

WHY HAVE I HAD A MISCARRIAGE?

RISKS AND TESTING FOR MISCARRIAGE

It is really important to understand that in most cases, we just don't know why miscarriage occurs, and it is unlikely that you have done something to cause a miscarriage.

Research tells us that around 50-80% of miscarriages result from random chromosomal abnormalities, which occur more frequently in the sperm and eggs of people over the age of 35. Women who experience miscarriage due to a random chromosomal abnormality have a high chance of a later healthy pregnancy.

RISK FACTORS OF MISCARRIAGE

Below are things we know to increase your risk of miscarriage. Your doctor or healthcare provider will be able to provide you with advice based on your circumstances. While these things increase the risk of miscarriage, every person is different, and these factors may affect you differently depending on your circumstances.



AGE



PREVIOUS
MISCARRIAGES



GENETICS



LIFESTYLE

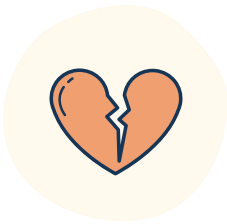


HEALTH AND
MEDICAL



AGE

The older the person who is pregnant, the higher the risk of miscarriage due to decreased egg quality with age. Additionally, the older your partner/person donating the sperm is, the higher the risk of miscarriage. For women and men, the risk of miscarriage increases significantly after age 35 and more so after age 40.



PREVIOUS MISCARRIAGE(S)

Most women will have a successful pregnancy after 1 or 2 early non-consecutive miscarriages (as long as no specific cause is found). The chance of having another miscarriage does increase slightly after two consecutive miscarriages and considerably after three or more consecutive miscarriages. The risk also depends on other factors such as age, genetics, lifestyle, health, and medical factors.



GENETICS

Around 50-80% of miscarriages are due to chromosomal abnormalities. The vast majority are due to spontaneous chromosomal abnormalities in the parent sperm or egg, and only a small number to hereditary abnormalities. Chromosomes are tiny structures inside the body's cells that carry many genes, the basic units of heredity. Genes determine a person's physical characteristics.

The older you and your partner are, the higher the risk of abnormalities. If you have experienced recurrent miscarriage (3 or more miscarriages in a row), your doctor or specialist may refer you and your partner to a genetic counsellor. You can discuss and test for potential genetic risks or abnormal foetal developments (heart defects, chromosomal abnormalities, spina bifida).

Finding out that you have experienced miscarriage due to genetic reasons can be very distressing. A genetic counsellor can help you assess your risk of genetic disorders and how you might move forward with future pregnancies.



LIFESTYLE

Smoking during pregnancy is associated with an increased risk. It is recommended that you and your partner quit smoking before trying to conceive.

Alcohol consumption during pregnancy is also associated with an increased risk of miscarriage. It is recommended that you don't drink alcohol during your pregnancy or when trying to conceive. Using certain drugs by either parent may also increase the risk of miscarriage.

BEING EXPOSED TO ENVIRONMENTAL TOXINS

Exposure to certain pesticides, air pollution, and/or other harmful substances by either parent may increase the risk of miscarriage.

BODYWEIGHT

Obesity or being significantly underweight are associated with an increased risk of miscarriage. A BMI under 18 is considered underweight. Obesity is a BMI over 30.

"It was a really feeling of 'What the hell?' kind of thing. Where is this coming from and . . . what have we done wrong? Have we drunk too much alcohol?"

HIGH CAFFEINE CONSUMPTION

Pregnant women are recommended not to consume more than 200mg of caffeine daily. It's in coffee, tea, caffeinated drinks, and chocolate. High levels of caffeine consumption have been linked with pregnancy complications, including miscarriage. 200mg a day is around 2 cups of instant coffee. Tommy's in the UK has developed a caffeine calculator to help determine how much caffeine you have daily.

STRESS

Stress is a normal part of life. However, excessive stress for prolonged periods is not suitable for your health at any time. If you experience prolonged high stress, speak to your doctor about ways to help.

HEALTH AND MEDICAL

There are a number of health and medical conditions that your doctor or specialist might test you for to find out why you have miscarried. In Australia, testing for the cause of miscarriage is not generally offered unless you have experienced 3 or more miscarriages in a row (recurrent miscarriage).



BLOOD CLOTTING DISORDERS

Antiphospholipid antibody syndrome, also known as Hughes Syndrome or sticky blood syndrome, is a blood clotting disorder. It develops when your immune system makes abnormal antibodies in the blood which then increase the risk of blood clots and pregnancy problems such as complications in placental formation and function. Research has found high levels of these antibodies in up to 15% of women who experience recurrent miscarriages.

Treatment for antiphospholipid antibody syndrome is available. If you are diagnosed with a blood clotting disorder, your specialist will go through options that may work for you.

