

Women's Health:



Miscarriages & Stillbirths

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Miscarriages & Stillbirths

What is a miscarriage?

- Miscarriage (or pregnancy loss) is when an embryo or fetus dies before the 20th week of pregnancy.
 - It usually happens early in the pregnancy, and 8 out of 10 miscarriages happen in the first 3 months.
- 10-20% of known pregnancies end in miscarriage
- Feelings of *grief* and *loss* are *normal* after a miscarriage

<https://www.plannedparenthood.org/learn/pregnancy/miscarriage#:~:text=Miscarriage%20is%20when%20an%20embryo,of%20pregnancies%20end%20in%20miscarriage.>

<https://www.mayoclinic.org/diseases-conditions/pregnancy-loss-miscarriage/symptoms-causes/syc-20354298>

What causes miscarriages?

- Miscarriages are almost NEVER caused by something the pregnant person did
- Common causes of miscarriages are:
 - When the fertilized egg has an abnormal number of chromosomes (genes). This is NOT preventable.
 - Certain illnesses, like severe diabetes, can increase your chances of having a miscarriage
 - A serious infection or major injury
 - LATE miscarriages, after 3 months, may be caused by abnormalities in the uterus
 - If you've had more than 2 miscarriages in a row, you're more likely to have a miscarriage.

<https://www.plannedparenthood.org/learn/pregnancy/miscarriage#:~:text=Miscarriage%20is%20when%20an%20embryo,of%20pregnancies%20end%20in%20miscarriage.>

Different Types of Miscarriages

- *Threatened miscarriage* – when the pregnant woman has vaginal bleeding and mild cramps but the cervix stays closed. Half of the time, these end in pregnancy loss
- *Inevitable miscarriage* – when the pregnant woman experiences increasing bleeding and the cervix opens, thus ending the pregnancy
- *Incomplete miscarriage* – when some of the pregnancy tissue leaves the uterus and some stays inside. Sometimes treatment is needed to remove the remaining tissue.
- *Complete miscarriage* – when the pregnant woman loses all of the pregnancy tissue in the uterus
- *Missed miscarriage* – when the pregnant woman has no cramps or bleeding but the ultrasound shows an embryo without a heartbeat or an empty pregnancy sac without an embryo.

<https://www.plannedparenthood.org/learn/pregnancy/miscarriage#:~:text=Miscarriage%20is%20when%20an%20embryo,o f%20pregnancies%20end%20in%20miscarriage.>

Miscarriage Symptoms

- Miscarriage symptoms include:
 - Bleeding that goes from light to heavy
 - Severe cramps
 - Belly pain
 - Weakness
 - Worsening or severe back pain
 - Fever with any of the symptoms listed above
 - Weight loss
 - White-pink mucus
 - Contractions
 - Tissue that looks like blood clots passing from your vagina
 - Fewer signs of pregnancy

Miscarriage Causes and Risk Factors

- Problems that can increase the risk of miscarriage include:
 - Infection
 - Medical conditions in the mother
 - Hormone problems
 - Immune system responses
 - Physical problems in the mother
 - Uterine abnormalities
 - Smoking
 - Drinking alcohol
 - Using street drugs
 - Exposure to radiation or toxic substances

Top 3 Most At-Risk Women for Miscarriages

- A woman has a higher risk of miscarriage if she:
 - Is over age 35
 - Has certain diseases, such as diabetes or thyroid problems
 - Has had three or more miscarriages

Stigma of Miscarriages

- 1 in 4 pregnancies end in miscarriage
 - “In your 40s, the risk of miscarriage can go up to 50%”
- “There is taboo around women’s bodies, there is a taboo around women’s bleeding. People don’t want to know.” Julia Bueno, London-based psychotherapist and author of *On the Brink of Being: Talking about Miscarriage*.
- 29% of women suffer from PTSD after a miscarriage, 24% have anxiety and 11% experience moderate to severe depression
- While miscarriage is a very common human experience, the irony is that women going through it often feel isolated and alone.
- Women going through miscarriages need social support, and *destigmatizing* miscarriages is part of that.

Coping with Miscarriage

- In the weeks after a miscarriage, a woman may experience a roller coaster of emotions while going through hormonal shifts as her body readjusts to not being pregnant.
- Unfortunately, some family and friends tell women that they shouldn't feel such a sense of loss. This attitude is particularly common when the miscarriage occurs early in pregnancy. But an early loss isn't necessarily easier to handle than one later in pregnancy. Even if a woman was pregnant for only a short time, her pregnancy may have been planned for years.

<https://www.stanfordchildrens.org/en/topic/default?id=coping-with-miscarriage-1-4036>

Coping with Miscarriage

- Some women are hit harder than others and should allow themselves to experience the grieving process in their own way and at their own pace. It's common to feel fine one day and terrible the next.
- Sharing and comparing experiences with other women who have been through the same thing is often reassuring. Joining a support group may help.
- If feelings start to interfere with ability to get along in daily life, or if sadness doesn't lessen after a couple of months, she might benefit from a referral from her health care provider to a mental health counselor or therapist.

What is a stillbirth?

- Stillbirth is when a baby dies in the womb after 20 weeks of pregnancy.
- Most stillbirths happen before a pregnant person goes into labor, but a small number happen during labor and birth.
- Stillbirth affects about 1 in 160 pregnancies each year in the United States.
- Most people who have a stillbirth and get pregnant again have a healthy pregnancy and a healthy baby.

