



Education

Miscarriage

Having your pregnancy end in a miscarriage can be very sad and distressing. The following information will tell you about the symptoms and treatments for the different types of miscarriage. We hope that it will help you understand, if you do have a miscarriage, that it is unlikely that you did anything to cause it. There is a good chance that you will be able to have a baby the next time you become pregnant.

What is a miscarriage?

A miscarriage is the spontaneous ending of a pregnancy before the 20th week of pregnancy. The medical term for miscarriage is spontaneous abortion.

Ten to fifteen percent of all pregnancies end in miscarriage. Most miscarriages occur during the first 15 weeks of pregnancy. Many occur within the first 10 weeks. Some women miscarry even before they know they are pregnant. A menstrual period that is late and heavier than usual may be the only symptom.

How does it occur?

Often you will not know what caused a miscarriage. Most miscarriages are thought to happen because there is something wrong with the baby, such as a genetic problem. The baby (also called a fetus) may not develop at all, or the baby may develop abnormally. In such cases, miscarriage is the body's way of ending a pregnancy that is not developing normally.

Other possible causes of miscarriage include infections in the uterus, uncontrolled diabetes, hormonal imbalances, and defects in the uterus. Excessive cigarette smoking, alcohol, and illegal drugs such as cocaine can also cause miscarriage. This is especially true in early pregnancy, when major organs of the baby are developing.

An incompetent cervix sometimes causes miscarriage later in the pregnancy. The cervix is the lower part of the uterus. During labor the cervix widens to allow the baby to leave the uterus and pass through the vagina. A cervix that starts widening and opening too early in the pregnancy may result in miscarriage. Often, if the problem is caught early, it can be treated and the pregnancy can continue.

A fall by the mother seldom causes miscarriage. The baby is well protected within the uterus. In addition, there is no evidence that emotional stress or physical or sexual activity causes miscarriage in a normal pregnancy.

What are the symptoms?

Possible symptoms include:

- Bleeding from your vagina. The amount of bleeding can range from a few drops of blood to a heavy flow. The bleeding may start with no warning or you may first have a brownish discharge.
- Cramping pain in your lower abdomen.
- A gush of fluid from the vagina without bleeding or pain. This may mean that your membranes have ruptured (your bag of waters has broken).

You may notice some solid material passing out of your vagina. Try to keep this material so your health care provider can examine it. Place it in a bottle of water with a little bit of salt.

It is possible that you may have no bleeding or pain, but the fetus has died, or a fetus may never have actually developed. The symptoms of early pregnancy have disappeared. This condition is called a missed miscarriage (or missed abortion).

How is it diagnosed?

Your health care provider may do a pelvic exam to check the size of your uterus and the condition of your cervix.

Your health care provider may order an ultrasound scan to see if a pregnancy has occurred outside your uterus rather than in the uterus. (A pregnancy outside the uterus is called an ectopic pregnancy.) Ultrasound can also show whether a fetus has died. In some cases the ultrasound may show that the egg never developed into a fetus.

You may also have blood tests for pregnancy hormones 2 days apart. Your provider will be checking to see if the levels of hormones are increasing as they should in a normal pregnancy.

How is it treated?

If you have what is called a threatened miscarriage, you have not actually miscarried yet and there is a chance that your pregnancy will continue normally. In a threatened miscarriage you may have frequent small amounts of bleeding from your vagina early in your pregnancy. The bleeding is often painless, but you may have cramping. Your cervix stays closed. Your health care provider may ask you to rest in bed for 1 to 2 days. The bed rest may stop the bleeding and your pregnancy may continue normally. Special precautions such as stopping exercise, staying off your feet as much as possible, and avoiding sex may be necessary for several weeks.

If the bleeding is caused by an incompetent cervix, your cervix may be stitched shut until delivery. If your uterus or cervix is abnormal, your health care provider may recommend a long period of bed rest and medicines to relax your uterus.

Miscarriage becomes inevitable if the bleeding and cramping continue and the cervix begins to open. An inevitable miscarriage means that the fetus has died or there was no fetus, just pregnancy tissue. Nothing can be done to prevent this type of miscarriage. The uterus expels its contents entirely. This is called a complete miscarriage.

The miscarriage is incomplete if only part of the contents of your uterus is expelled. A dilation and curettage (D&C) or suction procedure may be required to remove pregnancy tissue that is still in your uterus. In these procedures the cervix is stretched open and tissue is gently scraped or suctioned from the lining of your uterus.

If you have a missed miscarriage, your health care provider may order a D&C or induce labor to remove the fetus and placenta. If a fetus never actually developed, you may have just tissue in your uterus that is producing pregnancy hormones. The uterus will expel this tissue on its own.

What are the risks associated with a miscarriage?

A miscarriage generally will not endanger your health unless it is incomplete. If an incomplete miscarriage is not diagnosed and treated, you may continue to bleed and the tissue left in your uterus may become infected. Depending on your blood type, the health care provider may want to immunize you against problems that might occur in future pregnancies. These can happen if your blood Rh type is different from the blood type of the fetus. Check with your provider to make sure.

How soon can I start trying to get pregnant again?

Wait to have sexual intercourse until your health care provider says it is safe to do. Providers usually recommend that you wait until you have had at least one normal period before you try to get pregnant again. Use some form of birth control at least until you start another menstrual period. It is also good to give yourself some time to recover emotionally from the loss before you get pregnant again.

Did I do anything to cause the miscarriage?

Do not blame yourself for the miscarriage. It is very unlikely that the miscarriage was caused by anything you did. For example, spontaneous miscarriages are not caused by sexual intercourse or strenuous exercise.

Grief, anger, and feelings of guilt are common and completely normal reactions to a miscarriage. Allow yourself to grieve over the loss of the baby. Seek support from friends. You may find it helpful to talk to others who have had miscarriages. You may be afraid that your miscarriage means that you won't be able to have a baby. Remember, however, that for most women the next pregnancy is normal.

Some women do have repeated miscarriages. (A series of three or more consecutive miscarriages is called habitual miscarriage.) These miscarriages may be caused by an imbalance of hormones or other conditions that can be treated. If you have three or more miscarriages, it is important to be tested to determine and treat the cause.

What happens after a miscarriage?

- Your recovery will take 4 to 6 weeks.
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- You may have a small amount of bleeding and discomfort for a few days.
- If you were pregnant for more than 13 weeks before the miscarriage, you may still look pregnant and your breasts may still leak milk.
- Low-impact exercises, such as walking or swimming, will not hurt you. Gradually exercise more as you feel better.
- Usually your health care provider will see you in a couple of weeks to check your recovery.

When should I call my health care provider?

If you are pregnant and have bleeding from your vagina, with or without pain, call your health care provider. If the bleeding is heavy or you have severe pain, see your provider immediately.

If you are recovering from a miscarriage, call your health care provider right away if you have any of these symptoms:

- heavy bleeding
- fever over 100°F (37.8°C)
- chills
- severe abdominal pain
- discharge from the vagina that has a bad odor.

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