

Surgical management of miscarriage (SMM)



Information for patients

This information is for patients attending day surgery for surgical management of miscarriage (SMM). We are sorry for your loss and hope that you find this information useful.

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name** and **date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

If we don't ask these questions, then please ask us to check.

Ensuring your safety is our primary concern.

What is surgical management of miscarriage (SMM)?

Surgical Management of Miscarriage or (SMM) is performed under general anaesthetic. This procedure is offered to women and birthing people who have had a pregnancy loss and would like this treated with surgery while they are asleep (under anaesthetic). We do this procedure in our Day Surgery Unit on alternate Mondays and Fridays (except for Bank Holidays).

Benefits of SMM

The benefits of this procedure include:

- having a confirmed date and time for management of your miscarriage
- as you will be asleep, you will not be aware while the procedure takes place
- you will not have the heavy cramping and bleeding that happens with conservative or medical management of miscarriage
- as the procedure is done with ultrasound guidance the risk of repeat procedures is less

Risks of SMM

The risks of this procedure include:

- Infection (affects 40 in 1,000 people) – this can be treated with antibiotics.
- Bleeding – this is to be expected for two to three weeks. If the bleeding is heavy, it may be because there is some tissue left in the womb.
- Risk of injury to the uterus or the cervix (affects 1 in 1,000 people) This is rare but may need further surgery.
- Minimal risk of uterine adhesions (Asherman's Syndrome) (affects 190 in 1,000 people). This usually does not have any fertility implications.



- Retained pregnancy tissue (affects 40 in 1,000 people) which may need additional intervention or treatment (affects 18 in 1,000 people)

Before your procedure

The nurses will tell you when your surgery will be. The table below shows you what time you must stop eating and drinking before the procedure. You can have water up until two hours before the operation. Do not eat sweets or chew gum as your operation may be cancelled.

Remember to remove nail varnish and make-up, and to have a shower or bath before attending day surgery. Please leave your valuables at home.

On the day of your procedure

The table below shows what time you must stop eating and drinking if you arrive at 7.30am or 12.30pm.

Time of arrival	7.30am	12.30pm
Last meal	Midnight	7.30am
Last drink of water only	5.30am	11.30am

When you arrive in day surgery you will be called through to a room with a bed. Your family or friends will be asked to wait for you in the waiting room. The nurses will show you to your allocated bed space.

You will be asked to change into a hospital gown that is open at the back. We advise that you bring a dressing gown and a pair of slippers so that you can walk to the toilet.

The nurses will monitor your blood pressure, pulse, oxygen levels, temperature and give you some medication. You will be given a vaginal pessary called Misoprostol to help soften the cervix to make the procedure easier.

You will be seen by the surgeons and the anaesthetist who will assess you again. They will also decide on the order of the operating list and will let you know what time you will be taken into the operating theatre.

The procedure can take 15 to 30 minutes. After the procedure, staff will ensure that you are fully awake and aware of your surroundings. You will be given a light snack to ensure that you can eat and drink without vomiting. Staff will also ensure that you are able to pass urine.

With your consent, a sample of the tissue removed will be tested to check for an uncommon type of miscarriage called a molar pregnancy. We only contact you with the results if a molar pregnancy is confirmed by the laboratory. If you want to see the tissue that we have removed, please ask.

We will confirm your preference for how your pregnancy remains are managed before the procedure. A hospital arranged cremation service is available.

Once your observations are stable and you have recovered from the anaesthetic, the nurses will call your escort to take you home.

Patients whose blood group is rhesus negative will be given an Anti D injection.

Please take a car or taxi home. Do not take public transport.

After your procedure

After your procedure, you may experience some vaginal bleeding and pain that can last for up to two weeks.

This should get lighter as the days go on. Your next period should return 4 to 6 weeks after the operation, depending on your menstrual cycle.

To reduce the risk of infection, you may have a bath but we recommend that you have showers. During your two-week recovery period, we also ask you:

- do not use any vaginal douches or bath salts
- do not use tampons
- do not have sexual intercourse

If you have offensive vaginal discharge or a fever, please contact your GP or the Early Pregnancy Unit as you may need to take antibiotics.

If you have heavy bleeding that is soaking a pad within 45 to 60 minutes, or pain that is not being relieved with regular painkillers, please go to A&E.

Further information

If you would like to discuss any issues you may have after your procedure, please contact:

Day Surgery Unit

7.30am to 7pm, Monday to Friday on: **020 3299 3483** or
020 3299 3674

King's College Hospital site

Tel: **020 3299 3168** (9am to 5pm, Monday to Friday)



Nurse Triage line, Tel: **020 3299 7232** (9am to 4.30pm,
Monday to Friday)

Email: **kch-tr.help@nhs.net**

Women's Surgical Unit, Tel: **020 3299 5936** (out of hours)

Princess Royal University Hospital (PRUH) site

Tel: **01689 865721** (9am to 4pm, Monday to Friday)

If you feel that you need support, our senior nurse can help and give you information. We can also refer you and your partner for specialist counselling.

Please contact us if you have any questions about getting help or would like to be referred.

The Miscarriage Association has more information and support:
www.miscarriageassociation.org.uk

You can apply for a baby loss certificate if you would like one.
www.gov.uk/request-baby-loss-certificate

MyChart

Our MyChart app and website lets you securely access parts of your health record with us, giving you more control over your care. To sign up or for help, call us on 020 3299 4618 or email kings.mychart@nhs.net. Visit www.kch.nhs.uk/mychart to find out more.

Sharing your information

King's College Hospital NHS Foundation Trust has partnered with Guy's and St Thomas' NHS Foundation Trust through the King's Health Partners Academic Health Sciences Centre. We are working



together to give our patients the best possible care, so you might find we invite you for appointments at Guy's or St Thomas' hospitals. King's College Hospital and Guy's and St Thomas' NHS Foundation Trusts share an electronic patient record system, which means information about your health record can be accessed safely and securely by health and care staff at both Trusts. For more information visit www.kch.nhs.uk.

Care provided by students

We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams.

Tel: **020 3299 4618**

Email: **kings.pals@nhs.net**

If you would like the information in this leaflet in a different language or format, please contact our Interpreting and Accessible Communication Support on 020 3299 4618 or email kings.access@nhs.net



