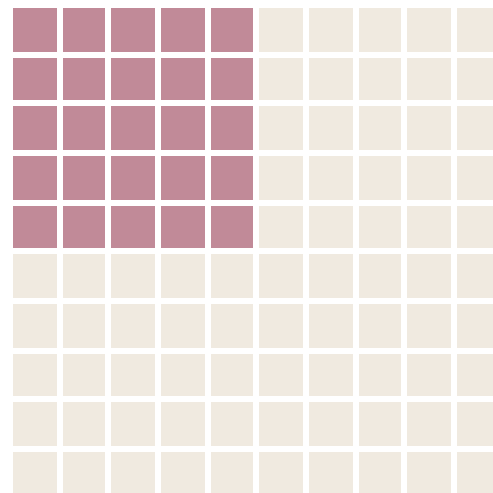


Bleeding in early pregnancy

Bleeding in the first few months

Bleeding early in pregnancy is common — it happens in up to a quarter of pregnancies. Most of the time the pregnancy continues normally.

It is still something we always check, because bleeding can also be the first sign of a miscarriage or of a pregnancy growing in the wrong place. So we will arrange an ultrasound and, sometimes, blood tests.



About **1 in 4** pregnancies bleed in the first three months. Most continue normally.

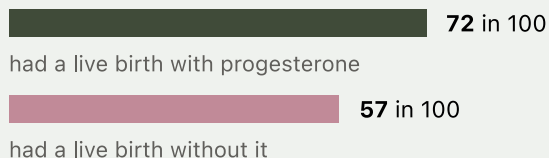
THIS IS AN EMERGENCY

If you are **bleeding heavily** — soaking a pad an hour or more — feeling faint, or have severe pain, particularly on one side or in your shoulder tip: go to your nearest **emergency department**. Let us know, but do not delay getting medical attention.

Progesterone — is it for me?

Progesterone is the hormone that supports a pregnancy in its early weeks. Giving extra progesterone has been tested in large, high-quality trials. For women who are bleeding *and* who have had a miscarriage before, it slightly improves the chance of taking a baby home. The more previous miscarriages, the bigger the benefit.

AMONG WOMEN WHO HAVE HAD THREE OR MORE MISCARRIAGES



For women who are bleeding but have never had a miscarriage, it made no difference at all. In that situation we won't offer it — not to withhold something from you, but because it wouldn't help.

We can only start it once a scan has confirmed the pregnancy is in the right place.

How to take it

Two 200 mg pessaries into the vagina, twice a day — that is 400 mg each time.

Insert as high as is comfortable, lying down, ideally at bedtime and again in the morning

Continue until you are 16 weeks pregnant

Wash your hands before and after

It is safe to use if you are having sex, though you may prefer to time it around that

A panty liner helps — the pessary base is waxy and some will leak out. That is normal, and does not mean it hasn't worked

SIDE EFFECTS

Vaginal discharge, mild drowsiness (another reason for the bedtime dose), breast tenderness, bloating. Nothing serious has been found in the trials, and there is no increase in birth defects.

COST

In Australia, progesterone is not subsidised for this use, so there is a cost. Feel free to ask us or the pharmacist what it will be before you fill the script.

Being honest about what it can and can't do

Progesterone shifts the odds a little in your favour. It does not guarantee anything, and it cannot rescue a pregnancy that has already stopped developing.

If you do miscarry while taking it, **it is not because you did something wrong, and it is not because the progesterone failed you.** The great majority of early miscarriages happen because of a chromosomal problem in the pregnancy that was there from the beginning and could not have been changed by anything you did or didn't do.

IF YOU ARE RH D NEGATIVE

You may need an injection called anti-D, depending on how much you are bleeding and how far along you are. We will work this out with you — just make sure we know your blood group.

WHAT TO EXPECT NEXT

We will arrange a repeat scan and tell you when. **Rest is fine, but bed rest doesn't help.** You do not need to stop your normal activities — exercise, work and sex do not cause miscarriage. Keep taking your pregnancy vitamin.

CALL US IF

The bleeding gets heavier, or you pass clots or tissue

You feel faint or dizzy

You have severe or one-sided pain, or shoulder tip pain

You develop a fever

You are worried, for any reason

Rooms 03 8400 6193

Urgent after hours 0459 706 061

If this pregnancy doesn't continue, we will make time to talk about it properly and about what happens next. Early loss is far more common than people realise, and support is available — please ask.

This sheet is general information and does not replace the advice given to you in person.