

PUBLIC PETITIONS COMMITTEE CONSIDERATION OF PE1443 QUESTIONS ARISING FROM COMMITTEE MEETINGS

Response from the Miscarriage Association

Context

The Miscarriage Association is a UK charity with 30 years' experience in providing support and information to anyone affected by miscarriage, ectopic pregnancy or molar pregnancy. We do this through telephone, group and online support; up-to-date and accessible leaflets; an informative website; and through media work.

We also work with health professionals to support and promote good care; and with researchers to promote high quality research into the diagnosis, management, treatment and prevention of pregnancy loss.

We are thus in a good position to comment on this petition and are pleased to have been invited to do so.

The petition

Calling on the Scottish Parliament to urge the Scottish Government to offer all women, who have suffered miscarriage, investigations following one loss through miscarriage and to review NHS Scotland's policy on the investigation and treatment of couples who experience miscarriage to help relieve the anxiety and distress to women caused by the current guidelines.

The Miscarriage Association's response

In brief:

The Miscarriage Association does not support this petition in full, though we have sympathy with its aims. We are in favour of offering investigations after two consecutive miscarriages as standard, or earlier if circumstances warrant, and of the provision of supportive care.

In more detail:

Miscarriage, the spontaneous end of a pregnancy before 24 weeks' gestation, is sadly common, with an estimated incidence of 15 to 25%, depending on how pregnancy is

defined (a home pregnancy test can show positive on the day of a missed or expected period).

However early miscarriage occurs, it can cause considerable distress, representing for many if not most women and couples the loss of their baby and all their associated hopes and plans. Feelings of loss and grief are common, along with anxiety about what might happen in a further pregnancy. Sensitive and supportive care, along with clear information, is crucial both during and after the miscarriage and in a further pregnancy.

It is understandable that most women who miscarry want to know why it happened. They seek an explanation (*Why did it happen? Why me?*) and identification of a clear cause, in the belief that this will lead to treatment or advice that will prevent a further loss. In reality, however, this expectation of investigation = diagnosis = treatment = prevention is unlikely to be met, for a number of reasons:

- The key risk factors for miscarriage are maternal age and pregnancy history, which are already evident and, of course, fixed.
- There is good evidence that at least half of all early (first trimester) miscarriages are due to random or chance chromosomal abnormalities, which cannot be treated/prevented.
- The chances of identifying a cause or underlying problem following one miscarriage are very small relative to the number of cases; they do, however, increase after two miscarriages or after a second trimester loss.
- Most women who miscarry for the first time go on to have a healthy pregnancy without specific treatment or investigations

<u>The Miscarriage Association</u> would recommend the following policy and practice:

- Offer investigations after two consecutive miscarriages as standard
- Offer investigations earlier if circumstances warrant, e.g.:
 - Second trimester loss
 - Late first trimester loss of a chromosomally normal fetus/baby
 - Advancing maternal age and/or sub-fertility (where waiting for another pregnancy will significantly affect miscarriage risk)
- Provide clear information and advice after the first miscarriage, regarding:
 - o Possible causes, especially random chromosome abnormalities
 - The chance of a healthy subsequent pregnancy vs the risk of recurrence
 - The reality of the outcome of investigations: the chance of identifying a problem, evidence-based treatment etc
 - o Advice re trying again, pre-conception care, diet etc
- Provide clear information for patients to take home, in accessible formats (print, recorded, online, translated¹)
- Offer follow-up and/or support or counselling:
 - A follow-up visit with a member of the medical team who is aware of the miscarriage and/or has read the notes
 - o Support or counselling on site, if needed and available
 - o Signposting to other support services: the Miscarriage Association, SCIM etc
 - Supportive care in the next pregnancy

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¹ The Miscarriage Association's leaflets are available to download free of charge from http://www.miscarriageassociation.org.uk/information/leaflets/. Printed copies can be ordered in bulk.