How can I help reduce Healthcare Associated Infections?
Infection control is important to the wellbeing of our patients, and for that reason we have infection control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. We ask that you, and anyone visiting you, use the hand sanitiser available at the main entrance of the hospital and at the entrance to every clinical area before coming into and after leaving the clinical area or hospital. In some situations hands may need to be washed at the sink using soap and water rather than using the hand sanitiser. Staff will let you know if this is the case.

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If you require a translation of this leaflet please contact the Early Pregnancy Unit
We understand that you are concerned about bleeding in early pregnancy and this information is to help you understand possible causes.

**Why am I bleeding?**
Vaginal bleeding in the early stages of pregnancy is not uncommon, and does not always mean that there is a problem. Bleeding, however, can be a warning sign of miscarriage, ectopic pregnancy and, rarely, a molar pregnancy.

The bleeding can occur at any time after a missed period and is often noticed when going to the toilet as a smear of pink, brown or red loss on the toilet paper. The blood loss varies from person to person from spotting to a gush with clots. The bleeding might be continuous or may be on and off, perhaps over days or weeks.

A threatened miscarriage is an ongoing pregnancy associated with vaginal bleeding with or without abdominal pain.

**What are the causes?**
It is not always possible to give an explanation as to why this occurs and in most cases the pregnancy continues safely.

Some likely causes may be:

- **The implantation site** – when the placenta tries to ‘burrow’ into the endometrium (lining of the womb), it may cause some blood vessels to bleed.

- **The cervix (neck of the womb)** – during pregnancy the tissues become rich in blood supply and softer, as a result any slight injury may provoke bleeding.

- **The vagina** – Thrush or any other infection may cause bleeding from the inflamed tissues in the form of spotting.

An ultrasound scan carried out after 6-7 weeks can tell if the pregnancy is progressing normally. After 6 weeks of pregnancy the scan should be able to visualize a tiny baby with a heartbeat, particularly if it is a trans-vaginal (internal) scan.

Sometimes the scan may demonstrate a small haematoma (blood clot) around the pregnancy sac, which identifies the source of the bleeding, however more often nothing abnormal is detected.

The presence of a baby’s heartbeat on ultrasound is reassuring; there is an 85–97% chance of your pregnancy continuing.

**Do I need follow-up care?**
If a collection of blood around the pregnancy sac is seen on ultrasound you will be advised that you may experience further bleeding. A re-scan may be suggested in 1–2 weeks for further assessment; sometimes the area of bleed will be absorbed into the lining of the womb with no further bleeding experienced. You may experience some vaginal bleeding, but if it becomes heavy with clots, please attend the Accident & Emergency Department or contact the EPU clinic during opening hours when you will be assessed.

Often there is no recognizable cause for the bleeding, and the symptoms settle without further problems. You may, however contact the clinic or the out-of-hours service if you have further anxieties.

**What should I do?**
Although bed rest was routinely advised in the past for threatened miscarriage it has since been recognized that this will not affect your pregnancy outcome. There is no treatment to prevent or stop the bleeding.

Depending upon the type of employment you have, you may wish to take some time off work whilst you are actively bleeding, especially if it is more than just spotting. If you need a fitness for work certificate, your GP will be able to issue you with one.

Sexual intercourse during pregnancy does not cause any known adverse outcomes, however you may wish to avoid sex until the bleeding has stopped.

Do not use tampons; use sanitary towels or panty liners instead. You will be able to assess the amount of bleeding more readily and reduce the risk of infection.

You may want to refrain from exercise/swimming until the loss has completely settled.

**Sources of information**
Miscarriage Association
17 Wentworth Terrace, Wakefield, West Yorkshire WF1 3QW
Helpline: 01924 200799 Web: www.miscarriageassociation.org.uk

**Useful contact numbers**
Wycombe Hospital
EPU Clinic 0800–1300 Monday–Friday (01494) 425553

Stoke Mandeville Hospital
EPU Clinic 0800–1300 Monday–Friday (01296) 316469

**Out of hours:** Ward 16 (01296) 418111 or Ward 15 SAU (Surgical Assessment Unit) (01296) 316500/316365