

Information about your surgical procedure: Local Anaesthetic

Please attend:	Dav/Date:	Time:
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What to do before coming into hospital

Please bring any medications, including inhalers; eat and drink as normal; wear loose, comfortable clothing and bring in some sanitary towels/change of underwear. You may be able to bring one adult to sit with you, (please ask the staff for current restrictions) but they won't be able to accompany you during the procedure.

Risks of the procedure

- Significant tear to the neck of the womb whilst opening rare
- Perforation, where a hole or tear is made in the womb during the procedure less than 1%
- Repeat procedure required if all the pregnancy remains are not removed less than 5%
- Bleeding up to 2 weeks is common but heavy bleeding, needing transfusion is less than 5%
- Pelvic infection less than 1%
- Development of intrauterine adhesions is common (190 in 1000)
- If you have had **more than one previous caesarean section**, this will increase the risk of all complications
- Women have a higher risk of blood clots in their legs or lungs in pregnancy, and in the six weeks after this procedure. If you have had a blood clot before, blood clotting disorders in your family, smoke or have a high body mass index, you may be at higher risk and need to start injections into your abdomen (tummy). Seek urgent help if you have painful/swollen calf pain or chest pain/difficulty breathing.

What will happen when I am in hospital?

When you arrive, four tablets will be put into your vagina to soften and open up the cervix (neck of the womb), which can sometimes cause period type pain and slight bleeding. You will be offered an antibiotic tablet, then wait in our recovery area until the medicines work, which takes about 2 hours. You can walk to the treatment room where the doctor will place a speculum in the vagina, put numbing jelly onto and into your cervix, followed by numbing injections into the cervix.

The pregnancy tissue will be removed by gentle suction, which takes about 10-15 minutes. At the end of the procedure you will normally have an ultrasound scan to ensure that the womb looks as it should. During the procedure you will get bad period-type cramps, but these will settle quickly afterwards. We will give you more tablet pain relief should you need it. The nurses will check you are well and discharge you home. If you are rhesus negative blood group, you will be offered an injection of 'Anti-D' before you leave to prevent problems in future pregnancies. If you do not want to be pregnant now, please ensure you have contraception in place prior to being discharged. Ask the nurse looking after you if you need more information. If you do want to be pregnant now, we suggest you re-start your folic acid but wait until you have had one period before trying to conceive gain.

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Directorate: Family and Integrated Support Services: Authors: Emma Lincoln, L Rutherford, R McKay

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What happens to the pregnancy tissue?

We will have had a conversation with you about what happens to pregnancy tissue after the procedure. If any of the information does not make sense, or you have further questions, please ask us.

Aftercare

When you go home you will bleed for up to 14 days – it varies for women. The bleeding should not be heavier than a normal period and will gradually get lighter. Avoid tampons, swimming and sexual intercourse until bleeding has stopped to reduce the risk of infection. You should expect your next period around 4-6 weeks' unless you are taking hormonal contraception. You don't need a check-up unless you have concerns. You may bath and shower as normal. Most women feel able to go back to work quickly after treatment, others like to take a few days to recover. It will depend on how you feel, what kind of job you have and when you feel ready.

How might I feel emotionally afterwards?

Everyone will have an individual experience when it comes to their emotions after a treatment, for some women these can be strong, for others it will be less so, Whatever emotions, be reassured that these are completely normal, and there will be other women who have been in your position, feeling exactly the same as you. If you have someone you can talk to about your experience and your feelings, this often helps, We suggest taking a few weeks to allow your feelings to settle, If things are still not getting easier after this time, please contact us to arrange counselling.

Please seek urgent attention if you:

- Soak 2 big sanitary pads an hour, for 2 hours
- Have pain that is not getting better with regular pain relief
- Feel your bleeding is very smelly
- Have a temperature or fever of 38 degrees or higher, diarrhea or vomiting
- Are worried about any of your symptoms

Contact Details:

1 st floor, woman and child unit, Bretton Gate		
Peterborough (City Hospital)		
PE3 9GZ		
Open: Weekdays 0800-1800-phone line open until 1730		
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)		

The Early Pregnancy Unit (EPU) The Emergency Gynaecology Assessment Unit (EGAU)

www.womenshealthpeterborough.co.uk
For emergencies only, out of these hours, please attend the Emergency Department

Within this leaflet we use the term woman/women, however we acknowledge that it is not only people who identify as women for whom it is necessary to access our services. We recognise the importance of providing inclusive and respectful care to all people and their families, including those whose gender identity does not align with the sex they were assigned at birth. Please let us know if there is anything we can do to make you feel more comfortable while you are under our care.

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