RHESUS NEGATIVITY

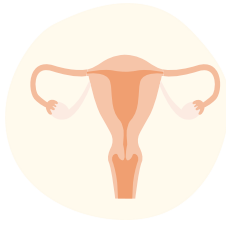
If you are rhesus negative (meaning you have a minus sign following your blood type, for example, A-) and experience a miscarriage, you may be prescribed anti-D injections. This procedure prevents complications for future pregnancies if your next baby is Rhesus positive.



GENETICS

Around 50-80% of miscarriages are due to chromosomal abnormalities. The vast majority are due to spontaneous chromosomal abnormalities in the parents' sperm or egg and only a very small number to hereditary abnormalities. The older you and your partner are, the higher the risk of abnormalities.

If you have experienced recurrent miscarriage your doctor may refer you and your partner to a genetic counsellor to discuss and test for any potential genetic risks or abnormal foetal developments (heart defects, chromosomal abnormalities, spina bifida). Finding out that you have experienced miscarriage due to genetic reasons can be very distressing. A genetic counsellor can help you assess your risk of genetic disorders in future pregnancies and how you might decide about future pregnancies.



CERVICAL WEAKNESS

Cervical weakness, also known as an 'cervix insufficiency', occurs in less than 1 in 100 women. If you have experienced late miscarriage or premature labour due to your cervix opening too early, you may have a weakened cervix. A weakened cervix can result from previous pregnancies, anatomical abnormalities that you may have been born with, particular health conditions, a history of having surgical or medical procedures involving your cervix, or a short cervix.

You may be referred for a scan to check the length of your cervix and if diagnosed, you may be advised to take progesterone or have a cervical stitch.

ABNORMALLY SHAPED UTERUS

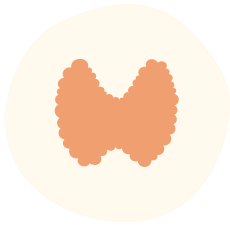
Some women have an abnormally shaped uterus. For some women this isn't a problem but for others it can lead to problems during pregnancy or other reproductive difficulties. Having an abnormally shaped uterus can also increase the risk of miscarriage and premature birth depending on the abnormality. An ultrasound scan can be done to check whether you have an abnormally shaped uterus and if so, whether treatment such as surgery is an option.

Fibroids are common and do not usually cause any issues. However, large fibroids that impact the uterine cavity may increase your risk of miscarriage.

POLYCYSTIC OVARY SYNDROME

There is evidence to suggest PCOS may be associated with an increased risk of miscarriage. Polycystic ovary syndrome, commonly referred to as PCOS, is a common hormonal condition affecting around 15% of women of reproductive age. Women with PCOS often have enlarged ovaries and many small cysts or follicles which fail to mature or produce eggs that can be fertilized when released from the ovaries. PCOS is one of the leading causes of infertility in women and is also associated with a range of symptoms.

If you are concerned about PCOS it's best to see your doctor who may discuss your symptoms and medical history with you, examine you and may order some blood tests and an ultrasound to determine whether you may have PCOS.



UNCONTROLLED DIABETES AND THYROID PROBLEMS

Uncontrolled diabetes and untreated thyroid problems are associated with an increased risk of miscarriage. The thyroid and having healthy levels of the hormone it makes plays a critical role in supporting pregnancy. If your thyroid levels are too high or too low it can cause pregnancy problems. Thyroid function can be checked through a blood test which measures your thyroid hormone levels and thyroid stimulating hormone in your body. In most cases, thyroid problems are relatively straightforward to treat.

Endometriosis and hyperprolactinemia can also impact your hormonal balances and your pregnancy. Endometriosis does not cause miscarriage.

INFECTIONS

Some infections and food poisoning can cause or increase the risk of miscarriage. Infections include genital infections and sexually transmitted infections, rubella, cytomegalovirus, toxoplasmosis, listeria, salmonella and parvovirus.

GENETIC TESTING

Your doctor or specialist may suggest undergoing genetic testing if you have experienced an abnormal pregnancy or experienced recurrent miscarriages. Finding out that you have experienced a miscarriage due to genetic reasons can be very distressing. It is essential to discuss this with a genetic counsellor who can help you assess your risk of genetic disorders in future pregnancies and how you might decide about future pregnancies.

It is important to remember that while testing can be done to try and work out why you have experienced a miscarriage, unfortunately, it is often not possible to find out the cause.

WHERE CAN I FIND MORE INFORMATION AND SUPPORT SERVICES?



Visit our website by scanning the QR code or visit miscarriageaustralia.com.au

You can also find more information from your GP or the website of the hospital or clinic you will be attending