

Pregnancy Loss

Fact Sheet

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“... Just because no child was born and just because I didn't feel the life of that baby doesn't mean I didn't love, lose or mourn its leaving!

... It was MY BABY — someone — even if I never saw the colour of hair or shape of face — a baby was there, just the same.” (*Miscarriage* by Joy and Marvin Johnson, 1983).

Introduction

The loss of your baby early in your pregnancy, can have a profound impact on you and your partner. You may hear many different medical terms and explanations for this loss. You may have conceived this baby after many cycles of IVE, or you may have had many previous miscarriages.

This fact sheet will describe the emotions commonly experienced by couples after a loss in early pregnancy, will provide you with some background to help explain your reactions, and will make some suggestions to help you move towards recovery. No matter what the medical term for this event, the loss of your pregnancy at any stage, can affect you with deep and unexpected feelings. Emotionally, you are experiencing the loss of your baby.

At the time of the loss of your pregnancy

You may simply be in a state of numbness and shock when this loss occurs. The news may come completely out of the blue at a routine ultrasound that you expected to be a happy acknowledgment of your pregnancy. It may also come after days of cramping, spotting, and uncertainty. You may recall dreams that you had earlier, or fears, that something was wrong with your baby. Regardless, the confirmation that your pregnancy is over is likely to throw you into a state of shock and powerlessness. Often, your doctors and nurses may be feeling equally powerless and unable to offer any medical explanations or interventions. You may find that you deal with admission to hospital and possible surgery, very calmly and in a matter-of-fact way - but it all seems unreal, as if it is not really happening to you.

This state of numbness and disbelief may last for a few days, and your family, friends and doctor may conclude that you are 'handling it well' and 'getting over it'. Often the shift from being pregnant to being not pregnant, from home to hos-

pital and back again, occurs within the space of 12 or 18 hours. The speed of this event contributes to your sense of unreality. For some women, being taken to theatre acts as a confrontation with the reality of what has happened, and you may find that you are especially tearful or distressed just before or just after surgery.

You may have had your miscarriage at home, perhaps alone. This may well have been a frightening experience when you did not really know what was happening or what to do next.

Coping with grief

During the days and weeks after your miscarriage, you may experience many different emotions. These reactions are all normal responses to your pregnancy loss, but you may not have been expecting to have such intense feelings, and may feel worried that your responses are not normal.

Allow yourself to acknowledge that you are experiencing a very understandable grief at the loss of your baby. You can then put your feelings into context, and understand them better.

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Our lives today are so often governed by schedules and timetables, and it may be frightening to feel yourself in the midst of a process that is new and unfamiliar.

It may help you to know that the grieving process is exactly that - a process. There is no single predictable pattern which your feelings will take. Grief is often described as a series of stages or phases, from shock to sadness to recovery, but most people find that they do not move from one feeling to another in a straight line. Your progress is likely to be much more uneven, until the day when you can look back and see how much your feelings have been resolved.

Acute grief is also time limited. In the midst of your most acute feelings of distress, it may be hard to believe that you will ever feel better. Already, by confronting and expressing how you feel, you have begun your own journey through grief.

The first days and weeks

You may become very tearful and sad. Your body has to adjust to the loss of pregnancy hormones, and so you may feel that your moods swing easily from one state to another, from calm to distress and back again. A chance remark, a song, or seeing a baby in a supermarket, may make you feel sad, angry or resentful.

You may feel like retreating. You may want to stay at home, or even in bed, to hibernate and not expose yourself to the stimulus of shops, work, and the outside world. By experiencing a few days of stillness, without too many external demands, you can acknowledge the meaning of your loss to yourself and make space for any feelings to emerge. It may not be easy to take such time from the demands of family or work.

