

What Happens Now?

Practical advice and guidance following a late miscarriage ...



We are sorry that you have had a late miscarriage. The staff caring for you understand that this is a difficult time for you and want to help support you in making the decisions that are right for you, your baby and your family. If anything is unclear, please do not hesitate to ask a member of staff caring for you.

What is a late miscarriage?

Miscarriage is sadly common and around 1 in 5 pregnancies will end in a miscarriage. Most miscarriages happen in the first 13 weeks of pregnancy and are known as early or 1st trimester miscarriages (Miscarriage Association, 2016).

It is much less usual to have a miscarriage after this time, but 1-2% of pregnancies will end between 14 and 24 weeks and will be called a late or 2nd trimester miscarriage. A late miscarriage can be very distressing and may leave you feeling very shocked.

Why does a late miscarriage happen?

Several risk factors may increase the chance of a late miscarriage and mothers who are older, smoke or drink heavily in pregnancy or are overweight have a higher risk of having a miscarriage.

Maternal health conditions such as poorly controlled diabetes, thyroid problems and blood clotting disorders can also increase the chance and if there is more than one baby in the womb, a miscarriage is more likely.

Other factors that may play a part include developmental and genetic problems in the baby, certain infections, problems with the shape of the uterus (womb), fibroids, and a weak cervix. Sometimes a reason may be found to explain why a late miscarriage has occurred, but in a lot of cases, no underlying cause is found. Most couples who have a late miscarriage are likely to have a successful pregnancy in the future, particularly if test results are normal.

Following a late miscarriage, you will be offered tests ranging from simple blood tests and swabs, to investigations on the placenta (afterbirth), genetic testing on the baby and if you wish, a post-mortem examination. You can choose to have as many or as few tests as you wish. If you wish your baby to have a post-mortem examination, this will be performed at Manchester Children's Hospital and a specially trained midwife or doctor will discuss this with you during your stay.

What happens during a late miscarriage?

A miscarriage may happen naturally when the baby is born following pain, contractions, bleeding or the waters breaking and may happen very quickly at home or at the hospital. This is known as a spontaneous miscarriage.

During a 'missed' miscarriage, you may have had no idea that anything was wrong with the pregnancy and only find out during a routine scan that the baby has died. When this happens, you will be offered medication to start your labour and deliver your baby. This is a 2-stage process and if you decide to go ahead, you will be given a tablet called mifepristone, which works to block the pregnancy hormone progesterone, making the uterus more sensitive to the tablets used in the 2nd stage. After taking this medication, and a short period of observation, you will be encouraged to go home and will be asked to return 36-48 hours later to start the labour. If at any time after taking the mifepristone tablet you feel unwell, experience pains/ contractions/ vaginal discharge, persistent vomiting or diarrhoea we would encourage you to ring the ward for further advice.

Occasionally, after a missed miscarriage, the labour may start on its own.

Staff at the hospital will explain all the options available to you. Some families want to start the process of labour as soon as possible while others wish to go home to think about it and spend time discussing the options with family or friends.

What happens during my stay in hospital?

You will be cared for on the Labour ward at Calderdale Royal hospital. The staff caring for you and your family understand that this is a difficult time and are there to support and care for you and answer any questions that you may have. Family members and friends are welcome to visit you during your stay and your partner is welcome to stay, to support and comfort you. Facilities are available to make hot drinks and for someone to stay with you overnight. We have special cooling mattresses available which allow your baby to remain with you for the entirety of your stay.

When you are admitted onto the ward, a midwife will care for you throughout your stay and will explain what will happen next. If you are having your labour induced, you will have your observations taken and then prostaglandin tablets will be given to you every 4 hours until you have regular contractions and your baby is born.

Will I be able to have any pain relief?

We aim to keep you as comfortable as possible during your time in hospital and there will be a range of pain relief available for you from simple pain relief such as paracetamol and gas and air, to strong injections such as pethidine and diamorphine.

What do I need to bring into hospital with me?

It is difficult to predict how long your stay in hospital will be and will usually depend on your physical wellbeing and how you feel after the birth. Some families wish to go home a few hours after their baby is born while others prefer to be with their baby for a few days. We suggest that you bring an overnight bag with toiletries, nightie or pyjamas, a change of clothes and plenty of underwear and sanitary towels. You may wish to bring something to read, some light snacks and drinks and a camera or mobile phone if you want to take your own photographs of your baby. If you have any clothes, blankets or special items which you want to leave with your baby, you are encouraged to bring these, although we have lots of tiny clothes, hats and blankets which you are welcome to have.

After the Birth

Can I see/hold/touch my baby?

