Healthier Communities, Outstanding Care



# Medical management of miscarriage (under 12 weeks)

Information for patients and their partners



# We are so sorry that you are suffering a miscarriage and appreciate this is a difficult time for you

Medical management is one way we can manage your miscarriage and involves the use of medication called Misoprostol which is inserted into your vagina to speed up the natural process of miscarriage.

We can do this most days within the department and usually only requires a stay of one to two hours. You may bring one person with you to provide support.

## On arrival

The nurse will check that you understand the procedure and that nothing has changed since the last scan, please feel free to ask any questions.

Bloods may be required if we are unsure of your blood group and you may have your blood pressure checked.

The nurse will ask for your verbal consent to administer the medications. These will be given vaginally by the nurse and then you will be asked to rest for approximately an hour, either on a couch, or if more comfortable on a chair. You may be given paracetamol at this time as you may experience cramping.

If you are a negative blood group, we may ask to give you an injection called anti-D, but this will be explained to you if it is required.

After an hour you will be allowed home if you are well, with our contact telephone number and that of Ward 14

# On discharge home

It is expected that you will have bleeding within 72 hours, this at times may be heavy and you could pass clots or pregnancy tissue. We understand this can be difficult for you, but sadly this is part of the miscarriage process. We can discuss with you how you can deal sensitively with any baby remains you may pass. We will usually contact you after 72 hours to check your well being. If no bleeding occurs, then contact us and we can advise you of your options.

It is usual to experience period-like cramps and back ache and perhaps a pressure sensation in your vagina. However, if you are at all concerned, please call EPU or ward 14 for advice, we are here to support you.

It is advisable to have a supply of simple analgesia at home, such as paracetamol.

You may bleed for two to three weeks but this should gradually reduce. Every miscarriage is different and unfortunately we cannot predict how much you will bleed, or the duration of your bleeding. It is up to you whether or not you continue to work at this time as everyone deals with loss in their own way.

During the bleeding it is best to avoid intercourse and the use of tampons as this could increase risk of infection. Medical management is a very effective way of managing miscarriage and most ladies will not experience complications.

# Follow up

We will ask you to do a pregnancy test three weeks after your medication has been given. In most cases a negative test will indicate a complete miscarriage. EPU will ring you to check on your wellbeing. If you have experienced bleeding and this has settled along with any pain we will discharge you from our care. However, if the pregnancy test is positive or you are still experiencing any problems, we may offer you a scan at this stage. We will only discharge you if we are confident your miscarriage is complete. Please use this opportunity to ask any questions or tell us if you need further support.

Miscarriage is sadly very common in the first few weeks when a lot of development is taking place in the small embryo.

Unfortunately we cannot tell you why a miscarriage has occured but in most cases, future pregnancies will be successful.

Physically your body returns back to normal quite quickly, but emotionally everyone is different and require different levels of support and time to grieve.

# **Future pregnancies**

If you wish to try for another baby, we suggest you wait for one normal period, but more importantly when you are physically and emotionally ready.

In most cases your future pregnancies will be successful and routine antenatal care will be needed.

## **Further information**

If this is sadly your third miscarriage you can self-refer to our Rainbow clinic at seven weeks for an early scan and consultant review.

You may also ask your own doctor to refer you to a gynaecologist at the hospital to start investigations into recurrent miscarriage.

## **Useful contact details and information**

### **Early Pregnancy Unit**

Telephone: 01623 622515, extension 4288

Open: 8am-4pm Monday to Friday, and 7am-2pm on Sunday

#### Ward 14

Telephone: 01623 622515, extension 2314

#### **Snowdrops and Butterflies**

This is our hospital support group for baby loss.

Online support and meetings:

#### www.facebook.com/snowdrops and butterflies

Telephone: 01623 622515, extension 3047 (Chaplaincy department)

## The Miscarriage Association

Telephone: 01924 200799

www.miscarriageassociation.org.uk

#### **Further sources of information**

NHS Choices: www.nhs.uk/conditions
Our website: www.sfh-tr.nhs.uk

#### **Patient Experience Team (PET)**

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

**King's Mill Hospital:** 01623 672222 **Newark Hospital:** 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them. If you require a full list of references (if relevant)

for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

To be completed by the Communications office Leaflet code: PIL202308-01-MMM Created: August 2023 / Review Date: August 2025