Outpatient Surgical management of miscarriage under Local Anaesthesia (MVA)

We are sorry that you have lost your baby.

You have chosen to have a surgical management of miscarriage under local anaesthesia. This is a safe and effective method for treatment of miscarriage in the first trimester with a success rate of 98%.

This leaflet will explain what this means. You can choose to have this treatment if you have been diagnosed with

1. On scan the baby measures less than 9 weeks
2. Your miscarriage is on going with pregnancy tissue still present measuring less than 5cm
3. You have had medical management which wasn't successful

You can opt to have the procedure done by calling us on the numbers provided to arrange a suitable time. It is important that you have something light to eat before coming in for the procedure.

Before starting your treatment the nurses will take a blood test to ensure that you are not anaemic and to check your blood group in case you require anti D or blood transfusion. You will also be requested to provide a urine sample to test for Chlamydia. You will then be asked to give consent for the treatment.

Once you have signed the consent form you will be given Misoprostol pessary into the vagina. The misoprostol causes the cervix (neck of the uterus or womb) to soften. You may need to wait up to 2 hours before the procedure is performed.

A strong pain killer will be placed up inside the back passage before the procedure is started.

The procedure

The procedure lasts 10-15 min. It involves:

- Positioning you on the exam table in the same position used for a pelvic examination with your feet in stirrups while you are lying on your back.
- Inserting a speculum into the vagina.
- Cleaning the vagina and cervix with an antiseptic solution.
- Injecting a local anaesthetic in the cervix so that you do not feel any pain during the procedure.
- Inserting a small instrument into the cervix to slightly open (dilate) it, if necessary. If you are already bleeding this may not be needed.
- Passing a thin tube through the cervix into the uterus. A handheld syringe is attached and used to suck the tissue out of the uterus. As the uterine tissue is removed, the uterus will contract. Most women feel cramping during the procedure. The cramps willdecrease after

the tube is removed. Some women also have nausea, sweating, or feel faint, but generally symptoms are tolerable.
- An ultrasound will be performed at the end to check for completion.
- You will be observed in the recovery area for one hour or till you feel well enough to go home. You may get some period type cramping. You will be provided with pain relieving medication to take home.
- If your blood group is negative, Anti D injection will be administered before discharge.

The pregnancy tissue will be sent for histology examination.

If you would prefer the hospital to dispose of your pregnancy tissue for you, please discuss this with the staff who will make the appropriate arrangements for this to be done in a sensitive manner. We would strongly advise that you should have another adult to accompany you and that you do not travel home from hospital by public transport.

What to Expect after Surgery
Vacuum aspiration is a minor surgical procedure. You can expect:

1. Irregular bleeding or spotting for the first 2 weeks. Sometimes a bloody discharge can continue for up to 4 weeks. During the first week, avoid tampons and use only pads. If you are concerned about the amount of blood you are passing you should contact Ward 1
2. Each person feels pain differently so it is difficult to say how you will cope. You should expect to experience strong period type crampy lower abdominal and back pain. These can last from several hours to few days as uterus shrinks back non pregnant size. If your pain is not controlled with painkillers, do not hesitate to contact us.

3. You will be advised to do a urine pregnancy test in 2 weeks. Please contact GAU if the test is positive

After the procedure:
You will be asked to sign the miscarriage book which explains in details your options of what you would prefer to happen to the pregnancy tissue that has been removed during the procedure. This can be either taking the tissue home for your own personal burial or the hospital arranging a cremation for you.

When you go home we advise you to rest quietly for the day. You can do normal activities the following day, based on how you feel. Ibuprofen can help relieve cramping pain. Please do not take Ibuprofen if you are allergic to it. In some people asthma can worsen with Ibuprofen.

Please check with your doctor if you are not sure whether to take this medication or not. Do not have sexual intercourse for at least 1 week.

Side effects
Misoprostol may cause nausea and/or diarrhoea. Some women also get a short period of feeling hot and shivery

Complications
These are rare and occur in less than 1%. Call your doctor or Ward 1 immediately if you have **Severe bleeding**

- Severe bleeding can mean: Passing clots that are bigger than a golf ball, soaking more than 2 large pads in an hour, for more than 2 hours or bleeding heavily for 12 hours in a row.

Information for Patients

Signs of infection

- Prolonged abdominal pain, fever and/or smelly, greenish vaginal discharge or headache, muscle aches, dizziness, or a general feeling of illness and you should contact the GAU/Ward 1 for advice if this occurs.
- Severe pain in the abdomen that is not relieved by pain medicine, rest, or heat
- Vomiting lasting more than 4 to 6 hours
- Sudden abdominal swelling or rapid heart rate

Call your doctor for an appointment if you have had any of these symptoms after a MVA

- Bleeding (not spotting) for longer than 2 weeks
- New, unexplained symptoms that may be caused by medicines used in your treatment
- No menstrual period within 6 weeks after the procedure
- Signs and symptoms of depression

Contact details

BHH: EGU 43505/ 43506 (07.00 – 19.30)
BHH: Ward 1 Gynaecology 0121 424 2201(out of hours)

Useful Telephone No's:

Heartlands Hospital 0121 424 3506
Solihull Hospital 0121 424 5371
Good Hope Hospital 0121 424 7747

If you require this information in another format, such as a different language, large print, braille or audio version please ask a member of staff or email patientexperience@uhb.nhs.uk.