
Information miscarriage

Medisch Centrum Kinderwens

You have been told that your pregnancy is not developing properly. You can expect a miscarriage or may have already experienced one.

The message you have received will have a big impact on you, both physically and mentally. We would like to support you in the coming time and wish you much strength.

You can read more about the important issues surrounding miscarriage in this information leaflet.

What is the cause of a miscarriage?

The cause of an (early) miscarriage is almost always a disorder in the construction of the pregnancy. Because the pregnancy does not develop properly, it will not grow further and will eventually be rejected.

A pregnancy consists of an amniotic sac and an embryo. In a miscarriage, sometimes only an amniotic sac is present, without an embryo. The egg is then fertilized, but the embryo stopped growing very early. Because of this, an embryo may not be visible with an ultrasound.

What are the chances of miscarriage?

In the Netherlands, 20,000 women miscarry every year. It is estimated that a quarter of all women face this problem at some point in their lives. The chance of miscarriage increases with age. For women under 35, the chance of a pregnancy ending in miscarriage is about 1 in 10. Between 35 and 40, 1 in 5 to 6 pregnancies ends in miscarriage and between 40 and 45, 1 in 3. Above 45, this is the case for half of pregnancies.

If you have experienced a miscarriage once, you usually have no increased risk of miscarriage in a future pregnancy.

Chromosomal aberration

The cause of a miscarriage is usually a chromosomal abnormality. This abnormality happens just before, during or after fertilization. Chromosomes are the carriers of hereditary material. Usually, these are not hereditary abnormalities, but a "spontaneous," accidental abnormality. Therefore, there are usually no risks for a future pregnancy.

For most women, no obvious cause is found for the miscarriage. If you have never had a miscarriage before, there is no need for further investigation. Only if you have had several miscarriages (depending on your age and family history) can the cause be investigated.

Ultrasound examination

Ultrasound examination can be used to assess the pregnancy. All pregnancies basically develop the same way for the first 14 weeks. If you became pregnant after a fertility treatment, it is possible to determine exactly how far along you are. Based on the gestational age, the doctor knows what the pregnancy should look like with an ultrasound.

An ultrasound allows the doctor to see if there is an amniotic sac in the uterus. Inside the amniotic sac is the embryo. With the ultrasound, you can see if the heart is beating. If an ultrasound is done before the 6th week of pregnancy, sometimes the examination can sometimes may not provide clarity yet. The pregnancy is not far enough developed by then, 1 to 2 weeks later, the ultrasound scan may look a lot clearer.

Possibilities in case of a miscarriage

We know that after an ultrasound, which determines that a miscarriage has occurred, 50-60% of miscarriages occur spontaneously within 2 weeks. We recommend that you let the ultrasound results sink in before deciding what to do next. There are 3 options:

- Waiting for the miscarriage to come spontaneously
- Using medications that initiate miscarriage
- Curettage: a procedure, where the pregnancy tissue will be removed surgically

The choice:

We encourage you to check out the decision aid miscarriage through out the following link (only available in Dutch):

<https://www.keuzehulp.info/cz/miskraam/intro>

The decision aid provides information about the pros and cons of the various options you currently have. Completing the decision aid will help you make a choice. The final choice is a matter of personal preference. You can decide what suits you best.

What can you expect if the miscarriage starts?

Usually the miscarriage will start with blood loss. This blood loss gradually becomes more. The amount of blood loss is usually more than during your period and you may also lose clots (blood clots). Use sanitary pads to catch the blood – no tampons – due to risk of infection.

When the blood loss increases, you will usually have stomach ache. This pain can be similar to (severe) menstrual cramps. You can take paracetamol or Ibuprofen/Aleve against the pain. When you lose the amniotic sac, it can usually be recognized as a large clot of bloody tissue. The size of this is 1 – 10cm. After losing the amniotic sac, the blood loss and stomach ache will decrease. The bleeding can sometimes continue for 14 days before it stops completely.

Medical assistance

It is wise to alert a doctor or midwife in the following situations:

- Severe blood loss/so much blood loss that you are concerned. Or if you experience symptoms such as dizziness, tendency to faint or seeing stars.
- Persistent complaints: if you continue to have crampy pain and/or heavy blood loss after a spontaneous miscarriage or curettage, this may indicate on an incomplete miscarriage. A remaining of the pregnancy has then remained in the uterus.
- Fever: if you develop a fever during or shortly after a miscarriage, it may point to an infection in the uterus. This should be treated. Contact your midwife or physician if your temperature is above 38° C (measured rectally or with ear thermometer).
- Anxiety: are you worried about the course of the miscarriage? Then you can always contact your midwife or physician.

Physical and emotional recovery

The physical recovery after a miscarriage is usually quick. After the miscarriage, you may have blood loss that turns into a brown-colored discharge for 1-2 weeks. The advice is to use sanitary pads, not to swim or bathe and do not have sex until the bleeding is over. The first period after a miscarriage can sometimes take a little longer. Most women have another period within 6 weeks. Getting pregnant again is not complicated by miscarriage.

Emotions

Many women and possibly their partners have a difficult time psychologically after a miscarriage. After the miscarriage, women sometimes feel literally and figuratively empty. The miscarriage means a line through the future and suddenly puts an end to all plans and fantasies about the expected child.

Take time to recover both physically and emotionally. Women react differently to miscarriage. Grief, guilt, disbelief, anger and a sense of emptiness are common emotions. The question of why it went wrong may occupy you. However, guilt is never justified. Miscarriage is a natural reaction for a pregnancy that does not develop properly. It remains questionable whether a healthier lifestyle or less stress could have prevented it. Talking about it can help. You can always have the option of scheduling a consultation with the social worker at Medisch Centrum Kinderwens (MCK). You can inform your physician or schedule an appointment through the secretary.

Contact information

You can reach us by phone from Monday till Friday from 8:00 AM - 12:00 PM and from 1:00 PM – 3:30 PM and on Saturdays from 10:00 AM – 1:00 PM on 071-5812300.

On Sundays and holidays we are only available by phone for medical emergency between 10:00 AM – 1:00 PM.

Emergency line outside office hours: 06-25257420