

We are very sorry you have to go through this, please be aware we are available to help you through this. Feel free to call at any point, and/or go straight to hospital to seek medical attention if you feel it is necessary.

What is misoprostol?

It is a type of medication (prostaglandin) that is used to encourage cervical softening/ripening and to start contractions.

How to use it?

Misoprostol is put in the vagina.

1. Wash your hands well and then lay on the bed.
2. Insert 800mcg into the vagina and with your fingers push the tablets as far back as you can reach.
3. Stay laying down for 30 min for the pills to dissolve.
4. You can now go about your day, staying close to home. You may have some cramping for which you can use Tylenol to treat.
5. Eventually (usually 4-6 hrs later) you will have more severe cramping. You can use Tylenol/Ibuprofen if needed. You will eventually feel an increased urge to go to the bathroom.
6. Bleeding at this point is normal. You will pass clots and/or tissue.
7. After the miscarriage is over you should **NOT** be soaking more than 2 pads/ hour.

What to be aware of?

1. If you are soaking more than 2 pads/hour for more than 2 hours you need to seek medical attention.
2. If your pain is not controlled with the medications provided, you will need to seek medical attention.
3. You will need to call the clinic the next day to review your bleeding and what happened after using the misoprostol. If you didn't have much pass, another dose may be necessary.
4. We will need to follow your hormone levels after taking the pills. You may require a follow up ultrasound.
5. The efficacy of misoprostol ranges from 61-100% (compared to 16-100 for expectant management). There is a change that the misoprostol will not work and you will require a D&C.

Side effects

The most common side effects from misoprostol are nausea, diarrhea and a low grade fever. You can use an antiemetic (ie Gravol/*Dimenhydrinate*) as well as an anti-diarrheal (ie Imodium/*Loperamide*) medication as needed. These side effects are usually short lasting. If the fever continues over 24 hours you will need to be seen by a medical professional. Pelvic pain/cramping is not uncommon, this is also usually short lasting and the use of a heating pad or Tylenol may be helpful. Very rarely if bleeding is severe some women require a blood transfusion.

What to expect after using misoprostol?

Bleeding should slow down after 24 hours but may continue for 2-4 weeks. Your hormone levels (bHCG) should decrease consistently. This will be monitored with blood work, most women only require one to two tests. If your bHCG is not dropping or we have confirmed by ultrasound that the pregnancy and/or retained products are still in the uterus we will discuss doing a D&C (dilatation and curettage).

We recommend at least one full period after using misoprostol before if you choose to try to get pregnant again.

References:

1. Clinical practice handbook for Safe Abortion (WHO 2014).
https://apps.who.int/iris/bitstream/handle/10665/97415/9789241548717_eng.pdf;jsessionid=DB53E8A1DA974BB430579E1043F1EF9A?sequence=1
2. Goodman S, Wolfe M and the TEACH Trainers Collaborative Working Group. Early abortion training workbook, 3rd ed. San Francisco: UCSF Bixby Center for Reproductive Health Research and Policy; 2007
3. Gemzell-Danielsson, K, Ho, PC, Gómez Ponce de León, R, Weeks, A, Winikoff, B. Misoprostol to treat missed abortion in the first trimester. *Int J Gynecol Obstet.* 2007; 99(Suppl.2): S182– S185.