

## Gynaecology Department

# Mid-Trimester Pregnancy Loss

For staff use only  
(Use hospital ID label)

Surname:  
First names:  
Address:

Date of birth:  
Hospital number:

First visit (Mifepristone tablets)

Date:                      Time:  
Location:

Second Visit (Misoprostol treatment)

Date:                      Time:  
Location:

The process of pregnancy loss can be difficult and we are here to try to make your experience easier to cope with.

Included in this package you will find important contact numbers and useful information about your treatment and care.



## Patient Information

If you find that you have any questions that are not answered in this information, please either contact me for advice / support or ask a senior member of staff on the ward.

### Contact Information

**Ward 23, Gynaecology Ward Tel. 024 7696 7000**

**Chaplaincy: Tel. 024 7696 7515 or via the hospital switchboard 024 7696 4000**

### About your first appointment

The first phase of your treatment will involve coming in to hospital for approximately two hours. We always try to minimise the time you have to stay on the first visit but occasionally visit times are prolonged.

You will be welcomed to the ward by a member of the ward nursing team. Your nurse for this visit will introduce herself and sit with you to obtain your past medical history and any relevant details that may influence your treatment and care. The nurse will also record your blood pressure, pulse, temperature, respiration rate and weight at this time. This is so that we have a baseline set of observations in preparation for your second visit.

The nurse will talk to you about the second visit and discuss with you any needs you may have.

### Things to avoid during the treatment process

We advise that you do not smoke or drink any alcohol after you have taken your first treatment and until two days after you are discharged following your second visit.

You must also avoid taking any non-steroidal anti-inflammatory pain killers, such as, Aspirin, Ibuprofen or Diclofenac (Voltarol.)

### About the first treatment

The first treatment is in the form of a tablet which you will take orally (by mouth.) It is called Mifepristone and works by blocking the effects of progesterone (the hormone which is needed for pregnancy to continue).

You will be given an information leaflet about the Mifepristone tablet by the nursing staff before you take the tablet.

### How will I feel after taking the tablet?

Occasionally ladies will feel a little unwell, sick or faint during the first few hours. This should settle. There is also a chance that you may start to bleed. If this happens you should contact the hospital (Ward 23) for advice.

## Patient Information

If you feel unwell and are not managing at home, you are welcome to contact Ward 23 who will arrange for you to come into hospital sooner if necessary, although the administration of the second phase of the treatment will not be able to start until the planned time.

### About your second visit

You will be asked to return to the hospital approximately 36-48 hours after your first treatment for the second phase to commence. You should attend Ward 23 where you will remain for the rest of your stay.

The nurses on the ward will show you to your bed space and make you familiar with your surroundings. You will be introduced to your named nurse and given the opportunity to ask any questions and discuss any fears or anxieties.

The nurse responsible for your care will talk to you about your care after the delivery. You may want to discuss ways in which you can remember your baby. Emotions differ with each individual and you must do what you feel is right for you.

You may feel you would like to:

- See or hold your baby
- Have your baby blessed by the hospital chaplain
- Have photographs of your baby
- Have footprints & handprints as a memento
- Have a ward issued birth certificate.

You may choose not to accept any of these options; your decision will be respected either way.

Sometimes ladies or couples change their minds after delivery. If you feel this way, please feel free to inform the nursing staff caring for you.

On occasions when a baby is delivered under 22 weeks, there can be involuntary movements and muscle twitching. We understand that this can be very distressing; however this is not a sign of your baby being born alive. If you feel that you would like to hold your baby or spend time with your baby immediately at delivery or you wish to do this at a later time, please do not hesitate to let the nurses caring for you know.

Many ladies or couples ask to know the sex of their baby. It is very difficult to definitely determine the sex before 22 weeks as the genitalia can look similar. If you are told the sex it is important that you are aware that it is in the opinion of the person looking and not definite. If you opt for a post mortem examination on the baby the sex will be determined in the report.

If you would like the results of the post mortem prior to burial or cremation, you must inform the nursing staff before you go home. Please be aware that if you wish this to happen the burial or cremation will be delayed for some time until the results are received.

## Patient Information

### The second phase of treatment

This is called Misoprostol and is another type of hormone called a prostaglandin which will cause your uterus to contract resulting in the delivery of your baby.

The Misoprostol is in the form tablets which will be inserted into your vagina by an appropriately trained professional. This treatment will be repeated at 3 hourly intervals (to a maximum of 4 further doses in any 24 hour period), where the medication will be given either orally or vaginally. In most cases the baby is delivered within this time but occasionally the cycle will need to be repeated in 24 hours, during which time you would remain in hospital so that we can monitor your condition.

### Pain relief

There are various methods of pain relief available. Depending upon any allergies you may have or relevant medical conditions, the medical staff will discuss with you the appropriate options.

These could include:

- Entonox (or gas & air);
- Co-codamol (a tablet based painkiller which contains paracetamol and codeine);
- Pethidine (an opiate analgesic given in the form of an injection);
- PCA (patient controlled analgesic device. This device contains Morphine and is controlled by you, when you need it. The device is attached to a venflon or drip line by tubing which runs through a bracelet attached to your wrist. This bracelet has a button for you to press which delivers a metered dose of the pain killer. **It is important that only you operate this device when you are in pain.**

If you find your pain killers are not effective please inform the nursing staff so that another method can be decided upon.

### Your feelings after the delivery

You may feel tired and drained after the delivery; this is normal and will improve with time.

You may find that you continue to bleed for several days, possibly longer, and providing this is not heavy there is no need for you to worry. If you find that the bleeding is very heavy or offensive smelling after you go home, you must either contact the hospital or your GP for advice.

It is normal for you to feel very sad and tearful. These feelings get easier with time and vary in intensity from one woman to another. If these feelings are prolonged (for more than 4 weeks) you may need to seek further support from your GP.

The Miscarriage Nurse and Hospital chaplains run a miscarriage support group where you can come along for an informal chat, meet other families and if you wish to, light a candle and say a blessing for the baby/babies you have lost. If you would like the date of the next meeting please contact Mandi Kirkman on Ward 23 or the Chaplaincy department.

## Patient Information

If you require further support, the Miscarriage Nurse can offer telephone support. Please contact her on 024 7696 7000. If you feel you need further support in the form of counselling, please contact either your GP or Ward 23 for contact details. Some GP practices have a counsellor attached to their surgery. The hospital will provide you with contact details for the Acorn Centre based in Nuneaton. If you have internet access you can access their website: [www.acorncentrenuneaton.co.uk](http://www.acorncentrenuneaton.co.uk) or you can telephone them on 024 7638 1878.

### The Miscarriage Association

Telephone: 01924 200799

Email: [info@miscarriageassociation.org.uk](mailto:info@miscarriageassociation.org.uk)

Website: [www.miscarriageassociation.org.uk](http://www.miscarriageassociation.org.uk)

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 7000 and we will do our best to meet your needs.

The Trust operates a smoke free policy

### Document History

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