MISCARRIAGE AND ITS MED-ICAL TREATMENT

FREQUENCY AND CAUSES

Spontaneous abortions, also called miscarriages, are much more frequent than is usually assumed. At least 20% of all pregnancies end in miscarriage. Almost all miscarriages take place before the end of the twelfth week of pregnancy.

Miscarriages are never caused by something one has done wrong. On the contrary, almost all miscarriages are caused by mistakes that arose in the placenta or in the embryo in the first weeks of the pregnancy - there are many ways for things to go wrong when the sperm cell and the egg cell melt together to create a new life.

Sometimes the body goes through the process of a spontaneous abortion of itself, and other times it does not. Depending on your situation you can choose to wait for the process to happen, or help it on its way medicinally.

TREATMENT

The medical treatment is 1 tablet of Mefigyne which will be ingested along water while you are in the clinic. After 24 hours at home, you need 4 tablets of Cytotec, which are to be inserted into the vagina. The tablets soften the cervix and make the uterus contract, at which point you will start to bleed and feel menstruation-like pains. We recommend taking a painkiller suppository, so Pinex 1 g * 4 and ipren 600 mg *3 or, Diclon 50 mg *, which will act against the menstruation-like pains. You will get the tablets to take home with you, and we recommend that you stay in bed for about an hour until the tablets and suppository are admitted.

CHECK-UP

It is very rare that one does not bleed during the treatment. After a week you will have a check-up ultrasound at the clinic to be sure that your body has ejected the terminated pregnancy.

IT IS NORMAL:

- To have menstruation-like bleeding, possibly with clumps, after the treatment, and for it to fade away after a week or two.
- ❖ To have light pains in one's lower abdomen, which Pamol and Ipren (in tablet form) can help with. It is also possible to use a heating pad or hot water bottle as a supplement to the painkillers.
- That any nausea or breast tension that can arise goes away after 2 to 4 days.
- ❖ That you are psychologically out of your usual balance for a while, as the pregnancy hormones still are in your body.
- ❖ That your period only comes back 3 to 6 weeks after the abortion. You can fall pregnant again during this time, but it is often recommended to wait until after the first period. However, if you are to become pregnant again before the first period after the miscarriage, you're not at a higher risk of miscarrying again.

PRECAUTIONS

To avoid infections it is recommended to:

- Not use tampons whilst bleeding, only pads.
- ❖ To avoid baths and swimming in the sea or in a pool as long as you are bleeding.
- To avoid sex as long as you are bleeding, or to use a condom.
- ❖ If you develop a fever, or have intense bleeding or pains, you can contact your own doctor or the watch doctor outside of the clinics opening hours.

STARTING WORK AGAIN

You can start work again once you feel physically and psychologically ready. If you do not feel ready after a week we recommend you contact your own doctor.

CURETTAGE

It is normal to have prolonged spotting after a miscarriage. At first you can by scanning not distinguish between remaining placental tissue or a minor blood pool. Either way, you should wait at least one, and preferably two periods after the abortion, before you possibly make a surgical excision, since the body in most cases can expel the remaining and empty the uterus it self. Occasionally, the medical treatment can be repeated with 4 tablets of Cytotec, which must be inserted into the vagina. It is only exceptionally necessary to make a surgical scraping. Fo an example in case of increasing bleeding, severe pain or high fever. If you experience this, you must call 1813.

ENDOSCOPIC EXAMINATION

If there is remaining placental tissue after 12 weeks, we can advantageously offer an endoscopic examination and removal of the tissue, that is far more gentle on the uterus than blind scraping. You don't have to wait for the next pregnancy. The pregnancy only comes when the system is again in balance.



WHO CAN I CALL WITH QUESTIONS?

You are welcome to call Kvindeklinikken during telephone hours on 36 46 71 40.

Revised September 2022. To be revised on an ongoing basis and certainly no later than September 2025, before in case of any significant changes.