

Information about your recent miscarriage

It appears from your symptoms or tests that you have had a miscarriage.

Why did it happen?

We will probably never know why, but it is usually because the pregnancy did not develop properly. Around one in five pregnancies ends in miscarriage, and there was nothing you could have done to change this, or to cause it. It is not your fault, and it didn't happen because you ate something, or lifted something you shouldn't have or got stressed.

What do I do now?

Everyone reacts differently to miscarriage. Most women are able to return to normal activities/work within a few days although some need a little longer. Women can experience:

- Pain similar to a period pain for a few days and normally two tablets of paracetamol regularly settles this.
- Bleeding that can last for around 14 days. It sometimes stops and starts again, but gradually reduces. Use sanitary pads and not tampons until your next period to reduce the chances of infection. Your next period is due around four-six weeks after your miscarriage and can be heavier than normal. This is your body making sure it has emptied properly. Please contact your GP if your next period does not come as expected.

Do I need a check-up?

Most women do not need further check-ups. However:

- Avoid sexual intercourse until the bleeding has stopped again to reduce the chances of infection.
- If you do not want to become pregnant now, you need to start using contraception within the next day or two. Speak to us today or make an appointment with your GP/ Family Planning Clinic as soon as possible. It is possible to become pregnant very quickly after miscarriage.
- If you do want to become pregnant now, we advise you to start taking folic acid tablets. Folic acid reduces the chances of you conceiving a baby with spina bifida and works best if you take it for three months before conceiving. Discuss this with your GP to make sure you take the correct dose. We advise you to avoid pregnancy at least until your next period to ensure your body has had some time to get back to normal. There is no increased risk of future miscarriage and you don't need to take any special precautions with your next pregnancy.
- If you have questions please call us, or make an appointment with your GP so that he can answer them for you.
- Repeat a pregnancy test at the end of two weeks to ensure it has returned to negative. It can take time for your hormones to settle, but we would want to talk with you if your test is still positive at that stage

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- Call us if you develop any of these symptoms:
 - Your bleeding continues to be heavy or gets heavier than your normal period
 - High temperature
 - Offensive vaginal discharge
 - Pain that is getting worse rather than better, or not controlled by regular painkillers

What happens to the pregnancy if I passed it in hospital?

If you pass tissue in hospital, it will be sent to the laboratory, where they will take a small sample and place it on a slide and look under a microscope. If this confirms you have had a miscarriage, it will help us to plan your follow-up care, but unfortunately it won't tell us why this happened to you. This sample is kept for up to 30 years.

All remaining foetal tissue will be included in a shared cremation at the local crematorium.

If you pass your baby in hospital and we can confirm this visually, then we would transfer baby to the mortuary, and this would be included in the shared cremation as mentioned above.

Shared cremation normally happens about 4 weeks after your miscarriage, so please let us know if don't want this to happen, and would prefer to take the pregnancy tissue home. Please ask us if you would like more information on our protocols

If pregnancy tissue is not confirmed, we may need to arrange further blood tests, scans or pregnancy tests

Who can I talk to about how I feel?

We would normally advise you to give yourself a few weeks - it is normal to be sad after going through this experience. However, if things are not settling, or you need further support, you could contact your GP, or the Miscarriage Association (www.miscarriageassociation.org.uk). We can also offer you counselling through the Trust, so let us know if you need more support.

Contact Details:

The Early Pregnancy Unit (EPU) Treatment Centre, Hinchingbrooke Hospital, Huntingdon, PE29 6NT	The Emergency Gynaecology Assessment Unit (EGAU) Women's Health Outpatients, Bretton Gate, Peterborough (City Hospital), PE3 9GZ
Opening days may vary	Open: Weekdays 0800-1800 Weekends/Bank Holidays 0800-1200
Central triage line for EPU and EGAU: 01733 673758 (voicemail will cut in when the line is engaged – please leave a message for a call back). www.womenshealthpeterborough.co.uk	
For emergencies only, out of these hours, please attend the Emergency Department.	

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