

The Team

The clinic is held at the Birmingham Women's Hospital. It is run by specialist midwife counsellor Ruth Kirchmeier and a team of specialist midwives.

They work in conjunction with Consultants in Fetal Medicine who have a special interest in the area of pregnancy loss and high risk pregnancy.

The direct telephone number for the clinic is
0121 627 2684

BIRMINGHAM MISCARRIAGE SUPPORT GROUP

"Miscarriage can be a very distressing, frightening and lonely experience. By acknowledging pregnancy loss, our aim is to relieve the loneliness and anxiety of all who are affected"

Come and join us for a cup of tea and chat in this comfortable, friendly support meeting.

**We meet on the first Tuesday
of every month from 7pm till 8.30pm
at the Education Resource Centre,
Birmingham Women's Hospital.**

See map on back page for directions

For more information about the
Miscarriage Association contact

Alison Simons on 077 343 56550

Email: alisonsimonsrn@aol.com

or visit

www.miscarriageassociation.org.uk

Charity registered No. 3779123

Pre-Pregnancy Counselling/ Pregnancy Loss Clinic

**Recurrent pregnancy loss
information leaflet**

**Birmingham Women's Health Care
NHS Trust**

Edgbaston, Birmingham B15 2TG

Telephone: 0121 472 1377

Fax: 0121 627 2602

WELCOME TO THE PRE-PREGNANCY COUNSELLING/PREGNANCY LOSS CLINIC

The purpose of this leaflet

The aim of this leaflet is to inform you about the Pre-Pregnancy Counselling/Pregnancy Loss Clinic, what will happen at your first visit and what investigations are performed.

How common is miscarriage and why did it happen?

Approximately 1 in 5 pregnancies end in miscarriage. It is a more common problem than most people imagine and can be a very distressing experience. It is most common for miscarriage to occur within the first twelve weeks of pregnancy, although a number of women will lose babies after this time. It is important to remember that after miscarriage, most women will go on to have a successful pregnancy.

There are many reasons why a miscarriage can occur. It is not uncommon to blame yourself and you may have feelings of guilt, but it is important to remember there was nothing you did which would have caused the miscarriage and nothing you could have done to prevent it. It may be nature's way of making sure that when you do have a baby, it has the best chance for life. It is human nature to try to find a reason and accepting that there may be no definite answers is often difficult for couples who have experienced miscarriage.

After recurrent miscarriages, many couples are left asking the question "why?" and often find it increasingly difficult to be philosophical about trying again.

COMMON CAUSES OF MISCARRIAGE

• Chromosomal problems

Chromosomes carry genetic information and when you conceive, the baby receives half its chromosomes from the mother and half from the father. In 3-5% of couples, one partner may have a chromosomal rearrangement. This means that they have the right number of chromosomes but they are arranged differently. This can be a cause of miscarriage and that is why it is important for both partners to have a blood test.

• Clotting disorders

Some blood clotting disorders may be associated with recurrent miscarriage. Throughout pregnancy, blood flow between mother and baby is very important and it is possible to detect specific antibodies, known as antiphospholipid antibodies, which can cause blood to become more sticky and clot more easily. This condition can cause clots to occur in the placenta and may result in the pregnancy miscarrying.

• Other causes of miscarriage

There are a number of other less common causes of miscarriage including:

- Cervical weakness - which can cause later miscarriages
- Uterine (womb) abnormalities - which can also cause later miscarriages
- Polycystic ovarian syndrome - where there are multiple small cysts on the ovaries. This can cause a delay in ovulation, which may lead to difficulties in conceiving or early miscarriage.

If appropriate, these will be discussed with you and it may be necessary to arrange further tests such as X-rays of the womb.

What happens next?

The results will be sent to you and your GP. However if any of the results are significant, you will be given an appointment with one of the Fetal Medicine Consultants, to discuss these further and make a plan of care for future pregnancies.

Support in subsequent pregnancy

The grief at the time of the pregnancy loss is openly acknowledged but the fear and anxiety experienced in a subsequent pregnancy is often underestimated. You will be given the direct telephone number of the midwives who run the clinic to contact in a future pregnancy. Knowing that there is support from a familiar person who knows your history and has time to listen can be reassuring and, together with ultrasound scans, can help to reduce your levels of anxiety.

Any questions?

You may have questions that you would like to ask or that are not answered in this leaflet. It may help you to write them down and bring them along to your appointment where we will be very happy to discuss them with you.