

## Medication-induced miscarriage for a non-vital pregnancy

### **When is treatment with medication a suitable choice?**

Up to 49 days (7 weeks) after the first day of a woman's last menstruation, a medication-induced miscarriage with a non-vital pregnancy (at home) remains a good option, and it is nearly always successful. Between 7 to 9 weeks post-menstruation, this treatment carries a greater risk of excessive blood loss and pain. After 9 weeks, the treatment is usually performed at the hospital.

### **What medication will I receive?**

Cytotec®: causes the uterus to contract. These uterine contractions expel the foetal tissue. The medication is introduced vaginally (rather than orally) because this method is more effective and has fewer side effects.

### **What are the advantages of medication?**

No surgical procedure is required and you can have the treatment within your own home.

### **What are the disadvantages?**

- Side effects of the medication include: abdominal pain, diarrhoea, nausea, vomiting, chills, fever, headache and (in rare cases) dizziness.
- Women often experience more severe bleeding and pain after this treatment than they do with a suction curettage.
- If the medication treatment fails, however, curettage may still be

necessary. Failure occurs in approximately 10% of treatments.

### **What does the treatment involve?**

Staff in the Gynaecology department will provide you with 4 Cytotec tablets to bring home. Once home, you will insert all 4 Cytotec tablets deep into your vagina. Within 2 to 6 hours of inserting these vaginal tablets, you will typically develop cramps and vaginal bleeding. This bleeding can be severe, like a heavy menstruation or even heavier. The miscarriage usually occurs within several hours, after which the pain symptoms will diminish. The blood loss will also decrease, but you may still have irregular blood loss for up to 2 weeks after the treatment.

### **Pain relief**

For pain relief, you can take Ibuprofen, Naproxen or Diclofenac. These medications may be combined with paracetamol.

### **How will I know if the treatment has been successful?**

The foetus will be passed with the vaginal bleeding. Depending on the gestation period, you might be able to see a small pregnancy sac or a membrane with flakes. In most cases, however, you will not be able to tell whether the pregnancy has been terminated by examining the expelled blood clots.

A pregnancy test can remain positive for a long time (weeks!). Therefore, a pregnancy test is not an effective

method for verifying whether the treatment was successful.

### **When will a check-up be scheduled?**

A check-up is always scheduled for 1 week after the treatment. An ultrasound is performed to determine whether the pregnancy has been terminated. If there is considerable remaining intrauterine tissue, women are typically given a second medication or they may undergo a suction curettage.

### **Do not do the following**

After undergoing this treatment, a woman's cervix will stay open for some time. Therefore, for the first 2 weeks after the treatment, the following are not allowed:

- using a tampon
- intercourse
- swimming

### **Menstruation**

Your next menstrual period should return between 4 to 6 weeks after the treatment, sometimes later.

### **When should I call the hospital?**

- If you have prolonged bleeding, for more than 5 hours, that is heavier than a menstruation.
- If nothing has happened after 24 hours.
- If you have other complaints or questions.

### **Telephone numbers:**

- Daytime Outpatient clinic  
Gynaecology: + 31 (0)20 - 755 7019.
- After hours, you can contact the Nursing department at: +31 (0)20 - 755 7104.
- Or use the hospital's main telephone number: +31 (0)20 - 755 7000.

### **Notes on this leaflet**

If any information in this leaflet is unclear or incomplete, please notify us. You can share your remarks with us via [voorlichting@zha.nl](mailto:voorlichting@zha.nl).