

# Introduction to Miscarriage for Refugee Women

**Slide 1:** Hello. My name is Dr. Goliaei, and I am here today to talk about pregnancy loss and miscarriage.

**Slide 2:** First, I would like to thank my co-contributors, the California Refugee Reproductive Health Network or ReproNet, and the Patient-Centered Outcomes Research Institute. ReproNet was founded in 2019 to strengthen refugee academic-community partnerships and engage in dialogue with refugee communities about their experiences and preferences for sexual and reproductive health and well-woman care. This network includes researchers, refugee women, and health and social services providers who serve refugees. I have no disclosures. Let's get started.

**Slide 3:** Losing a baby before or during delivery is an unfortunate experience for most parents. A spontaneous pregnancy loss before completing 20 weeks of pregnancy is known as miscarriage. Sometimes you may hear another term which is early pregnancy loss. Early pregnancy loss is a miscarriage that specifically happens in less than 13 weeks of pregnancy. The first fact that I want to emphasize here is miscarriage does not mean that carrying the fetus was problematic; most of the time, Pregnancy loss and miscarriage happen when not everything is in the place for the development of a healthy baby, for example, most of the time the embryo is unviable and had not developed properly. This could mean miscarriage is the natural way of preventing the birth of babies with multiple malformities or genetic disorders. So, **Fact 1: Miscarriage is often the result of genetic malformations and not because the mother couldn't carry the fetus.**

**Slide 4:** Pregnancy may also terminate any time after the full 20 weeks of pregnancy until delivery. This termination of the pregnancy is known as Stillbirth. Stillbirth can happen in about 1 in 160 births. The cause of stillbirth is mostly unexplained and can happen before delivery or during the labor. A typical sign of stillbirth is a decrease in the baby's movement.

So: **Call your doctor immediately if you notice your baby moving less than usual.**

**Slide 5:** Miscarriage is the most common form of pregnancy loss and can happen in all families with any level of education, ethnicity, culture, religion, or income. Early pregnancy loss is common. In the United States, data indicated that miscarriage is as common that 10 of 100 known pregnancies could terminate due to a miscarriage. So, this number could be much higher. Remember, most of the time, a miscarriage could happen even before the mom realizes she is pregnant. So: **Fact 3: Miscarriage can happen in all families.**

**Slide 6:** Why does miscarriage happen? At the beginning of this session, I emphasized that the miscarriage could be nature's way of decreasing the chance of the birth of unviable embryos. Pregnant women who lost their babies always look back to find what they did wrong that may cause the miscarriage. But miscarriage almost always is not the mom's fault. And I am emphasizing here that routine activities like picking up your older kids, working around the house, exercising, having sexual intercourse, or pregnancy's morning sickness usually does not cause a miscarriage. There are some risk factors that may increase the risk of miscarriage (Remember, they are not the cause, but they can increase the risk): One of these risk factors is mother's age. As mother gets older than 40 years, it may increase their risk of miscarriage.

Other risk factors could be certain medical conditions in the mother, such as [diabetes](#) or [thyroid disease](#), certain types of infection, and some abnormalities in the uterus or cervix also could increase risk of miscarriages. Also, smoking and using a lot of alcohol or drugs can increase the risk of miscarriage. **So, Fact 4: Miscarriage almost always is not the mom's fault.**

**Slide 7:** Most scientific studies indicated that taking birth control pills before pregnancy does not cause an early pregnancy loss. If you are using IUD for contraception, there is no reported association with increasing miscarriage in the future pregnancies after the safe removal of IUD. However, if you are on IUD to prevent pregnancy and you become pregnant, that unplanned pregnancy may be terminated by miscarriage. **So, Fact 5: If you experienced a miscarriage and took oral contraceptives before conceiving, that was not the cause.**

**Slide 8:** What are some signs and symptoms of miscarriage? Miscarriage may have different signs and symptoms. If it happens at a very early stage that the mother wasn't aware of the pregnancy, it may not have any significant symptoms. If a miscarriage happens to a pregnant woman, she experiences any of these symptoms: Mild to heavy vaginal bleeding, Severe cramps or belly pain, Worsening or severe back pain, Fever, along with any of the other above symptoms, passing tissue that looks like blood clots from the vagina. **So, Fact 6: If you have these symptoms, contact your doctor immediately, and they'll tell you to go to the office or an emergency room.**