You may find, especially if your days are busy, that you have trouble getting to sleep or that you wake up in the night, possibly crying or distressed. Often, you have been dealing with the needs of everyone else in

your life. The quiet time when your household is still and you are in bed, is the first opportunity you have had to acknowledge and notice your feelings. If you can, take the opportunity of using this quiet time to help you absorb and adjust to what has happened. You may want to write down the story of your miscarriage, or to draw, or simply to sit quietly with a hot drink. For many women, this sleeplessness can be a distressing and lonely time. It is important for you to know that such disturbance of your sleep is not likely to last more than a few weeks, at most.

You will probably find that these times of sadness and emptiness lessen with time, but that you still revisit these intense feelings occasionally. There are times and events which can make you feel especially vulnerable including your next period, the due date of your baby's birth, Mother's Day, Father's Day, Christmas, the pregnancy of your best friend, the anniversary of your miscarriage. You can acknowledge these times in advance and understand your own responses better.

Men and women often have different reactions to miscarriage. A loss, particularly in early pregnancy, often has a greater impact on the woman who has been conscious of subtle body and mood changes. Men often say that they have not experienced a direct sense of loss, but are distressed and perhaps a bit bewildered by their partner's reactions. Other men may find that they too feel loss and emptiness. They may have been the 'strong' partner, dealing with hospitals, employers and family, and seldom receiving any acknowledgment of their own feelings.

You may be disappointed, hurt and angered by the reactions of your family, friends and workmates. They may seem to dismiss your miscarriage as unimportant and expect you to pull yourself together after a very short time. They may not even mention the miscarriage or refer to the baby. If you have had many miscarriages

they may assume you know how to deal with it all and that you should stop trying to have a baby. Sometimes, you will be surprised and comforted by the caring reactions of others, and you will hear of other women's miscarriages - even from years before.

If this miscarriage has been the latest of many pregnancy losses, or occurred after years of infertility and treatment, then your response to it may not be the same as the reaction of a woman who is younger or who has other children. This is not to belittle her loss. But you may be facing the loss of the possibility of ever becoming parents, and so the loss of your pregnancy will have a double significance for you.

Your baby has a unique meaning for you

Why is it that you can feel such a sense of loss and distress even after only a few weeks of pregnancy?

As children and then teenagers, each of us begins to develop a sense of our own identity, an idea of how we imagine our life will develop. For many of us, this identity involves the expectation that we will become parents. We may see this as happening one day - far in the future, when relationships are settled and finances secure. Or we may grow up knowing we always wanted to get married and have a family. We are likely to be heavily influenced by the patterns of our own family life as children, and by the expectations of everyone around us and the family orientation of our society.

So you are likely to have been dreaming and wondering about yourselves as parents, long before the actual conception of this baby. You may have mixed feelings about parenthood, you may wonder if you are ready - but you will have begun to imagine yourself in the role of a pregnant woman, an expectant father, a parent. Psychologically, pregnancy begins long

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before conception! The actual pregnancy creates a heightened sense of attachment, an urge to protect and nurture the pregnancy and to dream about the character and behaviour of this growing baby. You may feel, as a couple, on the threshold of a whole new dimension of your lives.

A miscarriage comes as a deep experience of the negative, death-dealing aspect of our existence. It may be the first time you have ever experienced the loss of someone close to you. It may make you aware that nothing in our lives is guaranteed or predictable. If you have had a history of infertility, you will know already that your expectations are not always fulfilled, and a miscarriage after months or years of trying for a pregnancy will seem cruel and unfair.

Helping your recovery

Your needs after a loss in pregnancy can be described very simply:

- Time
- Acknowledgment of the reality of your loss
- Opportunity to mark the end your pregnancy in some symbolic way

