When can I get pregnant again?
It is safe to consider trying to conceive once you have had one normal period. It is a good idea to take folic acid (to reduce the risk of spina bifida) for 3 months before becoming pregnant. If you get pregnant within three months of a miscarriage, you will need an ultrasound scan to accurately date your pregnancy.

What can I do if I am worried in future pregnancies?
You may like to have the reassurance of an early scan in a future pregnancy. You should wait until you are 8-10 weeks pregnant before having this scan to ensure that the pregnancy is of a sufficient size for us to see it clearly. It can take up to three periods for your cycle to become regular again, so if you become pregnant before this, there may be some uncertainty about your dates.

If you have any questions or worries you can contact:

Cork University Maternity Hospital:
Reception: 021 – 4920500
Emergency Room: 021 – 4920545
Bereavement & Loss Service: 021 – 4920500
Aislinn Suite: 021 – 4920550
4South ward: 021 – 4920688
Patient information leaflet for conservative management of miscarriage.

We are very sorry that you have had a miscarriage and we understand that you may have some questions and concerns. The aim of this leaflet is to provide you with information regarding conservative management of your miscarriage.

Miscarriage is a common event which occurs in approximately one in five pregnancies. In most cases, the reason for the miscarriage can be difficult to establish. Research has demonstrated that more than two thirds of pregnancies miscarry because there is an error in the genetic make-up of the pregnancy. For the vast majority of couples, there is no preventative action that could have been taken, by either partner, prior to losing the pregnancy.

What are the different options for treatment of miscarriage?
In the past, the majority of women who were diagnosed with a miscarriage in early pregnancy underwent a D & C (dilatation and curettage), which is also referred to as an ERPC (evacuation of retained products of conception). An ERPC is not always necessary and many women are now managed conservatively. This has proven to be safe for women. The risk of infection is similar with conservative, medical or surgical management (2-3%). Condom use during intercourse is recommended during your miscarriage to minimise the risks of infection.

What does conservative management involve?
Conservative management involves no further intervention. You may experience some bleeding and some pain over the next few days. There is no evidence that the risk of infection is increased with conservative management.

How do I know if I should return to hospital for assessment?
If the bleeding is excessively heavy (i.e. soaking more than one heavy pad every hour for more than two hours), it is advisable to attend hospital for assessment. You should also attend hospital if you develop severe abdominal pain which is not relieved by painkillers, a high temperature or if you feel very unwell. There is a small possibility that you may require treatment with antibiotics or an emergency operation if the pain and bleeding do not settle after you attend hospital.

What follow-up will I receive after conservative management?
In most cases, further follow up is not required. It is not necessary for you to make an appointment to see your GP or Obstetrician unless you are experiencing

- Heavy vaginal bleeding
- Offensive (smelly) discharge from your vagina
- Abdominal pain
- Concerns regarding future pregnancies
- Recurrent miscarriages (we may organise an appointment for the ‘Pregnancy loss clinic’)

Occasionally we may need to take some blood tests on the day of your ultrasound. These may need to be repeated a couple of days later. The purpose of these tests is to exclude an ectopic pregnancy (pregnancy outside of the womb). Sometimes we ask patients to perform a home pregnancy test 14 days after the bleeding stops and to call us at the Aislinn Suite if the test remains positive. The purpose of this test is to exclude abnormal pregnancy tissue or a pregnancy outside the womb. Patients should also contact the Aislinn Suite if bleeding persists longer than 2 weeks.

When can I return to work?
This is dependent on how you feel and can be different for everyone. Normal physical activities can be resumed once you feel that you are ready but it is not unusual to feel tired and emotional during the next few weeks. We can provide a letter for your employer as necessary.