

## Saint Mary's Hospital Emergency Gynaecology Unit

#### Information for Patients

# Medical management of a miscarriage at less than 10 weeks' gestation

We are sorry that you have received bad news about your pregnancy. We realise this is a very distressing time for you. The staff are here to support and help you throughout this difficult time. If, after reading this leaflet, there is anything you are worried about or unsure of, please ask or let us know.

## What will happen?

You w	ill need	to attend	<b>Ward 62</b> fo	or your treat	ment on:	
Date:.				at	(time)	 

## What should I bring?

You may bring a partner or friend with you. Wear comfortable clothes, bring an extra pair of pants/spare clothes. You may like to bring books or magazines with you to help pass the time.

## What will happen?

When you arrive you will be shown to your bed and the nurse will explain about your care. You will be given four small vaginal pessaries. The medication used for medical management of miscarriage is called Misoprostol. These pessaries cause the neck of the womb (cervix) to soften and open. They cause the womb (uterus) to contract and will help to induce the miscarriage. If the pregnancy has not been passed within 4 hours of having the pessaries, the nurse will administer a further dose of Misoprostol orally. The time this takes varies from one woman to another, however you should be prepared to stay in hospital for approximately 6-8 hours. On rare occasions, you may need to stay overnight.





Your blood loss, temperature, pulse and blood pressure will be monitored as required.

You may eat and drink as normal throughout your admission.

You may experience stomach cramps. This is quite normal and means that the pessaries are working. If you require pain relief to ease the discomfort, please do not hesitate to let your nurse know. The pessaries can sometimes cause you to feel sick; if this happens, you will be offered antisickness medications.

You will be asked to use a bed pan every time you need the toilet so that the nurse can check for blood loss and pregnancy tissue. Diarrhoea can sometimes be a side effect of the pessaries, but please do not be embarrassed.

## When can I go home?

You can expect to be on the ward for about 6-8 hours. Please ensure that you have someone to take you home and care for you overnight: you should not drive yourself home.

The nurse will come and see you before you go home and will try to answer any questions you may have. If there is any doubt as to whether the process is complete, an ultrasound will be arranged for you in 7-10 days' time. A letter will be sent to your GP informing them of your admission to the ward.

#### How will I feel?

Everyone feels differently, because we are all unique. Over the next few weeks, you may experience days when you feel completely 'back to normal', but you may also have days when you may feel sadness or a sense of loss. All these feelings are normal, but you might find it helpful to talk to someone you know and whom you feel close to.

If you wish to talk to someone about your feelings and are unable to do so with a partner, close friend or family member, you might like to consider contacting one of our Counsellors on the number given at the end of this leaflet.

#### Pain

For the next week or two you may experience period-like cramps. We advise you to get plenty of rest.

You can take any pain relieving medicines that suit you to ease any discomfort, but please ensure that you follow the instructions on the packet and it is important that you do not exceed the stated dosage.

Some women find that a hot water bottle also provides some pain relief and comfort.





#### **Bleeding**

This may vary. You may bleed for up to 3 weeks or have little or no bleeding at all. Your bleeding may be bright red or dark brown and you may lose some small clots: do not be concerned about this.

Your next period may be heavier than usual, and will usually happen 3-6 weeks after this treatment.

## When can I start trying for another baby?

It is perfectly safe to start trying for another pregnancy once you and your partner feel ready to (providing you feel well and you have stopped bleeding). For dating reasons, there is an advantage in waiting until your next period, however, if you conceive before your next normal period, there is no increased risk of miscarriage.

If you are planning to get pregnant again, we recommend that you take folic acid tablets (400 micrograms per day) whilst you are trying to conceive, and continue to take them until the 12th week of the pregnancy. This helps to reduce the risk of spina-bifida, an abnormality of the baby's spine.

You can buy tablets at your local chemist or supermarket or alternatively you can obtain them from your General Practitioner (GP).

#### **Certificates**

As there is no official national recognition at this time of pregnancy's lost less than 24 weeks' gestation, Saint Mary's Hospital offer certificates of remembrance. If you would like to know more, please ask your nurse or if you have been discharged please contact the Early Pregnancy Loss specialist nurse or the Emergency Gynaecology Unit.





## **Saint Mary's Hospital contact numbers:**

Should you require any additional information or help please contact:

#### Emergency Gynaecology Unit (EGU)

(0161) 276 6204 (7 Days 8.00 am – 9.30 pm)

#### **Gynaecology Ward 62**

(0161) 276 6518 or (0161) 276 6410 (24 hours)

#### **Early Pregnancy Loss Specialist Nurse**

Maxine: (0161) 276 6571

(Monday – Thursday variable hours – answerphone available)

#### **Counselling Service (confidential)**

(0161) 276 4319

(Monday - Friday 8.30 am – 4.30 pm – answerphone available)

### **Useful addresses**

The Miscarriage Association

Tel: (01924) 200799

www.miscarriageassociation.org.uk

www.earlypregnancy.org.uk

Women's Health Concern

Tel: (01628) 478473

www.womens-health-concern.org.uk

NHS Choices www.nhs.uk

Saint Mary's Hospital Website www.mft.nhs.uk/saint-marys

