are highly diverse and often contradictory. The fundamental debate revolves around when human life begins. Many views, including those from some religions, emphasize that the right to life is inherent at conception, making abortion a grave violation of that right. A conflict arises between the mother's right to bodily autonomy and the fetus's right to life. In some extreme cases, such as pregnancy resulting from rape or a life-threatening medical condition of the mother, ethics and law may permit abortion, although it still poses an ethical dilemma for medical professionals<sup>12</sup>.

### **Legal Aspects of Curettage by General Practitioners**

Law Number 17 of 2023 does not specifically address curettage, but discussions of abortion cannot be separated from curettage. Services provided for incomplete abortions are performed through curettage. All abortion procedures are prohibited, but exceptions may be made for unwanted pregnancies. Medical procedures that may be performed include<sup>4,11,13</sup>:

1. Abortions may only be performed after the person undergoing the abortion has received a detailed understanding of abortion by a competent person;
2. Abortions may be performed if the woman's pregnancy has not reached six weeks, unless there is an indication of a medical emergency, in which case this does not apply;
3. Abortions may only be performed by authorized medical personnel and at a healthcare provider's facility in accordance with applicable regulations;
4. Informed consent, or written or verbal approval, must be obtained from the patient.

The provision of abortions is regulated by Government Regulation of the Republic of Indonesia Number 61 of 2014 concerning Reproductive Health, Article 35<sup>14</sup> :

1. Abortions based on indications of medical emergencies and pregnancies resulting from rape must be performed safely, with high-quality care, and responsibly.
2. Safe, high-quality, and responsible abortion practices as referred to in paragraph (1) include:
  - a) Performed by a doctor in accordance with standards;

- b) Performed in a health care facility that meets the requirements determined by the Minister;
- c) At the request or with the consent of the pregnant woman concerned;
- d) With the permission of the husband, except for rape victims;
- e) Non-discriminatory; and
- f) Not prioritizing material rewards.

3. If the pregnant woman as referred to in paragraph (2) letter c is unable to provide consent, consent for the abortion can be granted by the family concerned;

4. If the husband cannot be contacted, permission as referred to in paragraph (2) letter d is granted by the family concerned.

In implementing abortions, according to Article 35 of the Republic of Indonesia Government Regulation Number 61 of 2014 concerning Reproductive Health, two main points are emphasized: indications of medical emergencies and pregnancy resulting from rape. In such circumstances, the action must be carried out by a doctor who has received training from an accredited training provider.

### **The Principle of Justice in Curettage Procedures Performed by General Practitioners**

Justice is one of the most frequently studied topics in philosophy. Natural law theories, embracing the principle of the search for justice, have consistently emphasized justice as the core of law, from the time of Socrates to the time of François Geny<sup>15</sup>. In essence, justice is the act of treating individuals or other parties fairly.

In health law, justice is one of the primary principles of health care provision. This is evident in Article 2, letter i, of Law Number 17 of 2023 concerning *Health*, which states that *this Law is implemented based on the principle of justice*. The explanation for Article 2, letter i, defines "*the principle of justice*" as *the provision of health services that must provide fair and equitable services to all levels of society at affordable costs*. Furthermore, Article 23, paragraph 1, states that *health care provision must be carried out responsibly, safely, with quality, equitably, non-discriminatoryly, and fairly*. Justice is an important foundation in health care provision.

In the Decree of the Minister of Health of the Republic of Indonesia Number HK.01.07/MENKES/1186/2022 Concerning Clinical Practice Guidelines for Doctors in First Level Health Care Facilities, it is stated that curettage is not a medical procedure that can be performed by general practitioners, however in cases of incomplete abortion and insidious abortion, general practitioners can provide first aid to save lives or prevent the occurrence of severity or disability in patients<sup>16</sup>.

Law Number 17 of 2023 concerning Health provides discretion regarding physicians' actions in performing medical procedures. Under certain circumstances, medical personnel and health workers may provide services outside their scope of authority. The phrase "certain circumstances" is defined as<sup>4</sup>:

1. The absence of medical personnel and/or health workers in an area where the medical personnel or health workers are assigned;
2. The need for government programs;
3. Handling medical emergencies; and/or

#### 4. Outbreaks, epidemics, and/or disaster emergencies.

From an administrative perspective, the implementation of medical procedures outside clinical jurisdiction must adhere to the provisions stipulated in Government Regulation of the Republic of Indonesia Number 28 of 2024 concerning Implementing Regulations of Law Number 17 of 2023 concerning Health. Article 686 states that every doctor performing their duties must possess a Practice License (SIP).

However, if they are performing special duties outside their scope of authority, they must still possess a special assignment letter. In carrying out medical practice, it is mandatory to comply with professional and ethical standards stipulated in various regulations. These regulations are intended to ensure the quality of health services and provide comfort for all patients. Therefore, every medical procedure must be guided by the established limits of authority. Doctors' authority is strictly regulated to ensure that every action taken is in accordance with their competence. Therefore, in practice, it is important for doctors to understand the limits of their authority to avoid exceeding their competence as stipulated in applicable laws and regulations.

The role of general practitioners as the spearhead of the healthcare world does indeed face a major dilemma, especially when faced with cases of patients who require special treatment by a specialist but are not available, given the conditions of hospitals and geography in Indonesia, forcing doctors to make difficult choices. For example, in the case of a curettage procedure, regulations require it to be performed by an obstetrician and gynecologist. However, obstacles arise when there are no obstetrician and gynecologist specialists, so general practitioners must act quickly. The government must be present to strive for justice for general practitioners in carrying out their duties—and so that patients can be provided with treatment that can ensure patient safety. This is where the importance of regulations that can accommodate all aspects of the healthcare world, both protecting patient rights and protecting medical and health workers from legal loopholes due to incomplete regulations. The importance of detailed implementing regulations regarding the medical procedure of curettage so that in the future no party is harmed, either patients or health workers<sup>17</sup>.

## CONCLUSION

Curettage is a gynecological surgical procedure involving the scraping or removal of tissue from the uterine cavity using a curette, usually after cervical dilation, for diagnostic or therapeutic purposes. Obstetricians and Gynecologists are authorized to perform curettage. Except in emergencies where a specialist is unavailable, a qualified general practitioner may perform the procedure.

General practitioners must perform curettage for a valid medical indication (such as miscarriage, molar pregnancy, or abnormal bleeding), adhering to the principles of general medical ethics: beneficence, non-maleficence, autonomy, and justice. The legal principles upheld include: professional standards, service standards, standard operating procedures, and applicable regulations.

The principle of justice in medical procedures refers to the fair and equitable distribution of benefits, risks, and costs of healthcare services among all members of society. Based on

hospital type qualifications, many Type D hospitals still lack obstetricians and gynecologists. In such circumstances, general practitioners must act quickly to save the patient's life if referral to the nearest hospital with an obstetrician and gynecologist is not possible. This raises concerns among general practitioners about the threat of ethical violations and criminal sanctions if they continue to perform a curettage. This means that health services related to curettage can only be performed in emergency situations, raising concerns that patients' rights to health care will not be met.

## SUGGESTIONS

1. The government should formulate more complex regulations regarding curettage procedures to eliminate legal loopholes that could be abused;
2. Equalize the number of obstetricians and gynecologists to prevent health procedures being performed by those outside their field or competence.

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