The Royal Wolverhampton

Expectant Management of Miscarriage

Gynaecology

Introduction

We are very sorry for your loss and we understand that this will be a very distressing time for you.

You have opted for expectant management following your miscarriage. This leaflet aims to give you some general information about what this method will involve and help to answer any questions you may have. Please ask a member of the team if there is anything you do not understand.

What is expectant management?

Expectant management may also be known as conservative management / treatment. It means that we expect your miscarriage to happen naturally without any intervention. You will be monitored and have open access to the Early Pregnancy Unit over the next two weeks. You will also have a follow up telephone consultation with the option of a follow up appointment, if required.

How successful is this treatment?

- Expectant management is successful in 50 out of 100 women (50%)
- Very occasionally, emergency admission is needed if you experience severe pain or bleeding
- If bleeding does not occur or miscarriage is not completed, you may be offered the option of medication or an operation.

What are the benefits of expectant management?

- You are able to stay at home with access to the Early Pregnancy Team, if needed
- This option avoids medication or surgery with a general anaesthetic and the possible associated risks and side effects of both
- Some women may wish for a more 'natural' process without intervention. We offer support and advice on what to do if you want to see the pregnancy tissue and what to do with this.

What are the disadvantages of expectant management?

- We are unable to know when the miscarriage may start and this may cause anxiety
- It is difficult to predict how much bleeding or pain you will experience
- You may be concerned about the possibility of seeing the pregnancy when experiencing your miscarriage

The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature
 or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice
 from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.

- Further visits to hospital may be required
- Medical or surgical management of miscarriage may still be required if the miscarriage does not occur after 2 weeks or if bleeding does not occur but you will be assessed and further options discussed
- Medical or surgical management may be required if you experience heavy persistent bleeding and / or, pain.

The choice about which treatment is best for you will be made together with your Doctor or Specialist Nurse. This will be based on the risks and benefits of the treatment and individual circumstances.

What are the Risks?

Risk of infection

- 1 in 100 women (1%) will develop an infection. This is usually treated with oral antibiotics. Signs of an infection are:
 - 1. High temperature
 - 2. Flu like symptoms
 - 3. Offensive vaginal discharge and / or, abdominal pain that gets worse
- You should contact the Early Pregnancy Unit or your GP immediately if you develop any of these symptoms, as you may require antibiotic treatment.

In some cases, you may need an operation to remove any remaining pregnancy tissue.

• Risk of heavy bleeding (haemorrhage)

2 in 100 women (2%) have heavy bleeding needing a blood transfusion and some women need to have an operation to remove any remaining pregnancy tissue and stop any bleeding. If you reach a point where you no longer want to wait, you can contact us and request medical or surgical management.

What symptoms should I expect?

• Pain

Having a miscarriage can be painful with cramping and lower backache occurring at any time. We advise that you have access to suitable pain relief which you are able to tolerate, for example paracetamol, ibuprofen and / or, codeine-based medications.

Please ensure you read the instructions on how to take your medication and do not exceed the maximum daily dose. If unsure, please contact us.

• Bleeding

When bleeding starts or becomes heavier, it is advised to use sanitary towels rather than tampons, as this reduces the risk of infection.

It is difficult to predict how heavy your bleeding might be but it is common to be heavier than a normal period. You may pass clots or tissue that may be the pregnancy.

Once you have passed the pregnancy tissue and miscarriage has occurred, the bleeding and pain will ease.

You may bleed for up to 14 days after a miscarriage, but this bleeding should be lighter and more period-like.

This can be frightening and you have open access to contact the department for any advice if you are unsure of what to do. Out of hours, you can also contact 111 for advice.

• Work

Going to work during or following a miscarriage is a very personal decision.

It may depend on your symptoms and how you are feeling; as experiencing a miscarriage can be a very distressing event in a woman's life.

Many women feel they need some time off to recover. Please let a member of staff know if there is a problem and you require a sick certificate.

What if the miscarriage does not happen?

If there has been no bleeding after 2 weeks of expectant management and you do not think the miscarriage has happened, you may want to consider medical or surgical intervention. Your options can be discussed with a specialist nurse practitioner in the Early Pregnancy Unit.

What follow up will I need?

You will have open access to the Early Pregnancy Department during this time. This includes if you would like to discuss any changes to the management of your care. If you are concerned about any of your symptoms, you can call the Early Pregnancy unit on 01902 307999 ext 84606 and we will make an assessment and offer an appropriate appointment within 24 hours.

We will give you a follow-up telephone consultation after 2 weeks of expectant management and if needed, offer you a follow up scan. If your symptoms suggest that the pregnancy has passed, we will advise a urine pregnancy test after 2 weeks to confirm this.

We will then ask you to call us if this test remains positive for further assessment.

When can I expect my next menstrual period?

Every woman is different regarding how soon after a miscarriage to expect a period, however, sometime in the next 4-6 weeks is considered as usual.

Often this first period can be different to normal and can be heavier or lighter. This is nothing to be concerned about unless the bleeding is very heavy. In this case, contact your GP or Early Pregnancy Unit directly.

When can I try for another pregnancy?

It is safe to start trying for another pregnancy once you and your partner feel ready to, providing you feel well, have stopped bleeding and have had a negative pregnancy test.

For dating purposes, there may be some advantage to wait until your next normal period.

How might I feel?

Everyone reacts differently following a miscarriage. In addition to the grief you may feel from this loss, your body will be undergoing lots of hormonal changes. It is very normal to feel a variety of emotions during this time.

It is important to give yourself time to recover on a physical, psychological and emotional level. Support from your partner and family is very important during this recovery.

If you wish to talk to someone about your feelings, please contact the Early Pregnancy Unit or your GP for help and advice.

Contact Us

Emergency Gynaecology Assessment Unit 01902 698358 / 698359 or 01902 694606 Monday – Friday, 8:30am – 5:00pm excluding bank holidays Saturday, 8:00am – 2:00pm

Help and support can also be obtained from our specialist bereavement nurses on 07917 398313 during office hours.

Out of hours you can get advice 24 hours a day from the 111 service.

Useful contact numbers and websites

The Miscarriage Association ww.miscarriageassociation.org.uk 01924 200799

Baby loss (website for miscarriage) www.Babyloss.com

SANDS (stillbirth, miscarriage and neonatal death support) 08081 643332

www.tommy's.org midwife@tommys.org 0800 014 7800

www.cradlecharity.org 0333 443 4630

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息,如易读或其他语种,请告诉我们。 如果您需要口译人员或帮助,请告诉我们。

> Designed & Produced by the Department of Clinical Illustration, New Cross Hospital, Wolverhampton, WV10 0QP Tel: 01902 695377.