<https://www.marchofdimes.org/complications/stillbirth.aspx>

Stillbirth Causes

- Birth defects, with or without a chromosomal abnormality
- Problems with the umbilical cord; with a prolapsed umbilical cord, the cord comes out of the vagina before the baby, blocking the oxygen supply before the baby can breathe on their own. Or, the cord can knot or wrap tightly around a limb or the baby's neck prior to delivery.
- Problems with the placenta, which nourishes the baby; in a placental abruption, the placenta separates too soon from the uterine wall.

<https://www.webmd.com/baby/understanding-stillbirth-basics#1>

Stillbirth Causes

- Conditions in the mother like diabetes or high blood pressure, particularly pregnancy-induced high blood pressure, or preeclampsia
- Intrauterine growth restriction, or IUGR, which puts the fetus at risk of dying from lack of nutrition
- Severe lack of nutrition
- Infections during pregnancy
- Exposure to environmental agents such as pesticides or carbon monoxide
- Personal or family history of blood clotting conditions like thrombosis, thrombophlebitis, or pulmonary embolism

<https://www.webmd.com/baby/understanding-stillbirth-basics#1>

Types of Stillbirth

Stillbirth with an unknown cause is called “unexplained stillbirth.” Having an unexplained stillbirth is more likely to occur the further along a woman is in her pregnancy. Stillbirth is further classified as either early, late, or term.

- An **early** stillbirth occurs between 20 and 27 completed weeks of pregnancy.
- A **late** stillbirth occurs between 28 and 36 completed pregnancy weeks.
- A **term** stillbirth occurs between 37 or more completed pregnancy weeks.

<https://www.cdc.gov/ncbddd/stillbirth/facts.html>

Stillbirth in Groups of People

One out of every 169 pregnancies ends in stillbirth in the U.S., and that rate is two times higher for Black expectant parents.

<https://countthekicks.org>

Stillbirth in Groups of People

Stillbirth occurs in families of all races, ethnicities, and income levels, and to women of all ages, but more commonly among women of certain groups:

- Black race
- 35 years of age or older
- low socioeconomic status
- smoke cigarettes during pregnancy
- certain medical conditions, such as high blood pressure, diabetes and obesity
- multiple pregnancies such as triplets or quadruplets
- a previous pregnancy loss

This does not mean that every individual of Black race or older age is at higher risk for having a stillbirth.

Every Kick Counts

Research has uncovered the importance of tracking baby's movements. Paying attention to movements helps expectant parents get to know what's normal for their baby and speak up if they notice a change.

Count the Kicks' goal is to reduce stillbirth in all 50 states.

<https://countthekicks.org>

Options in Delivering a Stillborn

Options in delivering a stillborn:

- Dilation and evacuation (D&E)
- Inducing labor: break amniotic sac, with oxytocin or other ways
- Cesarean birth (c-section)

To help adjust to the loss, if possible, before entering the hospital, parents could consider special arrangements.

- a private room or a room away from other women having babies
- whether or not to see the baby
- whether or not to give the baby a name
- whether or not to have photographs taken

Coping With Stillbirth

- Having a stillborn baby is a painful loss for a family.
- Parents need time to grieve.
- Parents may feel guilt, deep grief, anger, and confusion.
- The loss may strain a marriage. Everyone grieves in his or her own way. Men and women often show grief in different ways.
- A woman has a special bond with her baby during pregnancy and may feel a strong attachment to her baby. Her partner may not feel as close to the baby during pregnancy and may become more attached to the baby later in pregnancy when feeling the baby kick, seeing the baby on an ultrasound, or seeing the baby after birth.

<https://www.marchofdimes.org/complications/stillbirth.aspx>

<https://www.cdc.gov/ncbddd/stillbirth/>

<https://www.webmd.com/baby/understanding-stillbirth-basics#2>

Coping With Stillbirth

Different ways of showing grief:

The woman may

- want to talk about the death of the baby often and with many people
- show feelings more often—cry or get angry a lot
- be more likely to ask partner, family, or friends if they may go with her to a place of worship or to a support group.

The partner may

- grieve by himself
- not want to talk about his loss
- spend more time at work or do things away from home to keep his mind off the loss
- feel like he's supposed to be strong and tough and protect his family
- not know how to show his feelings
- think that talking about his feelings makes him seem weak
- try to work through his grief on his own rather than ask for help.

Coping With Stillbirth

- A mental health professional—a qualified counselor, psychologist, or psychiatrist can help the family through this difficult time.
- Hospitals may have bereavement programs.
- Joining a support group to talk about feelings with other parents coping with pregnancy loss or the death of a baby can also be very helpful.

<https://www.marchofdimes.org/complications/stillbirth.aspx>

<https://www.cdc.gov/ncbddd/stillbirth/>

<https://www.webmd.com/baby/understanding-stillbirth-basics#2>

Resources

- Planned Parenthood Telehealth Services:
 - <https://www.plannedparenthood.org/planned-parenthood-greater-new-york>
- Choices Women's Medical Center:
 - <https://www.choicesmedical.com/>
- Infant and Maternal Health in New York City:
 - <https://www.cccnewyork.org/wp-content/uploads/2019/03/CCC-Infant-Maternal-Heath-One-Sheet-final.pdf>

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