



Miscarriage

For some, a miscarriage can be a very difficult experience. Whether your pregnancy was planned or unplanned, you may have a wide range of feelings. Shock, disbelief, anger, sadness, and guilt are all normal reactions. Or, you may feel that you are ready to move on with your life. This is also a normal response for some women. It is important for you not to blame yourself. A miscarriage happens when a pregnancy is not developing normally, so it is no one's "fault." Usually, there is nothing you could have done to prevent it.

What is a miscarriage?

It is the sudden, unplanned ending of a pregnancy before the 20th week. Miscarriages are very common. They occur in about 15 to 20 percent of all pregnancies, usually during the first 13 weeks, or first trimester. If a woman has a miscarriage it does not mean that she will have another one in the future. Most women who miscarry will go on to have healthy pregnancies later on.

What causes a miscarriage?

It's hard to pinpoint the cause. Usually when a woman miscarries, it is because something has gone wrong with the developing fetus. Most often, the fertilized egg or the placenta did not develop properly. Other factors—such as problems with a woman's uterus or cervix, illness, and lifestyle choices such as smoking, alcohol, and illegal drug use—can contribute to a miscarriage. There is no proof that daily activities cause miscarriages. Activities—such as working, exercising, wearing high heels, carrying groceries, having sex, coloring your hair, or lifting a small child—do not increase a woman's risk of having a miscarriage.

What are the symptoms of a miscarriage?

Most miscarriages start with vaginal bleeding, with or without cramps. It is important to know that other conditions can also cause bleeding. Only about half of the women who have bleeding in early pregnancy will miscarry. The rest will carry their child to term. If you start bleeding in early pregnancy, call your health care practitioner or professional right away.

Call right away if you:

- have heavy vaginal bleeding, soaking more than one sanitary pad an hour
- pass clumps of tissue in the blood
- feel severe cramps or abdominal pain
- have bleeding along with signs of infection, such as chills or a fever of 100.4 degrees or higher

How is a miscarriage treated?

There is currently no treatment that can stop a miscarriage once it has begun. A miscarriage occurs when the cervix opens and passes fetal tissue out of the body. During some miscarriages, the body may pass all of the tissue by itself without any medical treatment. If the tissue has not completely passed,

your practitioner may prescribe a medication to help your uterus pass the tissue. Or, he or she may recommend a procedure called dilation and curettage (D&C). This is a minor surgical procedure to remove the remaining tissue from the lining of the uterus. Having a D&C generally does not require a hospital stay.

What happens after a miscarriage?

It may take some time to recover after a miscarriage. You may have some bleeding and discomfort for about a week. Depending on how far along you were in your pregnancy, you may feel bloated and your breasts could feel tender or may leak milk. These symptoms will lessen over time and should go away within a few weeks.

How do I recover from a miscarriage?

For many, emotional healing takes longer than physical healing. There is no “right” or “wrong” way to grieve. You may feel a wide range of emotions. Women often feel that the time right after the loss is the most upsetting. You may be in shock, feel numb or confused, and have difficulty fully taking in the events surrounding the loss. Feelings of depression—and even despair—may linger. These feelings are normal. During this time, you may feel isolated and misunderstood. Previously supportive friends and relatives may be uncomfortable talking about the baby or your pregnancy. You may feel some pressure from well-meaning people to “get better and get on with life.” But it is important to know that mourning can be a lifelong experience. You may feel a strong sense of grief at the anniversary of the loss, at the baby’s due date, and at other significant times. For this reason, some women find grief counseling or peer support groups to be helpful.

Self-care strategies:

- Give yourself time to grieve. Try not to set too many expectations for yourself too soon.
- Take good care of your body. Eat healthy foods and get plenty of rest.
- Light exercise, such as walking, is good. Slowly increase your activity as you start to feel better.
- Try to get back to work or your daily routine as soon as possible.
- Postpone making any major life decisions, such as moving or a job change.
- Try to spend some time with your partner. Your partner may also be grieving, but may be dealing with the loss in a different way.
- Discuss your feelings with family, friends, clergy, or a counselor. Consider joining a support group for grieving women who have had miscarriages.

How soon can I start trying to get pregnant again?

Make sure you are physically and emotionally ready before you try to get pregnant again. Although it is possible to get pregnant shortly after a miscarriage, you may be advised to wait at least two to three months to allow your uterus (and your emotions) time to heal. Talk to your medical professional about how long you should wait or what methods of birth control might be best for you.

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Additional resources

- Connect to our Web site at **kp.org** to access health and drug encyclopedias, interactive programs, health classes, and much more.
- Check your *Kaiser Permanente Healthwise Handbook*.
- Contact your Kaiser Permanente Health Education Center or Department for health information, programs, and other resources.
- If you are hit, hurt, or threatened by a partner or spouse, this can seriously affect your health. There is help. Call the National Domestic Violence Hotline at 1-800-799-7233 or connect to ndvh.org.

This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor.