# **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. If you have had a miscarriage, 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 are pregnant.

## What is a miscarriage?

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

At least 10 to 15 percent of all pregnancies end in miscarriage. Most miscarriages happen during the first 15 weeks of pregnancy. Many happen 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.

#### What is the cause?

Often you will not know what caused a miscarriage. Most miscarriages are thought to happen because there was something wrong with the baby, such as a genetic problem. The baby may have not developed at all, or the baby may have developed 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.

Later in pregnancy, a problem with the cervix sometimes causes a miscarriage or, after 20 weeks of pregnancy, premature birth. The cervix is the opening of the uterus into the birth canal (vagina). During labor the cervical opening gets bigger (dilates) so that the baby can pass into the birth canal. If the cervix starts opening too early in the pregnancy, there is a risk of miscarriage. Often, if the problem is caught early, it can be treated and the pregnancy can continue.

Falls seldom cause miscarriage. The baby is well protected in the uterus. There is also no evidence that stress or physical or sexual activity causes miscarriage in a normal pregnancy.

# What are the symptoms?

Possible signs or symptoms of miscarriage include:

• Bleeding from the vagina. It 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.

1

Cramps in your lower belly.

• 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 healthcare provider can examine it.

It's possible to not have any bleeding or pain even though the baby has died. The baby may have never developed. You may stop having symptoms of pregnancy. This condition is called a missed miscarriage or missed abortion.

You can have signs of miscarriage without actually losing the baby. This is called a threatened miscarriage. You may have frequent small amounts of bleeding from your vagina. The bleeding is often painless, but you may have cramping. If you have signs of a miscarriage but you have not yet lost the baby, there is a chance that your pregnancy will continue normally.

### How is it diagnosed?

You may have a pelvic exam to check your uterus and cervix.

You may have 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 if the baby has died. In some cases the ultrasound may show that the pregnancy never developed into a baby.

You may also have blood tests for pregnancy hormones 2 days apart. Your healthcare 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 a threatened miscarriage, there may be things you can do to keep from losing the baby. Your healthcare provider may ask you to rest in bed for 1 to 2 days. When you have a threatened miscarriage, you may need to take precautions, such as stopping exercise, staying off your feet as much as possible, and avoiding sex.

If the cervix is opening too early, your healthcare provider may try to stitch the cervix closed until it is time for your baby to be born. If your uterus or cervix is abnormal, your healthcare provider may recommend a long period of bed rest and medicines to relax your uterus.

It may not be possible to stop a miscarriage if you keep having bleeding and cramping and the cervix starts to open.

If you miscarry, you may need a procedure to remove pregnancy tissue that is still in the uterus. Dilation and curettage (D&C) or suction may be done. Your healthcare provider may dilate the cervix and gently scrape or suctioned tissue from the lining of the uterus.

If you have a missed miscarriage, you may have a D&C or your provider may induce labor to remove the baby and placenta. If a baby never actually developed, you may have tissue in your uterus that is making pregnancy hormones. This tissue may pass out of your body on its own or you may need a D&C to remove it.

## What are the risks of a miscarriage?

A miscarriage is usually not a risk to your health unless it is incomplete. If an incomplete miscarriage is not diagnosed and treated, you may keep bleeding and the tissue left in your uterus may get infected.

Depending on your blood type, your healthcare provider may want to give you a shot that protects against a problem called Rh incompatibility. This is a problem that might affect future pregnancies. It can happen if your Rh blood type is different from the blood type of the baby. Check with your provider to make sure.

#### How soon can I start trying to get pregnant again?

Wait to have sex until your healthcare provider says it is safe. Healthcare providers usually recommend that you wait until you have had at least 1 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.

## Did I do anything to cause the miscarriage?

Don't blame yourself for the miscarriage. It is very unlikely that anything you did caused the miscarriage. For example, spontaneous miscarriages are not caused by sex 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. Look for 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 3 or more 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 several miscarriages, you can work with your healthcare provider to try to find and treat the cause.

# What happens after a miscarriage?

Recovery usually takes 4 to 6 weeks. 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. You can exercise more as you feel better.

Ask your healthcare provider:

- How long it will take to recover
- What activities you should avoid and when you can return to your normal activities
- How to take care of yourself at home

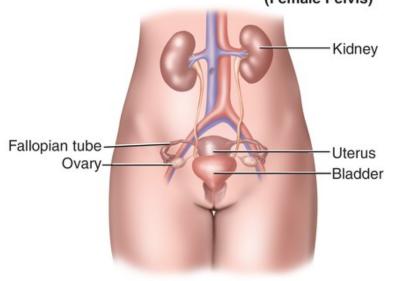
 What symptoms or problems you should watch for and what to do if you have them

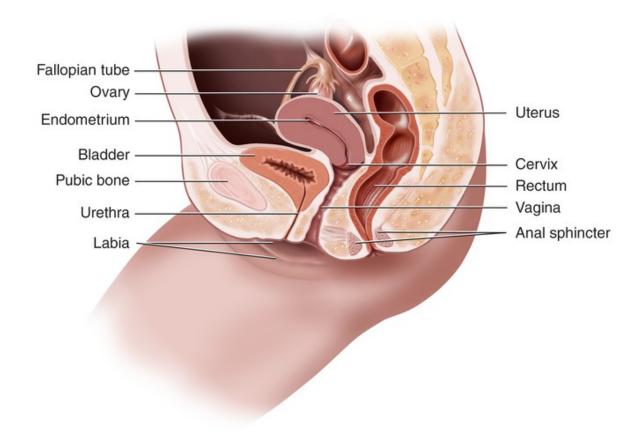
Make sure you know when you should come back for a checkup.

Developed by RelayHealth.

This content is reviewed periodically and is subject to change as new health information becomes available. The information is intended to inform and educate and is not a replacement for medical evaluation, advice, diagnosis or treatment by a healthcare professional.

# Female Pelvis (Female Pelvis)





Copyright ©2014 McKesson Corporation and/or one of its subsidiaries. All rights reserved.