

The Women's Centre, John Radcliffe Hospital

Medical miscarriage after 12 weeks

Information for patients



Management of miscarriage after 12 weeks

A medicine called Prostaglandin is used to treat a miscarriage after 12 weeks. This works by making the womb contract like a mini labour to expel the pregnancy tissue. After 12 weeks of pregnancy this is carried out on Level 7 of The Women's Centre.

What does the treatment involve?

The treatment will probably involve:

- Being assessed and examined by a doctor at the hospital. We will take a blood test to find out your blood group and blood count.
- Taking a tablet called Mifepristone at the hospital two days before the Prostaglandin treatment. This prepares your womb for the miscarriage and is known as the 1st stage. Once you take the Mifepristone the process has started.
- Being given vaginal prostaglandin tablets in hospital (Level 7 of the Women's Centre) 2 days later. This is the 2nd stage.
- If necessary, being given a hormone called oxytocin (via a drip into a vein in the back of your hand or arm) to help your uterus contract.
- Having a final check up 1 or 2 weeks later with your General Practitioner or at a Family Planning Clinic.

Consent

We will ask you for your written consent for the treatment to take place.

Risks

- About 5 in 100 women need to have a minor operation called an ERPC (evacuation of retained products of conception) under general anaesthetic to stop continuing bleeding due to some pieces of tissue being left behind in the womb.
- Infection can occur after the miscarriage (up to 1 in 10 women). If you have a profuse or offensive smelling vaginal discharge, lasting pain or temperature, you should contact your GP.
- Almost all women who have had a miscarriage will be able to become pregnant again if they want to. It is very unlikely that your future fertility will be affected by a miscarriage, unless there have been complications.

The treatment

1st stage

We will give you the Mifepristone tablet in hospital. You can go home straight afterwards and we will give you an appointment to return to hospital 2 days later.

You may spend the 2 days between your visits to hospital in the normal way – at home or work. During this time you may experience increased nausea (feel sick), start to bleed vaginally or have period-like pains. You may take paracetamol or codeine to ease the pain, but not aspirin or ibuprofen (see below). There is a small chance that the miscarriage will occur (1 in 100 women). If you do have vaginal bleeding you should use sanitary pads not tampons.

Painkillers and other medicines: Some medicines can interfere with the treatment and should not be taken after you have taken the Mifepristone tablets. This includes painkillers such as aspirin and ibuprofen. Please tell the hospital doctor about any medicines that you take.

Smoking and alcohol: You should not drink alcohol or smoke for at least 4 days after taking the Mifepristone tablets.

2nd stage – what to bring with you

You will need to bring sanitary towels (not tampons), toiletries and things for an overnight stay. You may be able to go home later the same day or you may need to stay in hospital only one night, but occasionally two or more nights are necessary.

You should bring something with you to keep you occupied such as books, music (with earphones), puzzle, laptop etc.

You are very welcome to bring someone to stay with you during the day while you are at the hospital.

What happens on the ward

We will admit you to one of the wards on Level 7 of the Women's Centre. A doctor and midwife will carry out some checks and then the midwife will put the vaginal prostaglandin tablets into your vagina. If there is no progress after 3 hours, we will insert a second tablet. If there is still no progress, we will start an oxytocin drip.

If you are having an oxytocin drip we will give you this through a fine needle into a vein in the back of your hand or arm. This makes the uterus contract and induces a mini labour like a miscarriage.

The process may take up to 24 hours or more. You can have painkillers as you need them - they are usually given by injection into a muscle, which may make you feel drowsy.

When bleeding starts you may develop a temperature or start shivering. You will notice large clots of blood and tissue coming from the vagina with the foetus. The placenta (afterbirth) will also be passed.

We may give you an injection of Ergometrine to help deliver the

placenta. The placenta may not always come away completely and you may need a general anaesthetic to have it removed (see risks).

You may go home once the pregnancy tissue has been passed and your bleeding has settled.

If your blood group is Rhesus negative we will offer you an injection called Anti-D to prevent antibodies forming against a future pregnancy.

What happens afterwards

You may bleed for up to 2 weeks and some women will have a slight blood loss until their next period starts. This is quite normal. You should use sanitary towels instead of tampons until your next regular period, which should occur during the next 6 weeks, to avoid the risk of infection.

If you have a lot of bleeding you must see a doctor as soon as possible as you may need to have an ERPC (see page 3). If you have a discoloured or smelly vaginal discharge, lasting pain or a temperature, you need to contact your GP as you may have developed an infection.

Do not have sexual intercourse until the bleeding has stopped and remember to start using an effective form of contraception - ask your GP or Family Planning Clinic for advice. We recommend that you have one normal period before you try for another baby.

You should see your GP a few weeks later to check that everything is back to normal. A member of staff will discuss this with you.

Emotional recovery

You may feel low for a short time after the miscarriage, but as your body returns to normal this should settle. Look after yourself and give yourself time to recover. If you feel it would

help to talk to someone about it, you may like to talk to our Counsellor (see telephone number below) or one of the doctors or nurses at your GP practice or Family Planning Clinic.

The hospital will arrange disposal of the foetus and placenta. We will ask you to sign a form indicating you want the hospital to do this. If you have any questions about this, please speak to one of the nurses on Level 7.

How to contact us

If you have any concerns immediately after your miscarriage, if you are worried about the amount you are bleeding, or if you don't feel well, you can contact us as follows:

Level 7, Women's Centre
Tel: (01865) 221666

Or **contact your GP.**

To talk to our Counsellor **Tel: (01865) 221235**

For contraception advice **Alec Turnbull**
Family Planning Centre
Tel: (01865) 566666

Or **contact your GP.**

Further information

www.themiscarriageassociation.co.uk

Helpline: **01924 200799** (9am – 4pm Monday to Friday)

Let us know your views

We welcome your views on the care you have received in our hospital. Please ask your nurse for a patient feedback form.

Name

We have arranged for you to be given a Mifepristone tablet on Level 7 on:

Day Date

Time

and to have the Prostaglandin treatment on Level 7 on:

Day Date

Time

If you require this document in another language, large print, braille or audio version, please call **01865 221473** stating your requirements. When we receive your call we may transfer you to an interpreter. This can take some time, so please be patient.

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