



Fact Sheet

From ReproductiveFacts.org



The Patient Education Website of the American Society for Reproductive Medicine

Treatment of recurrent pregnancy loss

Many women have a miscarriage at one time or another. Miscarriages can happen for many reasons. Having a miscarriage doesn't mean a woman will have another miscarriage if she tries again. But some women suffer more than one miscarriage. This is called recurrent pregnancy loss (RPL). Women and families often grieve these losses deeply. Women may also worry that they are sick or did something to cause the losses. RPL, however, is often a natural process. Less than half of recurrent miscarriages have an obvious or treatable cause. Almost two-thirds of women with RPL will eventually have a healthy pregnancy — often without any extra treatment.

If you have suffered two or more miscarriages, you should talk with your health-care provider. Often, women decide to continue trying to get pregnant naturally. However, in certain situations, your doctor might suggest treatments to help reduce your risk for miscarriage.

Surgery

Surgery can fix some problems in the uterus (womb), like extra tissue that divides the uterus (septum), some fibroids (benign tumors), or scar tissue. Correcting the shape of the inside of the uterus can often lower the chance for miscarriage. The surgeon uses a tool with a camera (hysteroscope) passed through the vagina to repair the inside of the uterus. This is usually a 1-day procedure and recovery time is a few days to a week.

Blood-thinning medicines

Women with autoimmune or clotting (thrombophilia) problems may be treated with low-dose aspirin and heparin. These medicines can be taken during pregnancy to lower the risk of miscarriage. You should talk to a healthcare provider before using these medicines because they increase the chances of serious bleeding problems (such as stomach ulcers).

Correcting other medical problems

Recurrent pregnancy loss may be related to some medical problems. These include abnormal blood sugar levels, an over- or underactive thyroid gland, or high levels of the hormone prolactin. Treating

medical conditions such as diabetes, thyroid dysfunction, or high prolactin levels can improve the chances of having a healthy, full-term pregnancy.

Genetic screening

In about 5% of couples with RPL, one of the parents has a rearrangement (translocation) of their chromosomes. If one parent has a translocation, this can cause fetuses with chromosome imbalances that are more likely to miscarry. The parents' blood can be studied (karyotyped) to see if they have a translocation. If a chromosomal problem is found, the doctor might recommend genetic counseling. While many couples with translocations eventually conceive a healthy pregnancy naturally, your doctor might suggest fertility treatments, such as in vitro fertilization (IVF). During IVF, eggs and sperm are mixed outside of the body in a laboratory. After IVF, before the embryos are returned to the uterus, they can be tested (preimplantation genetic screening). This allows embryos without translocations to be chosen to increase the chance of a healthy pregnancy.

Lifestyle Choices

In general, whatever is healthy for a woman improves the chance of a healthy pregnancy. Stopping cigarette smoking and stopping illicit drug use (such as cocaine) will lower the risk for miscarriage. Limiting alcohol and caffeine intake may also help. Being overweight has been linked with increased risk of miscarriage, so healthy weight loss might also help pregnancy outcomes. There is no proof that stress, anxiety, or mild depression causes RPL. However, these are important problems that go along with RPL. Psychological support and counseling can help couples cope with the emotional pain of miscarriage and create a healthy environment for a pregnancy.

Controversial treatments

There is no proof that intravenous (IV) infusions of blood products (such as intravenous immunoglobulin [IVIG]) or medicines (such as soybean oil infusion) decrease the risk of miscarriage.

Created 2014

For more information on this and other reproductive health topics, visit www.ReproductiveFacts.org