

Emergency Department Miscarriage

General Information

Firstly, we are very sorry that this has happened to you. Miscarriages are common and occur in as many as 1 in 4 pregnancies. Unfortunately, there is no way to prevent or stop a miscarriage. The most common cause is a random genetic abnormality that occurs when the egg and sperm join. These events are unpredictable and cannot be prevented. Less common causes include hormone imbalance, abnormalities in the womb, and some infections. Even with special tests we often never know what caused the miscarriage. This was not caused by anything you did—it is not caused by any food, exercise, activity or stress.

The usual symptoms of a miscarriage are vaginal bleeding and lower abdominal cramps/pain. Most women will have bleeding similar to a heavy period. You may notice passing blood clots and even tissue, which may look like liver. Sometimes, however, the bleeding can be quite heavy and this can be scary. The amount of pain varies among individuals and can be mild, like period cramps, or more severe.

There are three treatment options for miscarriage: expectant, medical and surgical.

1. **Expectant Management** - The majority of miscarriages will resolve on their own and many women choose to “let nature take its course.”
2. **Medical Management** - Sometimes it takes days to weeks for all of the pregnancy tissue to be passed, so a medication can be taken either by mouth or by the vagina to help things move more quickly.
3. **Surgical Management** - Often called a D&C, surgery is typically reserved for women who have ongoing heavy bleeding or signs of infection, and when expectant and medical management do not work.

Any woman who has a miscarriage and has a certain blood type (A, B or O negative) will receive an injection while in the Emergency. This medication helps prevent the formation of antibodies against future pregnancies.

The bleeding should resolve over 1–2 weeks and the pain normally subsides once all of the pregnancy tissue has come out. You may notice that your breasts become swollen and painful and they may even leak milk, this can continue for a few days or a few weeks. You can expect to get a period within 4–6 weeks after the miscarriage. Recovery from the emotional challenges of having a miscarriage often takes longer. Losing a baby is a very personal experience and there is no “right way” to feel. Many women experience a profound sense of loss and grief with sadness, guilt and anger being common. For others, a miscarriage can bring a sense of relief. Whatever you feel, it is important to take the time you need to recover.

Instructions

1. Take any medications prescribed by the doctor.
2. Take medications for pain. Medications may be prescribed by the doctor, or you can take acetaminophen (Tylenol) or ibuprofen (Advil).
3. Complete follow up ultrasounds and/or bloodwork, if ordered by the doctor.
4. Do not use tampons for the bleeding. Use sanitary pads as needed until the bleeding stops.
5. Do not have sexual intercourse until the bleeding stops and your doctor has said it's safe to do so.
6. Showers are safe and can provide comfort. Baths, however, are not recommended until the bleeding has stopped.
7. Do not use douches or insert other creams into the vagina until advised by your doctor that it is safe.
8. If lactation occurs:
 - a. Apply cold compresses, using ice packs to reduce pain & swelling.
 - b. Wear a comfortable bra that provides good support.
 - c. When you take a shower, let your breasts leak to relieve pressure.
 - d. Don't use heat on your breasts, this could make them more painful.
 - e. Don't pump your breasts, you can gently hand express enough to make you comfortable.
9. See your family doctor within 1–2 weeks for reassessment.
10. Attend any follow up appointments arranged by the Emergency doctor.
11. BC Women's Hospital offers a Pregnancy Loss Support Group. To attend, or for more information on the group, call 604-875-2149.

Return to Emergency if any of the following develop:

- Your bleeding is heavy and you are soaking 1 or more maxi pad per hour.
- Your pain is not controlled by the medications given to you by the doctor.
- You feel faint or dizzy.
- You experience severe pain on only one side of your abdomen.

See your Family Doctor if any of the following develop:

- Your bleeding lasts for longer than 2 weeks.
- You develop a fever.
- Your vaginal discharge smells bad.
- Your breast(s) become hard, red, painful and you have a fever.
- You have any questions or need further information.
- You have questions about getting pregnant again.
- You find that you are not feeling better after a couple of weeks, or are having trouble sleeping or eating because of the sadness you experience.

For more information or questions contact HealthLinkBC at 811.

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