

September 3, 2012

TODAYS HEALTH FOR THE EMPOWERED WOMAN

EARLY PREGNANCY LOSS

As an obstetrician, husband and father I have been dealing with issue of Miscarriage for over thirty years. There are so many misconceptions (pardon the pun), “wives’ tales” and mythology surrounding this that I felt it was time to clarify and educate. Miscarriage is defined as pregnancy loss before twenty weeks gestation. Normal pregnancy is forty weeks. Doctors use the term “spontaneous abortion” which should NOT be confused with the commonly used term “abortion” which means the voluntary termination of a pregnancy. 20% of pregnancies end in miscarriage and it is hard to find a woman who has not experienced this. It usually occurs before thirteen weeks of gestation and might even take place before a woman realizes that she is pregnant. Miscarriage can be caused by a number of factors but more often than not it is nature’s way of ending a pregnancy in which the fetus would not have survived. It can be genetic or caused by the woman’s own health problems. When genetic, an error occurs at fertilization resulting in an abnormal amount of chromosomes that happens by chance and results in an abnormal embryo or no embryo at all. This might be due to an abnormal sperm (there are 60 million per ejaculate) or abnormal egg(a woman is born with roughly 600,000). Most of these problems are not inherited and most woman will eventually go on to have a successful pregnancy. However, the chances of miscarriage do increase with the woman’s age. Health factors such as uterine infection and hormone factors can cause early miscarriage. Uncontrolled diabetes may present a higher risk for miscarriage also. If a woman is planning to conceive, proper attention to illness can improve the chances of a healthy pregnancy. Less frequently there are women with abnormalities of the uterus and/or cervix that can be corrected surgically. Pregnant woman who smoke, drink heavily and use illegal drugs increase the risk of miscarriage so lifestyle changes can help prevent miscarriage. On to the mythology: WHAT DOES NOT CAUSE MISCARRIAGE: most aspects of daily life including working, exercising, having sex, prior use of birth control pills, morning sickness, recent fall and fright. In most cases the embryo has died weeks before the miscarriage occurs. The most common sign of miscarriage is bleeding, however, in early pregnancy some spotting is common. If it continues a blood test to assess pregnancy hormone levels might be ordered as well as a sonogram that can help detect a normal embryo. When bleeding is heavy and accompanied by cramping it is almost certain that miscarriage is happening and a physical exam is necessary to see if the cervix is open and if placental and fetal tissue is being passed. Since it is difficult to determine if all the tissue has been passed frequently a dilatation and curettage (d and c) is performed to remove the remaining tissue. Done under anesthesia it rarely requires an overnight stay in the hospital. Doctor will recheck the patient in about two weeks but if the patient exhibits heavy bleeding, fever, chills, or severe pain before then she will be seen immediately. The doctor will advise when exercise and work may be resumed and advise that there might be breast milk for a while. If RH negative a shot of RH immune globulin is given to prevent antibodies affecting a future fetus. If a woman experiences multiple miscarriages in a row then there are tests to look for a cause beyond the usual error of fertilization that might include hormone studies, x-rays, etc. Despite the common occurrence of miscarriage, the emotional impact can be devastating. The sense of bonding between a woman and her fetus is strong and when this bond is

broken there can be intense grief. Headaches, loss of concentration, insomnia are common as well as the feeling "I will never be able to get pregnant again". One cannot blame oneself for miscarriage in most cases as noted above and again, most women who miscarry can have a healthy pregnancy at a later time. The emotional healing might be harder and counseling can help. It is well advised to allow enough time for physical and emotional healing before trying to get pregnant again.