

Miscarriage

General information

- 50% of pregnancies with spotting or bleeding will end in miscarriage.
- The risk of miscarriage decreases to less than 5.5% if the baby's heart rate is heard.
- 80% of miscarriages occur during the first trimester.
- Nothing that you do will cause a miscarriage.
- There is nothing you can do to prevent or stop a miscarriage.
- After having one miscarriage, the chances of having another miscarriage are not increased.
- If you have 3 consecutive pregnancies end in miscarriage, a specialist may be able to help.

Types of miscarriage (also called "spontaneous abortion")

- Complete abortion: the pregnancy miscarries, pregnancy tissue is passed and symptoms resolve.
- Incomplete abortion: the pregnancy miscarries, but pregnancy tissue and/or symptoms remain.
- Missed abortion: the fetus has stopped developing, but does not miscarry and no symptoms are noted.
- Septic abortion: the pregnancy miscarries and an infection develops.

Management

Depending on gestation, type of miscarriage, symptoms, and personal preference, you may choose:

- Expectant management: waiting for your body to complete the miscarriage.
- Medical management: taking medications, ie misoprostol, to induce in the case of missed abortion.
- Surgical management: Dilation and curettage (D&C) in the case of missed abortion.

You would have to see a physician if you need a D&C or medications.

What to expect

The process may take a few weeks to complete and you can expect the following symptoms:

- Bleeding which is heavier than a menstrual period and may include clots.
- Cramps, like menstrual cramps, which may become quite severe.
- Passing of placental or fetal tissue or "products of conception", which may appear pink or gray.

Comfort measures

Miscarriage is difficult physically and emotionally. Ensure you get enough rest and have support from family or friends. Unless you have allergies, you can take Tylenol, Advil, or Aleve for pain and Gravol for nausea. You may benefit from a warm bath and a hot water bottle or heating pad.

Page your midwife if you:

- Have excessive bleeding, which means filling an overnight pad in less than 30 minutes, passing several large clots continuously (larger than a golf ball), or bleeding for more than 2 weeks.
- Are feeling unwell, nauseated, dizzy or faint, sweating
- Have a fever higher than 38°C
- Have pain that is not controlled with over the counter pain medications.

fact sheet

