



Medical management of early pregnancy loss

What is Misoprostol?

Misoprostol is a type of prostaglandin hormone. One of its effects is to cause the uterus (womb) to contract. Studies have shown that Misoprostol can be used safely and effectively for the treatment of early pregnancy loss. This treatment is not the morning after pill.

The hormone induces contractions that open the cervix (neck of the womb). The pregnancy tissue can then pass from the uterus without the need for surgery.

Misoprostol therapy is suitable when:

- Your pregnancy is not going to continue and,
- Your pregnancy gestation is less than 12 weeks.

Misoprostol therapy is not suitable when there is:

- Heavy vaginal bleeding
- Strong abdominal cramps and pains
- History of allergy to Misoprostol or prostaglandins
- Possibility of an ectopic pregnancy (pregnancy implanted outside the uterus)
- Signs of pelvic infection

Advantages of Misoprostol

Misoprostol offers an effective alternative to surgery as a treatment for early pregnancy loss. Surgery has its own risks, including those associated with having a general anaesthetic.

The treatment is given in the Emergency Centre or Early Pregnancy Assessment Service (EPAS) without admission to hospital.

Treatment

Day 1

1. You will be given four (4) tablets to be placed under the tongue or between the gum and cheek.
2. You will be able to go home soon after and you will be provided with a script for pain relief tablets.
3. A phone call will be arranged in one week to discuss your symptoms and whether the medication has worked.
4. If you have not had any significant pain or bleeding in this time period, further options will be discussed with you.
5. This may include waiting a few more days or returning for an assessment and further treatment.



Day 7

You will receive a follow-up phone call from the Early Pregnancy Assessment Service.

Calls are made between 8.30am and 12.30pm from an unlisted/private number.

Day 14 - 21

You will receive a follow-up phone call from EPAS. Depending on what your symptoms are, you may require further assessment and treatment, and an appointment for this will be arranged.

If you decide to have a second dose of Misoprostol:

- A phone call will be arranged one week later to discuss your symptoms and further treatment options.
- Treatment and follow-up for a second dose of Misoprostol are the same as the first dose, with the option to attend for review if requested.

After treatment

1. It is common for bleeding to occur for two weeks after successful Misoprostol treatment.
2. You need to perform a urine pregnancy test at home two weeks after your treatment and contact the Emergency Centre if the test is positive or if you have ongoing abnormal bleeding.
3. We recommend you see your GP to discuss your health and any other issues after completing this treatment.

What can be expected when using Misoprostol

- You may experience strong abdominal pains as your uterus contracts. Taking the prescribed pain relief tablets should relieve these. Hot packs may also be useful.
- You may experience heavy vaginal bleeding. If your pad is soaked within 30 minutes you must return to the Emergency Centre.
- Common Misoprostol side-effects may include fever, nausea, vomiting, or diarrhoea. These are usually self-limiting and last a few hours.

When should I seek help or return to the Emergency Centre?

- If you have a large amount of vaginal blood loss, generally a blood-soaked pad every 30 minutes or sooner.
- If you have pain not controlled with tablets and hot packs.
- If you are concerned or worried.
- Rarely, the bleeding or pain may be significant enough to require admission to hospital or surgery.

Phone (08) 6458 1431 and speak to staff in the Emergency Centre.



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