Information on Pregnancy Loss

As women and mothers ourselves we understand how devastating pregnancy loss can be, even if it is very early. We know that a bond is formed as soon as the pregnancy test is positive, and we can’t help but make plans surrounding the baby’s due date, and all the exciting possibilities about the baby’s future. When the pregnancy doesn’t continue the disappointment and grief can be overwhelming. Not only have we lost the pregnancy itself, but we also suffer the loss of those hopes and dreams. If you are going through the process of miscarriage we are here to help guide you through both the physical and emotional aspects of your loss. Many of your caregivers at CWCC have been through this themselves, so we truly understand how you feel.

The facts about miscarriage may not give you much solace at this time, but it is important to know that 15% of diagnosed pregnancies end in miscarriage, and a lot more than that miscarry before we even recognize that we are pregnant. So pregnancy loss is very “normal” and it is very unlikely that there is anything wrong with you or your partner that caused this to happen. The great majority of miscarriages occur before 8 weeks, and most often the baby has a chromosomal problem that causes the growth to stop at an early stage. Chromosomal problems occur right after conception when the cells are dividing and a “mistake” in cell division occurs. For this reason there is nothing you (or we) can do to change the outcome, it happens at the time of conception and it just take us a few weeks to be aware of it. It is important to remind yourself that whatever you did, or did not do, it was not your fault.

After one miscarriage we do not recommend any testing to evaluate for problems, because it is so rare that there is anything wrong. We know that going into the next pregnancy is very scary, but try to have faith that the great majority of the time the second pregnancy is fine. While 15% of pregnancies don’t make it, 85% do make it, so try to keep that in mind. There is no good evidence that waiting any certain period of time after a miscarriage is necessary. If you are ready to try again right away that is fine. It is a good idea to wait until you have one normal period on your own, which may occur 4-6 weeks after the miscarriage, then start trying if you are emotionally ready. (If you have not had a period 6 week after a miscarriage, do a pregnancy test, because some people get pregnant again before they have their first period.)

If you have had 2 consecutive miscarriages it is still most likely that this is just really “bad luck”, since it is possible to fall into that 15% group twice in a row. We do however recommend doing some testing at this point to try to determine if we can prevent a 3rd miscarriage. The testing includes blood work for both you and your partner to check your chromosomes (rarely some people carry an abnormal
chromosome that may be transmitted to the baby while they themselves are totally normal), as well as some other tests for rare blood clotting disorders that may affect the pregnancy. We may also recommend a test to look at the shape and size of your uterus as some women have a uterine abnormality that predisposes them to miscarriage. Sometimes we may recommend high doses of folic acid, progesterone supplements, blood thinners or other treatments to try to reduce the risk of a 3rd miscarriage.

Once you have been diagnosed with a miscarriage we may suggest one of three things. Sometimes you may pass the fetus on your own and have a very heavy period which is usually safe if you are less than 8 weeks pregnant. Sometimes we may give you a medication to cause the fetus to be expelled more quickly. If you are 8 weeks or more we will recommend a dilation and curettage (“D and C”) which is a minor outpatient procedure (under anesthesia) to remove the fetus with gentle suction.

It is OK to allow yourself to grieve. Sometimes the sadness can last for weeks and is exacerbated by seeing other pregnant women or babies. Learn to forgive those around you who don’t know what to say or say the wrong thing. Comments like “it was just meant to be”, or “you will have another one, don’t worry” sometimes can be hurtful and not place the appropriate importance on the loss that you are feeling. Your partner will grieve differently than you and may seem to “get over it” more quickly, which can create some conflict. Sometimes even your friends or family may avoid you because they simply don’t know what to say or do. Sometimes talking to others who have suffered a miscarriage is most helpful, they will understand how you feel.

If you are in early pregnancy (less than 8 weeks) and have vaginal bleeding or cramping at home you may not be sure if you are having a miscarriage. If this happens please call us and we will give you instructions. Often we may tell you to rest at home and come in the next day for an ultrasound. Patients often ask if they need to go to the emergency room and we generally recommend waiting until office hours so that you do not have to be subjected to the cold and clinical ER environment. Since there is unfortunately nothing we can do if you are in the process of a miscarriage it is OK to wait until the next day to be seen. We are not minimizing the problem by not sending you to the ER, there is just simply nothing that anyone can do. Hopefully by doing an ultrasound the next day we will reassure you that everything is OK, since sometimes bleeding in early pregnancy can be normal.

If you have questions that are not addressed here please let us know.

Best wishes from your CWCC Doctors