

Recovery After Miscarriage

It is important that you look after both your physical and emotional health after miscarriage. Here are some things to try.

Healthy Eating—Make sure that you eat healthy to replace the minerals that you will have lost during miscarriage and to ensure a healthy intake of vitamins to aid recovery.

Journaling - Documenting your journey can be therapeutic.

Yoga – Yoga is becoming more and more popular and can benefit the body and mind. There are some lovely Yoga 'After Miscarriage' videos on Youtube that are easy to follow and gentle.

Support – Join a support group. Follow Morgan's Wings for updates on support groups in Cardiff. Alternatively see Further Support.

Counselling – Counselling can be really helpful but unfortunately the waiting lists are generally quite long. Speak to your employer who may have an employee access scheme.

Get Outdoors — We know it's the last thing that you may feel like doing but being surrounded by nature has been proven to be good for your well-being.

Commemorate your baby—We have some lovely ideas on our blog <https://miscarriagematters.morgans-wings.co.uk/2020/07/09/commemorating-your-baby-after-miscarriage/>

For more information on any of the elements discussed in this leaflet and more please visit:

<https://morgans-wings.co.uk/info.html>

We offer 1:1 talk support via text message or phone call. This is not a counselling service but you will be able to talk with someone who has had a similar experience. There is no charge for this service other than your call/text charges.

Talk Support is currently available Monday—Friday 6pm—8pm and Saturday and Sunday from 4pm—6pm.

If you contact us outside of these hours we will try and get back to you as soon as possible.

Talk support is available on: 07706052048



Morgan's Wings

<https://www.morgans-wings.co.uk>

<https://www.facebook.com/morganswings>

Or e-mail us on info@morgans-wings.co.uk

Miscarriage types and treatments



*Supporting Parents
Going Through
Miscarriage*

Miscarriage Facts

- Approximately 1 in 4 pregnancies end in miscarriage
- Around 60% of women who have a miscarriage go on to have a healthy pregnancy
- Most miscarriages happen in the first 12 weeks

Why?

Although it may be hard to accept, it's important to know that there is no known answer for why miscarriage generally happens. In most cases it is not something you or your partner may or may not have done. 85% of miscarriages occur during the first trimester and these are generally caused by chromosomal abnormalities or by issues with the placenta.

Miscarriages during the second trimester are much less common than during the first trimester and may happen as a result of an underlying health issue or cervical weakness.



There are several types of miscarriages

A Chemical Pregnancy - A chemical pregnancy is an early pregnancy loss. It is hard to identify as it normally happens before 5 weeks gestation. You may have a positive pregnancy test later followed by a negative test. Your period may be heavy and more painful than normal.

A Missed Miscarriage (MMC) - A missed miscarriage or silent miscarriage happens when the baby's heart has stopped beating but your body doesn't recognize this immediately. Your hormone levels may take a while to reduce enough for your body to miscarry. This is normally discovered at an ultrasound scan.

A Complete Miscarriage - This is when a woman miscarries and the baby and other pregnancy tissue passes.

An Ectopic Pregnancy - This is a pregnancy where the fertilised egg usually implants in the Fallopian tube but it can occur elsewhere outside of the uterus.

An Embryonic Pregnancy/ Blighted Ovum - A blighted ovum is when a pregnancy sac develops in the uterus but the baby does not.

Molar Pregnancy - This is a type of pregnancy that doesn't develop properly right from conception. It is the result of a genetic error and leads to the growth of abnormal tissue within the uterus. Very rarely a molar pregnancy can become cancerous. This is called an invasive mole. If an invasive mole is not treated, it can develop into choriocarcinoma, which is a cancer that has a cure rate of just under 100%.

Recurrent Miscarriage - Which is defined as 3 or more miscarriages in a row. Around 1% of couples suffer from recurrent miscarriages.

I am miscarrying. What happens next?

Miscarriages can last a few hours, a day, a week or more. No two miscarriages will be the same.

When people have a miscarriage it can feel like a period or it can feel intense, like labour. Other people will not experience pain or bleeding and this is called a missed miscarriage.

Depending on your circumstances there may be three options available to you. These are :

- Wait and see/expectant management - You may choose to wait 7-14 days for any remaining tissue to pass.
- Medical management - You may choose to have medication to remove the pregnancy tissue. This may be in the form of oral tablets or vaginal pessaries. You will usually be given the tablets to take home.
- Surgical management - You may need to have an operation to remove any remaining tissue. This is usually the case if you experience continuous, heavy bleeding, if medication has been unsuccessful or if there is evidence that an infection has formed due to retained pregnancy tissue.

You will usually be told to take a pregnancy test 3 weeks after any of these options to ensure that all pregnancy tissue has passed. If your pregnancy test is negative this means that all pregnancy tissue has passed. If it is positive you will need to contact the Early Pregnancy Assessment Unit or your GP, you may need to have further tests.