Pregnancy after loss
Pregnancy after miscarriage, ectopic or molar pregnancy can be a very difficult time.

For many people who have experienced pregnancy loss, finding out they are pregnant again can bring with it a mixture of hope and fear, along with a range of other feelings.

You may feel cautiously optimistic or overwhelmingly worried, almost waiting for things to go wrong. And you may find that you move back and forth - sometimes positive, sometimes very anxious, and sometimes determinedly putting the pregnancy out of your mind.

Being pregnant again can be comforting, easing feelings of loss. But you might also feel guilty or worried about forgetting your last pregnancy.

All of these emotions are normal and understandable given what you have been through. In fact, it would be unusual if you didn’t feel anxious or unhappy at least some of the time. Even so, it can be difficult living with these feelings.

We hope that this leaflet will help.

“We saw the two lines... then almost immediately the anxiety crept in. Anxiety like I’d never known before. It was then I realised that anyone affected by miscarriage has the rosy view of pregnancy stolen forever. Gone is that innocent belief that two lines equals a baby.”
Dealing with difficult feelings

We all feel stressed and anxious at times. And we know from what women tell us that this is particularly likely when you are pregnant after a previous loss.

You may worry every time you feel a twinge of pain in your stomach, or feel something different from your previous pregnancy. You may worry every time you go to the toilet, checking your underwear and the toilet paper each time for any signs of bleeding.

There may be times which are particularly difficult, such as when you’re getting near to the stage when your last pregnancy was lost. It might also be stressful before a scan or during the time between scans.

Even when you get past the point of your previous loss or losses, you may still find it difficult to be optimistic, perhaps especially if you have had more than one loss.

You might also have other negative and stressful feelings that are difficult to live with. On top of that, you may worry that being anxious will harm your pregnancy in some way. In fact, there is no proof that stress on its own actually causes miscarriage.

We realise that you may wish you weren’t feeling stressed, but it may be best to accept that it’s normal, and do your best to look after yourself. And although all of these difficult feelings can be upsetting, this doesn’t mean you have to bear them alone.

“At 20 weeks we had a great scan. But it’s STILL hard. My lack of confidence in my body and its ability to make babies makes me worry about late losses and stillbirths.”
**Talking can help**

Many people we talk to tell us that talking to others is a key source of support.

**Talking to family and friends**

You might feel reluctant to tell people you are pregnant, especially in those first few weeks, just in case things go wrong and you have to ‘un-tell’ them.

On the other hand, you might find it helps to tell a few chosen people – perhaps those who were supportive after your loss and are likely to be supportive now too.

**Talking to colleagues**

You may want to think about telling your manager and maybe a colleague or colleagues that you are pregnant.

It means you’ll be entitled to paid time off for antenatal appointments, and you may want to take advantage of these as soon as possible. Your manager and close colleagues may also offer extra support and understanding.

On the other hand, you may have good reasons for not telling anyone at work. You may well have to tell them at some point but for now, you’d find it more stressful than helpful. Do what feels right for you.

Our leaflet *Miscarriage and the workplace* has useful information for employees and employers.

*“I think it is important to be open with people because if you wait for the 12 week scan, it can feel really isolating.”*
Talking to others who have been through pregnancy loss ...
It can be very helpful to talk to other people who have been through pregnancy after loss and are likely to understand many of your feelings. If you don’t know anyone yourself you can:

• Talk to one of our telephone support volunteers or go along to a support group
• Join our online support forum which has a Pregnancy after Loss section
• Join our private Pregnant after Loss Facebook group

... or just reading their stories
It can be very comforting to know that other people who have gone through pregnancy after loss have had similar thoughts and feelings to yours. Everyone’s experience is different, of course, so some may be more helpful than others.

You might find that some of the things they found helpful at the time are useful for you too.

You can read other people’s stories and experiences:

• In the stories section of our website (use ‘browse by topic’ to find stories about pregnancy after loss)
• On the Pregnancy after Loss section of our forum, where you can read other people’s posts even if you’d rather not post anything yourself.

Excerpt from the forum, Pregnancy after Loss section

Ellie 321
I am now 8 weeks pregnant and I am in a terrible state today. I just have this horrible feeling that I have lost the baby.

NottsJLB
I’m sorry you’re having such a tough day. It’s so difficult being pregnant after miscarriage. I was a complete wreck from week 8-13, convinced it had all gone wrong.

