

WHAT DOES IT MEAN IF I AM BLEEDING DURING PREGNANCY?

Any bleeding in the first 20 weeks of pregnancy is considered a threatened miscarriage. Vaginal bleeding in early pregnancy is common, occurring in approximately 25% of all pregnancies – more than half of which will stop bleeding and go on to have a normal pregnancy. Sometimes a cause can be found for the bleeding, such as an infection or irritation of the cervix. It is still important to inform your doctor of your bleeding, but waiting until office hours is usually okay. Other symptoms that may concern you are low back pains and abdominal cramps. These may be early signs of a miscarriage but may also be normal pregnancy symptoms that are caused by the growing and stretching of the uterus. However, if the bleeding and cramping continue to grow worse or if you begin feeling lightheaded, weak, begin running a high fever and/or are experiencing chills, contact your doctor right away. If you begin bleeding heavily (saturating more than one menstrual pad an hour) or passing large clots or tissue, go to your nearest emergency room as these are signs of a miscarriage that may require urgent treatment.

What to do?

Unfortunately, most first trimester miscarriages cannot be prevented. Most are believed to be caused by fetal chromosomal abnormalities or by abnormal fetal development.

- In the past, bed rest was commonly prescribed; however, there is no evidence to support this treatment. Now we advise women to avoid strenuous activity until the bleeding subsides.
- "Pelvic Rest" which means avoiding anything in your vagina until the bleeding stops no douching, tampons, or intercourse. Sex may irritate the cervix or vagina, causing bleeding. Discuss with your doctor before you resume sexual activity.
- Avoid smoking, alcohol, or recreational drugs.
- Do not use any medications, including non-prescription medications, without medical advice. Acetaminophen (Tylenol) can be safely taken during pregnancy to help with the treatment of pain or fever. Do not take aspirin, ibuprofen (Advil or Motrin), or naproxen (Aleve) during your pregnancy unless prescribed by your doctor.
- Eat a normal, well-balanced diet and drink plenty of fluids; however, avoid carbonated or caffeinated beverages such as soda or coffee drinks.

If you present for treatment, you will be given a brief check-up to check the health of you and your baby. If you are past 12-14 weeks gestation, a hand-held Doppler may be used to listen to your baby's heartbeat. If you are earlier in your pregnancy or if they are unable to detect a heartbeat, your doctor may have an ultrasound done to check the baby's health and to rule out a tubal pregnancy. Your physician may also perform a pelvic exam to look at your cervix to see if it remains closed. While a closed cervix may be present early in a miscarriage, an open or dilated cervix indicates that a miscarriage is inevitable. They may draw blood to check a complete blood count (which screens for infections and shows loss of too much blood) and/or an HCG level (normal hormone released during pregnancy). A urinary specimen is commonly also done to check for a bladder infection. If you are actively bleeding, your doctor may suggest that they use a urinary catheter to collect this specimen, as bleeding and other vaginal secretions may give an inaccurate test result. If you are sent home after evaluation, it is important to follow up with your obstetrician or family doctor as they may want to repeat tests and continue to evaluate you.