The staff caring for you will support you to see, touch and hold your baby if you want to and take mementoes for you to take home. These include taking hand and footprints and casts if appropriate, taking a lock of hair, a name card and bracelets and photographs will be taken on a memory card for you to take home. You are welcome to bring your own camera and photographs can be taken with you and family members. Your baby can be washed and dressed in any clothes that you bring and you may want to bring blankets/ teddies/ photographs and any other items which you wish to stay with them once you leave hospital. The time you have with your baby is very precious and you may stay with him or her for as long as you wish. We will provide you with a 'Memory Box' to put all your mementoes in and we have tiny clothes, Blankets of Love and knitwear which you are welcome to use and then take home with you. We aim to accommodate any other requests you may have about how your baby is cared for or any other mementoes you may wish to take.

If you do not wish to see or hold your baby, you will not be pressurised into doing so and the taking of any mementoes will be with your consent. If you think you may want photographs or mementoes in the future, these can be taken and stored in your hospital notes.

Can my baby be blessed?

The Chaplaincy staff are always available to offer comfort and support to you, regardless of whether you have a faith or not. You may wish your baby to be welcomed, named and /or blessed during your stay in the Hospital and this can be performed by the Hospital Chaplain or by your own Minister. For those of the Islamic faith we have Muslim Chaplains (male or female) who can support you at this time

Can I have a birth certificate for my Baby?

If your baby was born before 24 weeks of pregnancy and there were no signs of life at birth, there is no legal requirement for the baby's birth to be registered. The hospital staff will offer you a certificate with your baby's details on for you to keep. Occasionally, when a spontaneous miscarriage occurs late in the 2nd trimester of pregnancy, the baby may be born with a faint heart rate or other brief signs of life and in these cases, both the baby's birth and death will need to be registered at the Registry Office.

Can I hold a funeral for my baby?

Saying goodbye to your baby is an important part of acknowledging your loss and beginning to grieve, and attending a funeral can be part of this. All families who lose a baby at the time of birth are given the option of attending a 'hospital funeral', but you do not have to attend. Each funeral is for an individual baby and there is no charge for such funerals.

The hospital funeral includes the services of a funeral director who will help you decide whether to have a burial or cremation, and whether to use the support of a hospital chaplain. Funerals can be religious or non-religious in character (and are often somewhere between) and our chaplains will work closely with you to ensure the funeral expresses your wishes and beliefs. You are encouraged to choose your own music and readings or poems, and bringing along such things as pictures, teddies and flowers. If other children are in the family and are going to attend, you may wish to consider how to involve them. Our Muslim chaplains are experienced in supporting you with appropriate burial arrangements for Muslim babies.

Hospital funerals use Lockwood Cemetery, Huddersfield or Stoney Royd Cemetery, Halifax for burials. No decorative items are allowed on the grave, but there is the option to commission a plaque for your baby. Cremations take part at Parkwood Crematorium, Elland or Fixby Crematorium, Huddersfield.

Once you have decided on the right funeral for your baby, it usually takes place within 1-3 weeks, but this will depend on what investigations you have chosen. If a post-mortem examination is undertaken and you want to include tissue taken for testing in the funeral, this can delay the funeral process by up to 3 months.

If you do not wish to be involved in the funeral service, your baby will still be treated with the utmost of respect according to your wishes and faith.

Alternatively, you may wish to make private funeral arrangements for your baby and you will need to contact a funeral director and clergy of your choice who will instruct you further.

There is also the option of taking your baby home and arranging your own burial and further guidance can be sought on this from the hospital.

How will I feel physically after a late miscarriage?

Following the birth, you will have some degree of vaginal bleeding for between 2-6 weeks. In the early days, this bleeding can be quite heavy and be accompanied by some mild cramping, but this should become lighter after the first 3 or 4 days and be more like a period. It is advisable to use sanitary towels rather than tampons to reduce the risk of infection. If the bleeding becomes very heavy with clots, you experience a lot of abdominal pain or the discharge becomes offensive smelling, it is important that you contact your GP.

If you have had any stitches it is important to look after them and maintain good hygiene to prevent any infection. These may be uncomfortable for the first week and a mild painkiller should help. They usually dissolve in 4-6 weeks.

It is also important to try and look after yourself and your general wellbeing and although you may not feel like eating/ drinking, trying to have something little and often will help in your physical recovery. You may also possibly produce a small amount of breast milk in the days following the birth, especially if your baby was born after 24 weeks of pregnancy. You will be offered medication to reduce the possibility of this happening whilst you are in hospital and wearing a well-fitting bra and taking a mild painkiller will help you feel more comfortable until it resolves.

Will I have any follow-up?