If your loss occurred later in your pregnancy, and you gave birth to a baby whom you could see, hold and show to your family, then you may have already had some opportunities to make the loss real for yourself; photographs and other mementoes, a blessing or naming ceremony, a funeral service. Rituals like these can create a powerful and healing influence. They acknowledge your status as parents, they affirm the reality and unique individuality of your baby, and they provide an opening for others to offer their sympathy. You can also feel that you have

been able to provide a respectful farewell for your baby and to be responsible parents. Your miscarriage may have occurred early in the pregnancy before a recognizable baby has formed, or you may not know what happened to your 'products of conception' after a curette. You can still create for yourselves a symbolic ending to your pregnancy. You can do this months and even years after the event. Some parents have named their baby and held a blessing ceremony or a service with local clergy. Others have planted a bush or a tree in a pot, or created a book of paintings or poems, or walked by the sea with their partner or scattered flowers in the wind. It is possible to arrange a respectful, modest funeral even for a baby of very early gestation. You yourselves will know what kinds of ritual and ceremony fits with your lifestyle and beliefs. Being able to bring your pregnancy to an end in an inner, emotional sense, can help ensure that your feelings have caught up with the physical events and experiences of the loss of your pregnancy.

Talking to other parents who have also experienced pregnancy loss, can help you put your own feelings into context, and provide ideas and inspiration for your own recovery. Reading - facts, stories, articles - can validate your feelings and make you feel less isolated.

Social workers and nurses in your women's health centre or local hospital are available to help you make contact with parent supports, or to provide information about hospital procedures. Please see the following reading list.

The loss of your baby may have shocked, saddened and disturbed you. We hope that this fact sheet has provided information which helps you in your recovery.

Sheila Sim

For further help and support, contact:

ACCESS National Infertility Network (02) 670 2380

SANDS (Parent Support for Parents after Pregnancy Loss)
www.sands.org.au

Suggested Reading

☼☼☼ Miscarriage

J & M Johnson, Centering Corporation, Omaha, 1983. Brief, sensitively written booklet for parents after early pregnancy loss. Available from specialist booksellers.

☼☼☼ Miscarriage

Wendy Jones, Thorsons, UK, 1990. Endorsed by the UK Miscarriage Association, contains information on causes, emotional reactions and treatments, with stories from parents themselves.

☼☼☼ Hidden Loss

Valerie Hey (ed.) The Women's Press, London, 1989. Balanced and in depth study of miscarriage and ectopic pregnancy with brief personal histories (including a father's); chapters by a woman obstetrician and a GP; and discussion of how to make sense of miscarriage and deal with anxiety in a future pregnancy.

☼☼☼ When Pregnancy Fails

Susan Borg and Judith Lasker, Bantam Books, New York, 1989. Revised edition of 1981 publication with helpful, informative chapters on parents' reactions, the impact on family, issues for helping professionals and feelings about subsequent pregnancy.

☼☼☼ The Tentative Pregnancy

Barbara Katz Rothman, Pandora Press, London, 1988. Sensitive exploration of the issues, risks and implications of prenatal diagnosis and testing.

☼☼☼ When you can't have a child

Susan Powell and Helen Stagoll, Allen and Unwin, Sydney, 1992. Personal stories of living through infertility and childlessness.

☼☼☼ Miscarriage

SANDS (NSW) Inc. Sydney, c/o The Royal North Shore Hospital, 1994. Booklet produced by bereaved parents in consultation with health professionals, with a full description of emotional responses and sources of support.

☼☼☼ Ended Beginnings

Caludia Panuthos and Catherine Romeo, Bergin and Garvey, New York, 1994. Sensitive exploration of the meanings and reactions to child bearing loss and suggestions for healing. Written by bereaved parents/childbirth consultants.

☼☼☼ Mourning Unlived Lives

Judith Savage, Chiron, Illinois, 1989. Psychodynamic exploration of child-bearing loss, drawing on myths and psychoanalytic theory to explain and illuminate the process of mourning.

☼☼☼ Coping With Grief

Mal McKissock, ABC Books, Sydney, 1985. Booklet which succinctly outlines the reactions of normal grief.

☼☼☼ Healing Into Life And Death

Stephen Levine, Anchor Books, New York, 1987. Exploration of our attitudes towards life and death, with illustrations from the author's work with terminally ill people. Places our reactions into a philosophical context.