When online I would be surrounded by women who understood, and I didn’t feel so lonely.
**Difficulties talking to others**

If you are feeling anxious or negative about your pregnancy, you may find it difficult to cope with people who expect you to be happy and positive.

It may help to share this leaflet with them, so they can understand better what a tough time this can be.

You may also find it hard if other pregnant women worry or complain about sickness, weight gain or stretch marks. These might be the very things you’re hoping for, or they may just seem trivial compared with your anxieties.

You may need to find some way of switching off, or just keep your distance for a while.

“**A wedge has developed with some friends. I keep reminding myself that they just don’t understand and to try not to be too hard on them.**”

**Talking to your partner**

“We were in no way prepared for my emotional outbursts. On two occasions I thought it would end our marriage.”

Your experience of pregnancy loss may have brought you and your partner closer or it might have put your relationship under strain.

You may feel differently about this pregnancy. Perhaps one of you was more worried than the other about trying again, or one of you is feeling more optimistic than the other this time. You may hide your real feelings to protect your partner and that can be stressful in itself.

If you can find a way to talk to each other about how you are feeling, it may help you support each other.

If you feel you need help with this, you may want to look for some support or counselling, for example through the charity Relate (see page 15). You may also find our *Partners Too* leaflet helpful.
Talking to health professionals
The health professionals involved in your care can be a good source of support throughout your pregnancy. You might find it helpful to talk to your GP, midwife or early pregnancy staff if you are feeling anxious.

However, your past experience may have affected your relationship with some health professionals. Perhaps you didn’t get the care or support that you needed, and feel sure that they won’t take your concerns seriously now.

Perhaps you just worry about making a fuss or wasting their time. If that’s so, you may prefer to ask if you can have a phone conversation rather than an appointment.

It can help to write a list of any questions or concerns before you go to each appointment. You might also find it easier if your partner or someone else goes with you, for a bit of support.

Extra care (if you want it)
Many women and their partners feel the need for additional checks, especially scans, in pregnancy after loss.

If you have had an ectopic pregnancy, you should always be offered an early scan in your next pregnancy to check that the baby is developing in the right place. This would usually be at six or seven weeks of pregnancy, or earlier if you have any pain or bleeding.

If you have had a molar pregnancy, you should be offered a scan at eight weeks of pregnancy.

An early scan is much less likely to be offered in pregnancy after a miscarriage, unless you have miscarriage symptoms. This may be very difficult to cope with, especially if you had a missed or silent miscarriage, with no signs that anything was wrong.

You might want to talk to your GP or Early Pregnancy Unit to see if you could have an early scan this time. If not, you might consider going to a private provider.

On the other hand, you may find scan appointments very stressful. You may worry that they will raise your hopes only to have them dashed.

Both times during my scans, it’s been noted by the nurses that my husband and I don’t seem very excited. When I explain our history, they understand.
Statistics – what are the chances?
When you are pregnant after miscarriage, ectopic or molar pregnancy, it’s hard not to think about the possibility of having another loss.

You might look for facts and statistics to give you some idea of your chances of having a healthy pregnancy this time.

If so, you’re almost certain to find different statistics quoted in different places and it can be difficult to know what to believe – or how to make sense of them.

It’s also worth remembering that many statistics that you find online – and in leaflets such as this – are averages.

They may not take account of things like your age or previous pregnancies or any fertility or health problems. So it can be difficult to know what they mean for you.

Even so, you may still find it helpful and perhaps reassuring to have an idea what your chances are this time around.

“I find statistics reassuring ... that [even though] I have had previous miscarriages, I still have a good chance to have a baby. That thought keeps me going.”
Pregnancy after...
While pregnancy loss can be difficult for anyone, there are some situations which can cause extra concern. We highlight some of these on the next pages.

If you have had recurrent miscarriage...
Pregnancy after recurrent miscarriage (usually defined as three or more miscarriages in a row) can be very difficult. It can be very hard to feel positive about your pregnancy if you have already been through loss after loss.

Your feelings might also depend on whether you have had any investigations and if so, what the results of those tests were.

If you have had a diagnosis after your losses, and are receiving new treatment in this pregnancy, you may feel much more positive about the outcome.

However, if you had a problem identified for which there is no treatment, or if investigations didn’t show any obvious cause, you may feel very anxious about this pregnancy. You might find it hard to believe that you will have a baby and you may keep your expectations low to try and protect yourself.

