

Information about miscarriage

A pregnancy that ends before 22 weeks of pregnancy is a miscarriage. The pregnancy can stop developing at a very early stage, even before the pregnancy has been noticed. In this case your periods are a couple days late, and they can be heavier and more painful than usual. This is known as "biochemical pregnancy" and no treatment is necessary. Actual miscarriages affect about 10 to 15 % of all pregnancies. 75 % of these happen in the early stages of pregnancy, before 13 weeks.

Usually, a miscarriage starts with light bleeding that gradually becomes heavier. Passing large clots along with the bleeding is possible. Lower stomach pain and back pain similar to menstrual pain is also common. A late miscarriage, particularly after 18 weeks of pregnancy, usually starts with waters breaking prematurely. Sometimes the fetus can die in the uterus but the miscarriage does not start. In this case the miscarriage is confirmed with an ultrasound examination. It is not medically possible to prevent a miscarriage that has started or is about to start.

What can cause a miscarriage?

When a miscarriage happens, people often wonder why it happened. Often, this question does not have a definite answer. In most cases, we are unable to find out why a miscarriage has occurred.

In over half of cases, the development of the fetus has stopped in a very early stage, or the pregnancy is a so-called anembryonic pregnancy. Fetal factors that cause miscarriage can include chromosome abnormalities or other difficult developmental disabilities. This can be interpreted as nature taking its course and removing an embryo that would be unable to live outside the uterus. In an anembryonic pregnancy an empty gestational sac develops in the uterus, but there is no fetus.

As maternal age increases, so does the risk of miscarriage. Other possible causes can include poorly managed chronic diseases, such as diabetes, thyroid disorders, or celiac disease. Smoking and excess body weight also increase the risk of having a miscarriage. An inflammatory disease can also sometimes cause a miscarriage to occur. A common cold does not cause a miscarriage. Late miscarriages can happen due to structural abnormalities of the uterus, benign muscle tumors of the uterus (myomas), or cervical insufficiency.

Have I done something to cause the miscarriage?

Many women who have suffered a miscarriage wonder if they have caused the miscarriage through their own actions. Normal exercise, lifting heavy items or intercourse do not cause miscarriages, and neither do thoughts or feelings.

How miscarriage is treated?

An ultrasound examination is performed to confirm the miscarriage. Miscarriage can be managed medically with medication that cause the uterus to contract and the pregnancy tissue to pass. The uterus can also be emptied using vacuum aspiration either under general anesthesia, or at the outpatient clinic under local anesthesia. If the miscarriage is already in progress and there is no heavy bleeding, it is also possible to continue observing the situation and that no further treatment is needed.

After miscarriage?

You can continue living your life as normal after a miscarriage, but it is best to take it easy for a few days. There is no reason not to continue with your old hobbies after you start feeling better. **How long post-miscarriage bleeding lasts** is different for everyone, and it varies from a few days to a few weeks. Due to a risk of infection, avoid intercourse, swimming, bathing in a bathtub, and using tampons or a menstrual cup during the bleeding. **Your next period** takes place 4 to 7 weeks after the miscarriage, but this too can differ from person to person. The period after the miscarriage can be heavier and more painful than usual. There is no need for a routine follow-up appointment after an early miscarriage.

Feelings – is this normal?

All men and women react differently to a miscarriage. For some, a miscarriage does not cause them much worry or occupy their thoughts for long. For others, a miscarriage can be a very difficult experience that affects them profoundly for many years. The feelings associated with a miscarriage are not affected by how long the pregnancy has progressed. It is completely normal to feel sad, depressed and disappointed even if you have only known about the pregnancy for a few days. It is important to recognize how you react to the miscarriage and accept the feelings it brings.

Many people who have experienced miscarriage have told they experienced some of the following feelings:

- Disbelief and questions such as why this happened to me/us, what caused this
- Greif and crying
- Feelings of emptiness and loss
- Feelings of guilt, even though the rational part knows that the miscarriage was not selfinflicted
- Difficulty to face pregnant women, newborn babies or small children

- Feelings of anger and disappointment
- The desire to either constantly speak about or remain completely silent about the miscarriage
- Depression and fatigue
- Sleep disorders, which manifest either as sleeping too much or insomnia

How to move forward?

Talking with other people about your miscarriage can help you process it. In this situation, your partner is usually the closest person you can discuss the events with. Note that your partner can experience the miscarriage differently and remember that everyone has their own way of grieving and reacting to a loss. Talking with your partner, sharing and supporting each other and respecting each other's privacy will help you overcome the miscarriage. As you speak about the event, you might also find out that you are not the only one who has experienced a miscarriage. Sharing your experience with someone who has been through the same can help you. If necessary, you can also contact a nurse, a doctor, or other professional support. You can receive discussion help from the unit responsible for your care.

Sometimes even talking about your experience is hard. In that case, it might be easier to write down your thoughts and feelings and talk about them afterwards. Every one of us has our own way of processing difficult life events: some people process things by going for a jog or by reading, and others do not consider the miscarriage as a difficult experience at all. The most important thing is to recognize your own needs and feelings and face them with courage.

New pregnancy?

You can attempt new pregnancy after the post-miscarriage bleeding has ended. However, it is important that both you and your partner are emotionally ready for a new pregnancy.

Many women are afraid that a miscarriage will occur in the next pregnancy as well. The fear of miscarriage can be so prevalent that it prevents you from finding joy from the new pregnancy. Most women's fears lessen as the pregnancy progresses when they can feel the fetus moving. If necessary, you can receive help from your local health center, for example in the form of additional appointments. In most cases, it is possible to hear the fetal heartbeat after 11 weeks of pregnancy. With an ultrasound it is possible to confirm the pregnancy and the fetus as early as week 6 or 7. Speaking about your fears with your friends and family and at your local health center can make you feel better. In addition, the knowledge that repeat miscarriages (three consecutive miscarriages) only make about 1 per cent of all pregnancies might ease your fear.

A daily 0.4 milligram folic acid supplement is recommended for all women who are trying to get pregnant.

You can also watch the Keskenmeno and the Keskenmenon jälkeen videos at hoito-ohjeet.fi (only available in Finnish). For more information about miscarriage management, please visit <u>www.terveyskylä.fi/Naistalo</u> (only available in Finnish and Swedish).

Support

It is possible to receive **support from our crisis workers.** You can talk with the hospital chaplain or the nurse experienced in crisis support. Receiving counseling from the hospital chaplain does not require you to be a member of any religion. The support our crisis workers provide is always focused on your needs.