



Ultrasound assessment of bleeding and pain in early pregnancy

We have written this information leaflet to explain the common causes of pain and bleeding in early pregnancy and what the options to you are now that you have had an ultrasound scan in early pregnancy.

What are the common causes for bleeding and pain in early pregnancy?

Some common causes for bleeding and pain in early pregnancy are:

- **The implantation site** - As the pregnancy attaches itself into the lining of the womb (uterus) it may cause some blood vessels of the womb to bleed.
- **A haematoma** - This is a small area of bleeding, like a bruise, next to the pregnancy sac. A haematoma may be reabsorbed by the body or come away naturally as a vaginal discharge.
- **The cervix** - During pregnancy, tissues become rich in blood supply and softer, as a result of this any slight trauma to the neck of the womb (cervix) can cause bleeding. You may be offered an internal examination to assess this and vaginal swabs might also be taken to check for infection.
- **The vagina** - Common infections like thrush or other infections may cause bleeding from the inflamed vagina in the form of spotting. You may be offered an internal examination to assess this and vaginal swabs may also be taken to check for infection.
- **Constipation** - This is a common cause for pain in early pregnancy. The bowel becomes lazy, because of the effect of the pregnancy hormones and you may find that you go to the toilet less frequently to have your bowels opened. This causes a build up of faeces in the bowel which leads to abdominal pain.
- **Urine infection** - This is very common in pregnancy. You may be asked to provide a urine sample so that this can be tested for infections.

I have been told today that my baby is alright

Your ultrasound scan has shown that your pregnancy is continuing (viable) however you may still experience some pain and/or bleeding and worry about what might be happening. There are no hard and fast rules about what amount of bleeding or pain might indicate a problem but this guidance may help you to decide.

- **My bleeding is slight with only spots of blood, like the beginning or end of my period.**
Monitor your bleeding over 2-3 hours to see whether it increases or stops. If you have any mild abdominal pain try taking some simple pain killers (such as paracetamol). If the symptoms do not improve please contact ward G1 or your GP/Midwife for further advice.

- **I am passing blood clots and tissue and my pain killers are not working.**

Contact ward G1 for advice. The nurse will discuss your pain and bleeding with you and may ask you to come back to the hospital for assessment.

- **I feel unwell, I am bleeding heavily, my pain is very bad.**

Contact ward G1 immediately or dial 999 if you feel that you need urgent assistance.

I have been told that I need to come back for follow up - why is this?

Generally we will offer you follow up for one of the following reasons:

- A large haematoma (blood clot) is seen around the sac on ultrasound scan.

We will offer you an appointment for a re-scan within 2 weeks. Alternatively this may be checked at your booking scan in the antenatal clinic which is usually around 11-14 weeks of pregnancy. If only a small haematoma is found or we cannot find another reason for your bleeding, follow up is usually not required. However you can contact the Early Pregnancy Assessment Unit if you have any further worries but you will need to contact your GP or community midwife to arrange your antenatal care.

- The ultrasound scan indicated that you are not as pregnant as you thought (so it is too early to say that the pregnancy is alright).

We will offer you a further scan usually in 10 - 14 days to check that the pregnancy is progressing well. You may also need to attend for blood tests to check your pregnancy hormone levels.

- The ultrasound scan could not detect a pregnancy within your womb and you are well enough to go home.

We will offer you follow up to check that you do not have an ectopic pregnancy (a pregnancy developing outside of the womb). This will usually mean that we will need to take two blood tests two days apart to check your hormone pregnancy levels and we may need to perform another scan.

General information for you at home

What should I do if I experience further bleeding?

Bright red blood suggests that it is a fresh bleed, whereas brown blood suggests that it is old blood. If your bleeding becomes bright red or heavier please contact ward G1. Please see page 3 for contact details.

Will I need to rest?

Although bed rest used to be recommended in the past there is no evidence to suggest this will help. If you feel that you need to rest then do so but try to keep as active as possible. There is no specific treatment to stop your bleeding. Sometimes you might notice that your bleeding becomes heavier having rested, this is usually due to pooling of blood in the vagina from lying down which then comes away as you stand up.

Can I carry on working?

This will depend on what type of job you do. We will be happy to advise you. If you need a sick note please ask the nurse in the EPAU or your GP who will be able to provide you with one if necessary.

Can I still have sexual intercourse?

Having sexual intercourse during pregnancy is safe. However it would be sensible to avoid sex until your bleeding has completely stopped to reduce the risk of infection.

My blood group is rhesus negative - is this a problem?

We do not usually give Anti-D immunoglobulin to rhesus negative women before 12 weeks of pregnancy. However, if you continue to bleed you may require an injection of Anti-D immunoglobulin. Your GP or the EPAU staff will advise you regarding this if necessary.

Important information about contacting the gynaecology wards or EPAU.

If you do need to contact us it is always useful for the staff at the hospital to know as much information as possible about your symptoms, such as whether you have taken any painkillers or how often you have changed your sanitary pad.

They may need to ask you some personal questions (such as, is your bleeding is related to sexual intercourse?), please don't be embarrassed by this, the staff are used to dealing with these type of situations.

Contact Numbers:

Ward G1

Telephone: **(0114) 226 8225**

Early Pregnancy Assessment Unit (EPAU)

Telephone: **(0114) 226 8587**

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