**Slide 9:** Depending on what happened during the miscarriage, a pregnant mom may need medical or surgical treatments. If an incomplete miscarriage happens, which means the mother passes some parts of tissues and placental materials, but some remain in her body, then there is up to the doctor to decide on the next step:

1. If the mother does not show signs of an infection, one option is to wait and let the tissue pass naturally.
2. Prescription of oral medication that helps expel the tissue.
3. Surgery is recommended when there is a sign of infection, heavy bleeding, or other medical conditions.
4. Surgery could be in the form of using a vacuum procedure or dilation and curettage (D&C). Which is the procedure in which the doctor uses the cervical entrance to the uterus and removes the tissue from the inside of the uterus.

**Slide 10:** When to have next baby? As we discussed, early pregnancy loss or miscarriage is a one-time event related to that embryo's chromosomal challenges. So, repeated pregnancy losses are usually rare. Testing and evaluation can be done to find a cause if you have several pregnancy losses. Even if no cause is found, most couples will go on to have successful pregnancy after miscarriage. However, many healthcare providers encourage women to wait at least a few months so they can strengthen their bodies and increase the chance of next healthy pregnancies. **Fact 7: Repeated pregnancy losses are usually rare?**

**Slide 11:** How to recover from miscarriage? As I mentioned at the beginning, pregnancy loss is painful for all the family members, especially for the pregnant mom. You may feel sad and depressed because your body experiences dramatic hormonal changes. The most important matter after a pregnancy loss for the mom is:

- Take care of your mental and emotional health:
- It is okay to be sad after pregnancy loss.
- Do not blame yourself.
- Ask for help.
- Talk to your doctor and ask for professional counseling.
- Join in person or online support group.
- Talk to your husband, close family members, or friends that you can rely on their support.
- Store any baby's belonging that may remind you of what happened.
- Take care of your physical health:
- Avoid sexual intercourse for 1–2 weeks after a miscarriage.
- Eat well and get rest and let your body recover.

**Fact 8: It is okay to be sad after pregnancy loss, but do not blame yourself.**

**Slide 12:** What can we do to prevent early pregnancy loss? Remember, most miscarriages are one-time event and are not related to future pregnancies loss or are not preventable. However, sometimes we cannot prevent early pregnancy loss. Women can support their future healthy pregnancy by:

- Regular prenatal care
- Healthy and well-balanced diet.
- Weight control before and during pregnancy.
- Taking prenatal vitamins
- Avoid smoking, alcohol, and using drugs while pregnant.

**Slide 13:** Here is a quick review of what we learned today:

**Fact 1: Miscarriage is often the result of genetic malformations and not because the mother couldn't carry the fetus.**

**Fact 2: Call your doctor immediately if your baby is moving less than usual.**

**Fact 3: Miscarriage can happen in all families.**

**Fact 4: Miscarriage almost always is not the mom's fault.**

**Fact 5: If you experienced a miscarriage and took oral contraceptives before conceiving, that was not the cause.**

**Fact 6: If you have these symptoms, contact your doctor immediately, and they'll tell you to go to the office or an emergency room.**

**Fact 7: Repeated pregnancy losses are usually rare.**

**Fact 8: It is okay to be sad after pregnancy loss, but do not blame yourself and ask for help.**

**Slide 14:** We are at the end of this session, please let me know if you have any questions.

**Slide 15:** To review what we discussed, I have three questions for audiences, please think about each of these statement that I am reading now and let me know if the statement is true or false?

First question: If I have a miscarriage, I am not able to have another healthy baby after that. Is this true or false? What do you think?

False. As I mentioned before miscarriages most of the time are a one-time event and do not impact future pregnancies. Repeated miscarriages usually are rare.

Second question:

I did something wrong, and it is my fault that I lost my baby.

Is this true or false? What do you think?

False. As I mentioned before Most of the time the cause is unknown and is related to something not well-developed. And an embryo itself is not viable. It is not the mom's fault.

And this as a third question: True or false:

It is okay to feel sad after a miscarriage.

True, as we discussed miscarriage most of the time is a sad experience for the mom and for the family. Mom specially experiences hormonal change that could impacts her emotional health too. It is okay to be sad and ask for help.

**Slide 16:** If you have any questions or need more resources, please contact us through the ReproNet Facebook page, or ReproNet email address or you can ask your caseworker to contact us for more resources.

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