If you have a history of recurrent miscarriage, you may be seen more regularly during your pregnancy, perhaps in a specialist clinic, and you might find this helpful.

If you are taking part in a clinical trial of a new treatment, you are very likely to have extra care and attention during your pregnancy. Even if you don’t know whether you are having the trial treatment or a placebo (inactive treatment), you may still have more hope and find this care supportive.

“I have found that being prescribed a new drug, or having a new medical intervention, has given me hope. I hope that by doing something different this time, the result will also be different.”
If you have had an ectopic pregnancy...
Most women who have an ectopic pregnancy do go on to have a healthy pregnancy. However, you do have a higher risk of ectopic than someone who hasn’t had one, so you are bound to worry in those first weeks of pregnancy.

You should have an early scan at around six or seven weeks to check if the pregnancy is developing in the right place. If the scan shows a developing pregnancy in the uterus, then you are unlikely to need any further special care or tests. Even so, you may still feel anxious about something else going wrong.

It may be that the scan result is unclear and you need continuing monitoring over several days or a week or more. That time of uncertainty can be very stressful. Not only is it worrying not to know about the health of your baby, but you may also have to keep returning to the hospital for tests. You may need extra support at this time.

If you have had a molar pregnancy...
Molar pregnancy can be extremely distressing. The diagnosis might have come days or weeks after your miscarriage, which can be a real shock. What’s more, you will have had to go through months of follow-up and perhaps treatment too, as well as having to delay trying again.

Now that you are pregnant, it is absolutely normal to feel anxious. While it is possible to have a second molar pregnancy, you are much more likely to have a healthy pregnancy this time than another molar (see our leaflet Molar pregnancy). Even so, you may still worry about it happening again – or about having a different kind of loss.

The specialist molar pregnancy centres usually advise having a scan at around eight weeks if you are pregnant after a single molar. Unless you have had treatment or more than one molar pregnancy though, you are unlikely to need any other follow-up. That may help reassure you but if you are anxious, you can always contact your follow-up centre for support and advice.

“Having had a miscarriage, followed by an ectopic, I am in a very negative mind-set. I panic that something is going to happen to the baby.”
If you have had a late miscarriage or more than one kind of loss...
The experience of a late miscarriage can come as a huge shock as well as being very distressing. While many people who have miscarried feel less anxious as a new pregnancy progresses, you may find little comfort in early scans which show that all is well.

This may also be true if you have miscarried more than once but at different gestations, or if you have had a mix of miscarriages and ectopic or molar pregnancies. It can feel as though every pregnancy is hazardous and there is no point at which you can relax.

You might want to talk to your GP or hospital doctor about having extra check-ups or scans if you would find this helpful. If you are offered extra care this time because of your history, this can be reassuring.

On the other hand, you might think that additional care ‘proves’ that your pregnancy is particularly high risk and this may make you more anxious. Again, it is probably best to talk with your doctors about the best way to manage this pregnancy.

If you have had fertility problems...
Pregnancy loss after taking a long time to conceive and/or following fertility treatment can be very distressing. Facing another pregnancy can bring additional concerns, especially if this pregnancy too was hard-won. Perhaps this is, or might be, your last chance to have a baby.

In any of these circumstances, you may feel that this pregnancy is both very precious and very fragile. The joy of conceiving may be short-lived and you may feel very anxious about the possibility of another loss.

You might feel strongly that you need additional care in this pregnancy, especially if the time leading up to it was filled with appointments, tests and scans. You might feel suddenly isolated if that doesn’t continue now you are pregnant.

You may want to talk to your GP or midwife about having extra check-ups or scans. If you would find this helpful. You may also find helpful support at the charity Fertility Network UK (see page 15)

“Getting pregnant after one round of IVF felt so lucky. I was keenly aware of the low success rates for my age. To miscarry would feel like I had lost our only chance to have a baby.”
Strategies that might help
Everyone is different, but you may find some of the ideas that follow helpful in getting you through the next weeks and months.

Working towards milestones
Working towards certain milestones can help some people. These milestones might be your scan date(s), the stage at which you miscarried previously, midwife appointments – or simply getting to the end of another day or week.

Relaxation techniques
Relaxation techniques can help reduce stress, whether you practice them regularly or just when you feel the need. You may know already what kind of things relax you – like gardening, cooking or favourite walks. Or you may want to try things like hypnotherapy, meditation, mindfulness or yoga. You may find relaxation CDs or simply a favourite piece of music helpful and calming too.