Following discharge from the hospital, initial care should be provided by a community midwife who will offer you a postnatal visit. Telephone support will be provided by a bereavement midwife according to your needs and wishes and the Chaplaincy staff are available to support you if you wish. You will be given contact numbers and support leaflets on discharge from the hospital.

A follow-up appointment with a Consultant Obstetrician will be offered to you and usually takes place 8- 12 weeks after the birth of your baby. This will give you the opportunity to discuss what has happened, find out the results of any investigations performed and discuss future pregnancies. This appointment is optional. In cases where a post- mortem was performed, the follow-up may be delayed for as long as 12 weeks due to ongoing investigations and collaboration of results.

Is there any ongoing help after I go home?

Losing a baby is an experience that many will share, but everyone experiences grief differently. For some, expressions of grief will be overwhelming and public. For others it may be very private, but no less deeply felt. Feelings of shock, grief, depression, guilt, loss and anger are common. Grief may produce physical symptoms, as well as emotion ones, such as disturbed sleep, lack of appetite, nausea and palpitations. These are normal and may be eased by discussing them with your partner, friends, with a doctor or midwife, or with someone who can listen and understand. There is no time limit to the grieving process.

Support and advice can be sort from many sources, both online and via local groups. There are local SAND's groups in Halifax, Huddersfield and Wakefield which meet monthly and welcome new members. Both Talkthru and Insight offer individual and couples counselling following bereavement and are free for you to contact and access if you feel in need of further support. ARC, The Miscarriage Association and 4Louis offer online forums where you can make contact with other bereaved families.

There are also annual **Remembering Baby** Services arranged in collaboration with the Chaplaincy department and SANDs. Details can be obtained from the Chaplaincy Department who are always available to help and can provide support and guidance irrespective of your faith standpoint.

Contact Numbers

Bereavement Midwife	Tel: 07500761111
Screening Midwives	Tel: 01422 222123
Labour Ward	Tel: 01422 222129
Calderdale Royal Hospital Switchboard	Tel: 01422 357171
Huddersfield Royal Infirmary Switchboard	Tel: 01484 342000
General Office Calderdale	Tel: 01422 222088

Help and support

Hospital Chaplains/Imams Contact via HRI and CRH Switchboard
Tel: 01484 342000 or 01422 35717

Huddersfield Muslim Burial Council Tel: 07866 662222

SANDS (Stillborn and Neonatal Death Society) Huddersfield and Halifax Branch
Email: huddersfieldsands@yahoo.co.uk Tel: 07875246278

CHIBS (Calderdale Help in Bereavement Services) Tel: 0845 0099220
Email: info@chibs.co.uk

TalkThru Revenue Chambers, St Peters Street, Huddersfield, HD1 1DL
Email: office@talkthru.org.uk Tel: 01484 515137/07553367345
Web: www.talkthru.org.uk

Insight Healthcare Calderdale
15 - 17 Carlton Street, Halifax, West Yorkshire, HX1 2AL Tel: 0300 555 0191

Crisis Pregnancy Care Jubilee House, 5 St James Street, Halifax, HX1 5SU
Tel: 01422 357589 (office hours) Tel: 07527 375986 (8am -10pm every day)
Email: info@cpchalifax.org.uk Web: www.careconfidential.com

If you have any comments about this leaflet or the service you have received you can contact :

Sarah Hall, Bereavement Midwife
Calderdale Royal Hospital
Telephone No: 07500 761111

Sarah.hall@cht.nhs.uk

Or

Laura Douglas, Labour Ward Manager
Calderdale Royal Hospital
Telephone No: 01422 222947

Laura.douglas@cht.nhs.uk

www.cht.nhs.uk

If you would like this information in another format or language contact the above.

Potřebujete-li tyto informace v jiném formátu nebo jazyce, obraťte se prosím na výše uvedené oddělení

Jeżeli są Państwo zainteresowani otrzymaniem tych informacji w innym formacie lub wersji językowej, prosimy skontaktować się z nami, korzystając z ww. danych kontaktowych

ਬ ਤੁਸੀਂ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਵੇਰ ਪ੍ਰਾਚੁਪ ਜਾਂ ਭਾਸ਼ਾ ਵਿੱਚ ਲੈਣਾ ਚਾਹੁੰਦੇ ਹੋ, ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਉਪਰੋਕਤ ਵਿਭਾਗ ਵਿੱਚ ਸਾਡੇ ਨਾਲ ਸੰਪਰਕ ਕਰੋ।

اگر آپ کو یہ معلومات کسی اور فارمیٹ یا زبان میں درکار ہوں، تو براہ مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں۔

"إذا احتجت الحصول على هذه المعلومة بشكل مغاير أو مترجمة إلى لغة مختلفة فيرجى منك الاتصال بالقسم المذكور أعلاه"