

Threatened Miscarriage

You were seen today in the Early Pregnancy Assessment Unit (EPAU) or Women's Health Ward. Following your scan, the EPAU staff or ward staff will advise you on how to care for yourself in pregnancy.

What is a Threatened Miscarriage?

Vaginal bleeding in the early stages of pregnancy is common and does not always mean there is a problem. However bleeding can be a warning sign of a miscarriage. An ongoing pregnancy associated with abdominal pain or vaginal bleeding is called a threatened miscarriage. The bleeding can occur at any time after a missed period. It is often noticed when going to the toilet. The blood may be pink or brown or red in colour. The blood loss varies from person to person, from spotting to a gush with clots.

Sometime a scan may show a small haematoma (blood clot) around the pregnancy sac which identifies the source of the bleeding but more often nothing abnormal is seen on scan.

It is not always possible to give an explanation as to why you have had a bleed. In most cases the pregnancy continues safely.

The likely causes of bleeding are:

- When the placenta tries to burrow into the lining of the womb, it may cause some bleeding.
- The cervix becomes rich in blood supply and softer, and as a result any slight trauma may cause a bleed.
- Rarely, an infection in your vagina may cause bleeding in the form of spotting.

A baby's heartbeat on scan is reassuring. In the presence of a heartbeat there is an 85% to 97% chance of your pregnancy continuing.

What follow-up care do I need?

When there is no cause found for the bleeding a follow-up appointment is not required in the EPAU. There is no treatment to stop the bleeding.

- You are advised to try and get some rest over the next few days while the bleeding continues.
- If you need a sick certificate, your GP will be able to issue you with one.
- Sexual intercourse in pregnancy is safe but you should avoid intercourse until the bleeding has completely settled for a week.
- Do not use tampons; use sanitary towels or panty liners instead.
- Refrain from exercise/swimming until the loss has completely settled for a week.

We do not routinely check your blood group in EPAU or on the ward unless you continue to bleed and are approaching 12 weeks of pregnancy.

Please contact the EPAU or the ward if you have any further concern regarding your pregnancy.

It is advisable to contact your midwife for booking your pregnancy care. Your midwife will be attached to your local G/P surgery or Children's Health Clinic.

In the EPAU the staff will give you a leaflet on how to look after yourself in early pregnancy and go through it with you.

Will I have to come back to hospital?

Bright red blood suggests that it is fresh bleeding, whereas brown blood suggests that it is stale blood. If the blood loss becomes red or heavier and is associated with or without pain you need to contact the EPAU or the Women's Health Ward for advice.

When can I return to work?

You may return to work once the bleeding has settled. Please discuss with your G/P or midwife if you have any concerns.

Sources of information

Miscarriage Association

Clayton Hospital
Northgate
Wakefield,
West Yorkshire WF1 3JS

Helpline 01924 299799

Website: www.miscarriageassociation.org.uk

Early Pregnancy Assessment Unit

Mirrlees Ward
Conquest Hospital
The Ridge
St Leonards-on-Sea
East Sussex, TN37 7RD
Tel: (01424) 755255 Ext: 7047

Early Pregnancy Assessment Unit

Hailsham 2 Ward
Eastbourne District General Hospital
Kings Drive
Eastbourne
East Sussex, BN22 2UD
Tel: (01323) 417400 Ext: 4218

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: (01323) 417400 Ext: 5860 or by email at: esh-tr.patientexperience@nhs.net

Hand Hygiene

The Trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other Formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 01424 755255 Ext: 2620

After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The following clinicians have been consulted and agreed this patient information:

Mr David Chui, Consultant Obstetrics and Gynaecology

Miss Nicky Roberts, Consultant Obstetrics and Gynaecology

The directorate group that have agreed this patient information leaflet:

EPAU Workgroup, Women's Health Directorate

Next review date: April 2019

Responsible clinician: Mr David Chui

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