

## How do I decide my treatment?

We know that this is not an easy decision for you, but choosing the right treatment option is important, as it will ensure that your experience is the best that it can be. Your choice normally will depend on how many weeks into the pregnancy you are or any medical problems you may have. We may not have every option at both hospitals but we can transfer your care across to ensure we meet your preference as much as we can. **In some cases, the doctors and nurses may recommend a particular treatment for you.**

To help you to choose the right treatment option for you, we would suggest the following:

1. Have a look at **Table One** below – this shows what type of treatment is available based on how many weeks you are
2. Compare these options using **Table Two**, to find the method which will suit you the best
3. Write down all your questions and concerns, and then speak to the nurses who will help you to make a final decision.

TABLE ONE				
Weeks of pregnancy	Tablets at home	Procedure while awake	Procedure while asleep	Tablets in hospital
Up to <b>6 weeks+6 days</b>		 ✔ This is an option for women going through miscarriage	 ✔ This is an option for women going through miscarriage	 Unless required due to health reasons
Between <b>7 weeks</b> and <b>7 weeks+6 days</b>			 ✔ This is an option for women going through miscarriage	 Unless required due to health reasons
Between <b>8 weeks</b> to <b>9 weeks+6 days</b>				 Unless required due to health reasons
Between <b>10 weeks</b> and <b>10 weeks+6 days</b>				
Between <b>11 weeks</b> and <b>15 weeks+6 days</b>			 Depending on surgeon availability	
Between <b>16 weeks</b> and <b>17 weeks+6 days</b>			 Depending on surgeon availability	 Depending on availability of beds

TABLE TWO					
Tablets		Procedure while awake		Procedure while asleep	
10 weeks and over					
<b>What will happen?</b>					
We give you 2 different medicines to bring on cramps and bleeding, to allow the pregnancy tissue to pass. The first tablet is taken in the clinic.		You will be given vaginal tablets to soften the cervix (neck of the womb) 2-3 hours later, the doctor will apply numbing medications to the cervix, and the pregnancy will be removed by gentle suction.		If you are under 14 weeks, you will be given vaginal tablets to soften the cervix (neck of the womb) 2-3 hours before the procedure. If you are over 14 weeks, your cervix will be softened by small rods (dilapan) inserted into the cervix the day before your procedure. You will have a general anaesthetic to put you to sleep. The doctor will remove the pregnancy through the cervix.	
1-2 days later you will insert vaginal tablets at home, at a time that suits you	1-2 days later you will return to hospital for admission, and the vaginal tablets will be inserted				
For more detailed information about what is involved, please see the separate leaflets					
<b>Where will it happen?</b>					
At home		On the hospital ward		Early Pregnancy Unit / Outpatients (occasionally in the Operating Theatre)	
				Day treatment Unit and the Operating Theatre	
<b>How long does it take?</b>					
The bleeding normally starts 1-4 hours after vaginal medicines and may be heavy for 2-3 hours.		You will be in hospital for several hours, possibly the whole day. There is a small chance you may need to stay overnight		Time in hospital: 3-4 hours	
				Time for procedure: 10 minutes	
Many women take paracetamol and ibuprofen to manage the pain, but you will be given stronger tablet pain-relief in case of need. Some women experience strong period pain, others describe labour-type pain. The heavy bleed normally lasts 2-3 hours				Time in hospital: 5-6 hours	
				Time for procedure: 10 minutes	
		You will have two forms of numbing medication (local anaesthetic) in the neck of the womb, and strong tablet pain relief, to reduce the pain and discomfort. The strong cramps last during the procedure (around 10 minutes), but then settle quickly afterwards.		You will have a general anaesthetic, so you will not have any pain during the procedure. You may experience mild cramps after the procedure.	

Tablets		Procedure while awake	Procedure while asleep
Under 10 weeks	Over 10 weeks		
<b>How much will I bleed?</b>			
<p>You will have heavy bleeding (more than a period), and you will pass clots (possibly up the size of a lemon). The bleeding will be heavier if you are further on in the pregnancy. This will settle after a few hours and lessen as the days go on. It can take 2 weeks for the bleeding to stop, but some women will spot until their next period. Some women experience an episode of heavy bleeding 3-5 weeks after medication and/or their next period is heavier than normal.</p>		<p>There may be minor bleeding/spotting after the procedure for up to 2-3 weeks or until the next period. Some women find that their next period is heavier than normal.</p>	
<b>How will it make me feel?</b>			
<p>This option may be good for you if you would like less 'intervention', and would rather be in the comfort of your own home during the treatment. However, it is important to note that there is a chance you may see the pregnancy as it passes (especially at higher gestations), and for some women this can have an impact on their emotions.</p>		<p>This option may be good for you if you would rather stay awake during the procedure, but you want to ensure you will not see the pregnancy. For some women, the short procedure time is emotionally more favourable than a longer process with tablets.</p>	<p>This option may be good for you if you would rather not be aware of the treatment at all. For some women it is important for their emotions that they have no memory of the procedure and they wake up when the treatment is complete.</p>
<p>We have a counsellor available to all women for support in the decision process and for support afterwards. → Please let us know if you would like an appointment.</p>			
<b>Can I bring someone with me?</b>			
<p>We recommend that you have someone at home with you</p>	<p>Normally you are able to have one person with you on the ward (please ask about any current restrictions)</p>	<p>Normally you are able to have one person to sit with you before and after the procedure (please ask about any current restrictions). Your support person is not able to sit with you during the procedure.</p>	<p>It may not be possible for someone to stay with you during your whole stay, due to limited space. Someone will need to pick you up after the procedure and someone must be with you for the 24 hours afterwards</p>

Tablets		Procedure while awake	Procedure while asleep
Under 10 weeks	Over 10 weeks		
Can I eat and drink? Will it stop me driving?			
You may eat and drink what you want, and drive when you feel able to		You will need to fast for 6 hours before the time of your procedure. You cannot drive for 48 hours after the procedure	
What contraception can I have afterwards?			
You can have all forms of contraception started at the time apart from copper or 'Mirena' coil, which will be fitted 3-4 weeks after your treatment		You can have all forms of contraception started at the time, including having a copper or 'Mirena' coil fitted during the treatment	
Are there any risks involved?			
Please see individual leaflets for different treatment choices. You will be given further information about this when you have consented in clinic for the treatment you choose			

**Contact Details:**

<p>The Early Pregnancy Unit (EPU) Lily clinic, treatment Centre <b>Hinchingbrooke Hospital</b> Huntingdon, PE29 6NT Opening hours may vary</p>	<p>The Emergency Gynaecology Assessment Unit (EGAU) 1<sup>st</sup> floor, woman and child unit, Bretton Gate <b>Peterborough (City Hospital)</b> PE3 9GZ Open: Weekdays 0800-1800-phone line open until 1730 Weekends/Bank holidays 0800-1200</p>
<p>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) <a href="http://www.womenshealthpeterborough.co.uk">www.womenshealthpeterborough.co.uk</a></p>	
<p>For emergencies only, out of these hours, please attend the Emergency Department</p>	

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.