

Bleeding in Early Pregnancy

Bleeding in early pregnancy is scary for many patients, particularly for those who have experienced fertility issues. However, vaginal bleeding in the first trimester is not uncommon, and may not be a sign of a problem. Vaginal suppositories or crinone can also cause some vaginal irritation and spotting.

While bleeding can be a sign of miscarriage, it does not mean that miscarriage is imminent. Approximately 15-20% of all pregnancies result in miscarriage, the majority of which occur during the first 12 weeks. Studies show that up to 30% of women experience some degree of bleeding in early pregnancy, but less than half of such pregnancies will result in miscarriage.

Most miscarriages cannot be prevented. They are often the body's way of dealing with an unhealthy pregnancy that was not developing normally. A miscarriage does not mean that you cannot have a future healthy pregnancy, that you yourself are not healthy, or that you did something wrong.

To help us understand the kind of bleeding you are having, here are some descriptions to use when contacting the office:

Spotting: spots of blood on undergarments or when wiping

Light bleeding: lighter than a normal period but requires wearing a liner

Moderate bleeding: similar to a normal period

Heavy bleeding: heavier than your normal period, often with passage of clots

Color: dark may indicate old blood, while bright red may be more active bleeding

Pain or cramping: note the severity and location of any associated pain or cramping

If you are bleeding, you should:

- always wear a pad or liner so that you can monitor how much and what type of bleeding you are experiencing
- never use a tampon, douche or have sexual intercourse
- avoid exercise and rest as much as possible

When to call the office:

Call with any concerns to discuss your specific situation with a nurse.

What to do:

Depending on how far along you are in pregnancy, a repeat blood test may be ordered for measurement of the pregnancy hormone, hCG. Once levels are over 1000, the rate of rise of this hormone is less predictable and difficult to interpret.

Ultrasound evaluation is usually scheduled around 7 weeks gestation. However, if you have persistent bleeding, an early ultrasound may be ordered. Early ultrasounds may not always provide a definitive answer regarding the health of the pregnancy or the source of the bleeding, since the heart beat is often unable to be detected prior to 6 ½- 7 weeks. Ultrasound may be helpful in determining the location of the pregnancy as well as any other findings that may explain the bleeding.

Although frequent early ultrasounds may be reassuring, allowing time between examinations to reassess the growth of the pregnancy and allow for resolution of bleeding may be helpful.

Coping:

Being pregnant is an exciting but stressful time. We are here to assist you in every way possible. Please feel free to call with any concerns or questions. We also have counselors available to help you to cope.