

Information for Patients

Bleeding in the 2nd trimester pregnancy (12-19+6 weeks)

You have been given this leaflet because you have had some symptoms which you may need more information about.

What causes bleeding in the 2nd trimester pregnancy?

Vaginal bleeding is common at all stages of pregnancy. Spotting and very small amounts of blood may be harmless, but there are certain types of bleeding that you should not ignore.

Causes of bleeding in 2nd trimester include:

- Inflammation of the cervix (neck of the womb).
- Vaginal infections (including sexually transmitted infections -STIs).
- Cervical erosion.
- Growths on the cervix – polyp.
- Disruption of blood vessels in the womb lining.
- Miscarriage, however, this is not always inevitable.

Bleeding in the 2nd trimester may also be a sign of problems requiring further tests. We advise that you always seek further medical advice if your symptoms increase or do not resolve.

Sometimes we see an obvious reason for your bleeding, for example when we examine you, however sometimes we cannot identify any obvious causes.

Similarly, we cannot predict whether your bleeding will resolve, how long this may take or whether it will happen again. Our staff will try to give you the best information available at the time.

When should I return again?

Always seek medical advice if you experience any of the following:

- Bleeding heavy enough to soak a feminine pad in an hour.
- Strong stomach cramps/abdominal pains or back pain.
- Passing clots or clumps of tissue.
- Feeling any vaginal pressure.
- Your bleeding has an offensive odour.
- Feeling dizzy or unwell.

Our Emergency Gynaecology Unit is open 24 hours every day. Our contact number is at the end of this leaflet.

You will always be assessed by either a doctor or a specialist emergency gynaecology nurse. Depending on your history, symptoms and severity, most women would require an internal examination and assessment of the pregnancy by listening to the baby's heartbeat using a Sonicaid. An ultrasound scan would only be organised if your symptoms are clinically indicated.

What should I do over the next few days?

Admission to hospital is not always necessary for bleeding in the 2nd trimester of pregnancy. Women are often advised to take bed rest while bleeding; however this seems to make little difference to the final outcome. You should resume your daily activities but avoid over exertion or doing anything too strenuous. If you wish, you may return to work once you feel happy to do so.

You are able to take a bath providing it is not too hot, as this may make you feel dizzy. Until the bleeding stops, we recommend that you use sanitary towels rather than tampons. Although there is no evidence to suggest that having sexual intercourse while you are bleeding increases the risk of miscarriage, it is advisable however to avoid it as a precaution. It is safe to resume sexual intercourse once the bleeding has stopped and at all other times during pregnancy.

Blood Group

Everyone's blood falls into one of the following blood group categories: A, B, AB or O. We also have a rhesus factor – positive or negative.

Women who are rhesus negative and have experienced bleeding in their 2nd trimester of pregnancy need to have their blood group checked. If you are found to be rhesus negative, an injection of a medication called Anti-D immunoglobulin is recommended. This helps prevent the development of antibodies that may be harmful in future pregnancies.

Anti D needs to be administered within 72 hours of the initial bleeding event. It can sometimes take a while to be processed, especially if you have not had a recent blood sample sent to the laboratory. If this is the case, a blood sample will be taken. You will be allowed home and will be contacted by a member of staff from the unit to return once the Anti-D is available.

Advice and Support

You may find that the whole experience has been worrying for you and has left you feeling anxious about the future of this pregnancy. We hope that this information leaflet will have answered a few questions, addressed your concerns and provided some reassurance.

However, if you wish to discuss things further then your GP and midwife can provide advice and support. Alternatively, please feel free to contact the nurses in the Emergency Gynaecology Unit for advice on the contact number provided below.

Saint Mary's Hospital contact numbers:

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)