Complementary therapies
You may consider trying a treatment like acupuncture or aromatherapy to help reduce stress.

Before you book a session with a therapist, however, it is important to check they are qualified and have experience in treating pregnant women. It is also important to check that any essential oils or herbal remedies – including those you can buy over the counter – are safe to use in pregnancy.

Whenever I started to think irrationally or feel panicked, I would listen to a hypnotherapy CD. Imagining I was somewhere safe and focusing on my breathing, would slow down my heart rate and make me feel calmer.
What others suggest

We asked women and partners what they found helpful when pregnant after loss, and what they might advise others. Here are some of their comments and suggestions.

You and your partner

• Accept that it will be an anxious time and look after yourself (and your partner). Yoga, walking and massage helped me.
• Keep busy, healthy and do things you enjoy
• Enjoy the moments when you are feeling positive and happy and let it all out when you are feeling low. Don’t stop talking!
• Take it one day at a time.

Your family and friends

• Find a good friend you can confide in
• Keep talking and reach out to others who may be feeling the same
• Don’t be scared to pick up the phone
• Ask your closest people to let you talk about sad, scary things if that’s what’s on your mind – but just one worry at a time.

Your healthcare team

• Be honest with your midwife, GP or consultant. They can’t help you if they don’t know how you are feeling.
• Ask to be referred for specialist counselling if you feel you need it. This is an important time to look after your mental as well as your physical health.

A health professional’s perspective

We also spoke to a senior nurse who coordinates care for recurrent miscarriage patients. She suggests:

• Perhaps write down how you are feeling. If the pregnancy continues, hopefully you’ll see an improvement in how you feel about it. If it doesn’t continue, at least you have something that acknowledges the pregnancy existed.
• Take time to do something just for you. Take pleasure in something, no matter how small.
• Let the health professionals involved in your care know how you are feeling so they can try to support you.

I need some help to see the silver lining ... to think ahead to brighter days

1 It can be difficult to get counselling via the NHS, especially if waiting lists are long. If you are thinking of finding a private counsellor, make sure you look for registered qualified providers (see page 15).
2 Sarah Bailey. You can read more from Sarah about supporting women in pregnancy after loss at www.miscarriageassociation.org.uk/pregnancyaftermiscarriage
Pregnancy after loss: a summary

There is no doubt that being pregnant after a previous loss or losses can be a stressful and anxious time. That stress is not going to harm your baby, but it can be difficult to cope with.

It can also make you feel sad that you can’t enjoy your pregnancy as much as you might otherwise.

While no-one can promise that everything will be fine this time, sharing how you are feeling with supportive family, friends and health professionals can make a difference.

So too can the words and experience of others who are, or have been, pregnant after loss and who can confirm that your feelings are absolutely normal and understandable.

You may be able to find tips and techniques that help to reduce stress, or you may decide to seek professional help, such as specialist counselling, to help you cope with difficult feelings.

Whatever your situation, we hope that you find something in this leaflet that helps you through and we wish you the very best in your pregnancy.
Where to go for help and support
It can make a real difference to be able to talk to people who understand.

The Miscarriage Association has a staffed helpline, a volunteer support network, an online support forum, a range of helpful leaflets and a useful and informative website.
Tel: 01924 200799
www.miscarriageassociation.org.uk

Relate can help with relationship problems.
Tel: 0300 100 1234
www.relate.org.uk

Mind, the mental health charity
Tel: 0300 123 3393
www.mind.org.uk

The Ectopic Pregnancy Trust
Tel: 020 7733 2653
www.ectopic.org.uk

Fertility Network UK
Tel: 01424 732361
www.fertilitynetworkuk.org

British Association for Counselling and Psychotherapy has information about counselling and a list of registered counsellors.
www.itsgoodtotalk.org.uk

Useful reading
Leaflets published by the Miscarriage Association:
• Recurrent miscarriage
• Ectopic pregnancy
• Molar pregnancy
• Late miscarriage
• Pregnancy loss and infertility
• Miscarriage and the workplace
• Partners too

The Miscarriage Association web page:
www.miscarriageassociation.org.uk/pregnancyaftermiscarriage which includes links to personal stories.

Need to talk to someone who understands?
Call our support line on 01924 200799, Monday to Friday, 9 a.m. to 4 p.m.
Or email info@miscarriageassociation.org.uk