

Pain and bleeding in early pregnancy

This information sheet aims to answer some commonly asked questions about pain and bleeding in early pregnancy.

IMPORTANT: This is general information only.
Ask your doctor or midwife about what care is right for you.

What are the causes of pain and bleeding in early pregnancy?

Pain and bleeding in early pregnancy are common, and it does not always mean that there is a problem. Many women who have pain and bleeding go on to have a healthy baby. However, it may be a sign that you are having a miscarriage or that there is a problem with your pregnancy. It is important that you see your GP or go to hospital whenever you have pain or bleeding in pregnancy so that you get the care you need.

What is a threatened miscarriage?

A threatened miscarriage is when you have vaginal bleeding but your pregnancy seems to be otherwise healthy. At first it can be hard to know if your pregnancy is continuing normally or if you are having a miscarriage. To help work this out, your care provider will ask you about your bleeding and pain and recommend some tests. Usually these will be:

- a vaginal examination
- a blood test for the pregnancy hormone HCG (usually at least two tests a few days apart)
- an ultrasound scan

What do the blood test results mean?

When you are pregnant, your body makes the pregnancy hormone HCG. When everything is going well, your HCG level goes up during the early weeks of your pregnancy, and then gradually goes down. If your blood test HCG levels are too low, going down, or not going up, you may have a pregnancy that is not progressing normally. More than one blood test is needed to see how the level is changing.

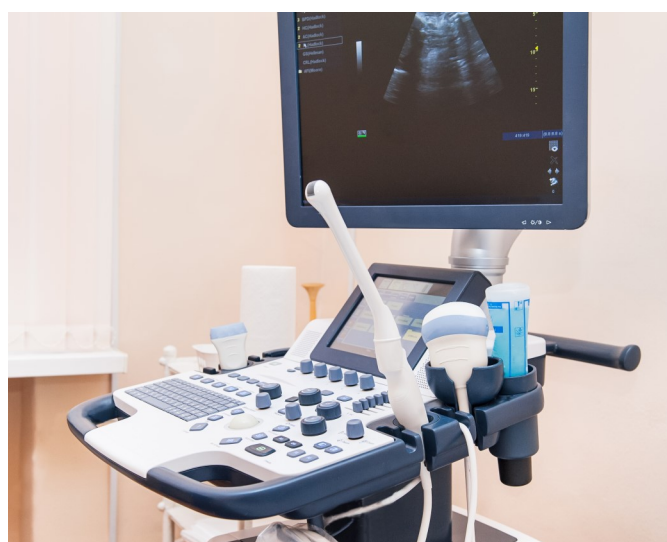
What can an ultrasound scan show?

An ultrasound scan shows a real-time picture of what is happening in your uterus and can help see if a miscarriage is likely to occur. The scan may also show that your baby is developing normally or that sadly, your baby has died, and that you are having a miscarriage. Sometimes, more than one scan is needed, especially early on.

If the ultrasound shows the pregnancy is developing outside of your uterus, this is called an ectopic pregnancy. You will need treatment for this. See our information *Ectopic pregnancy*.

How is an ultrasound scan done?

There are two ways to do an ultrasound scan in early pregnancy and both are safe for you and your baby. Either a small probe is placed into your vagina (transvaginal) or a probe is placed on the outside of your tummy (transabdominal). An ultrasound through the vagina gives a better picture in early pregnancy when the developing baby is very small and hard to see.



Ultrasound equipment including transvaginal and transabdominal ultrasound probes

What happens if you are having a miscarriage?

After going over your symptoms, your history and all your test results, your care provider may tell you that sadly there is no hope of continuing the pregnancy. What happens next depends on your individual circumstances. You can expect your care provider to discuss the following three options in more detail with you. They each have advantages and disadvantages.

Wait and see (expectant management)

This is when you wait and see if all the pregnancy passes out of your uterus by itself. Usually about a week later, you will have another blood test to make sure the HCG level is going down. You may need another ultrasound scan if your bleeding does not settle, or if your HCG level does not go down enough. You can change your mind at any time and have different treatment instead.

Taking medication (medical management)

This is when you take medication (misoprostol) to help pass the pregnancy. You will need more HCG blood tests and may need another ultrasound scan to make sure all of the pregnancy has passed out of your uterus.

An operation (surgical management)

This is when you have an operation in hospital to remove the pregnancy (sometimes called a D&C). You do not usually need any further tests or treatment after the operation.

How do you choose the right treatment?

If you are well, you don't have to decide what to do right away. You can wait and decide when you are ready. Sometimes one type of treatment is more suitable for you than another. It can depend on how many weeks pregnant you are, if you are well, if there is any infection, and if some of the pregnancy has already passed from your uterus. Talk to your care provider about your circumstances and what is right for you.

Are your feelings normal?

There is no 'right way' to feel about the loss of your baby. Every woman is different and you may feel tearful, very sad, angry, anxious or relieved. These feelings are normal. You can expect your care provider to talk to you about how you are feeling. Talking about your feelings (when you are ready) and getting extra support can help.

When can you get pregnant again?

Your care provider may suggest waiting about two weeks after a miscarriage before having sex. This is to prevent infection. Once you feel ready, there is no medical reason to wait before trying to get pregnant again. If you have had two or more miscarriages in a row, talk to your health care provider. They may recommend testing to see if there is any underlying reason for the miscarriages.

Support & Information

13HEALTH (13 432584) is a phone line that provides health information, referral and services to the public

Pregnancy, Birth & Baby 1800 882 436 (free call) offers free, confidential, professional information and counselling for women, their partners and families relating to issues of conception, pregnancy, birthing and postnatal care
www.pregnancybirthbaby.org.au

SANDS (1300 0 SANDS or 1300 072 637) offers support and information on miscarriage, stillbirth and neonatal and infant death
www.sandsqld.org.au

Bears of Hope (1300 112 327) offers support and care after the loss of a baby www.bearsofhope.org.au

Registry of Births, Deaths and Marriages and Divorce (Queensland) (1300 366 430) offers a free early pregnancy loss recognition certificate upon application www.qld.gov.au/law/births-deaths-marriages-and-divorces

Lifeline 13 11 14 Lifeline offers a telephone crisis support service to anyone www.lifeline.org.au

Queensland Clinical Guidelines: Access to the clinical guideline *Early pregnancy loss* aligned with this information, and other information sheets including *Ectopic pregnancy* www.health.qld.gov.au/qcg