

An Audit of Miscarriage Management at a UK District General Hospital Early Pregnancy Unit.

By: Dr Amika McCulloch ST3, supervised by Ms Shikha Kapur (Obstetric and Gynaecology consultant)

Background

- Miscarriage is defined as 'the **spontaneous demise of a pregnancy in utero before the fetus reaches viability**.' This applies **up to 23+6 weeks** gestation in the UK.¹
- Miscarriage is common and it is commonly cited that around **1 in 4 of all pregnancies will result in miscarriage**.² Therefore, miscarriage management is a **significant aspect of women's health as a whole and is likely to affect many women's lives**.
- Improving miscarriage services** is of upmost importance in the field of women's health and therefore results in the need for this audit of management of miscarriage at Watford Hospital.

Aims

Did WGH adhere to **NICE guidelines** in the **diagnosis and management** of miscarriage (1a+1b).
To look at **rates and complications** of the different **management options** at WGH for the benefit/ interest of the EPU locally. These rates were compared to **national standards** (2 + 3).

Standards

- NICE standards** for management
 - Women referred to early pregnancy assessment services are seen by the service at least **within 24 hours** of referral
 - Women who are referred with suspected ectopic pregnancy or miscarriage are offered a **transvaginal ultrasound** scan to identify the location and viability of the pregnancy
- Rate of retained products of conception (**RPOC**) post **conservative management** is **50%**.
- Rate of **RPOC** post **medical management** nationally is **15%**³
- The incidence of **RPOC** post **surgical management** (SMM) nationally is **4%** and the incidence of requiring **repeat SMM** ranges from **0.3% to 1.8%**⁴.

Method

Data set: All patients seen in EPU diagnosed with a miscarriage between June and December 2022

Compared to NICE standards and national rates as detailed above.

Results

1a: **82%** got an appointment to be seen + USS within 24 hours of referral

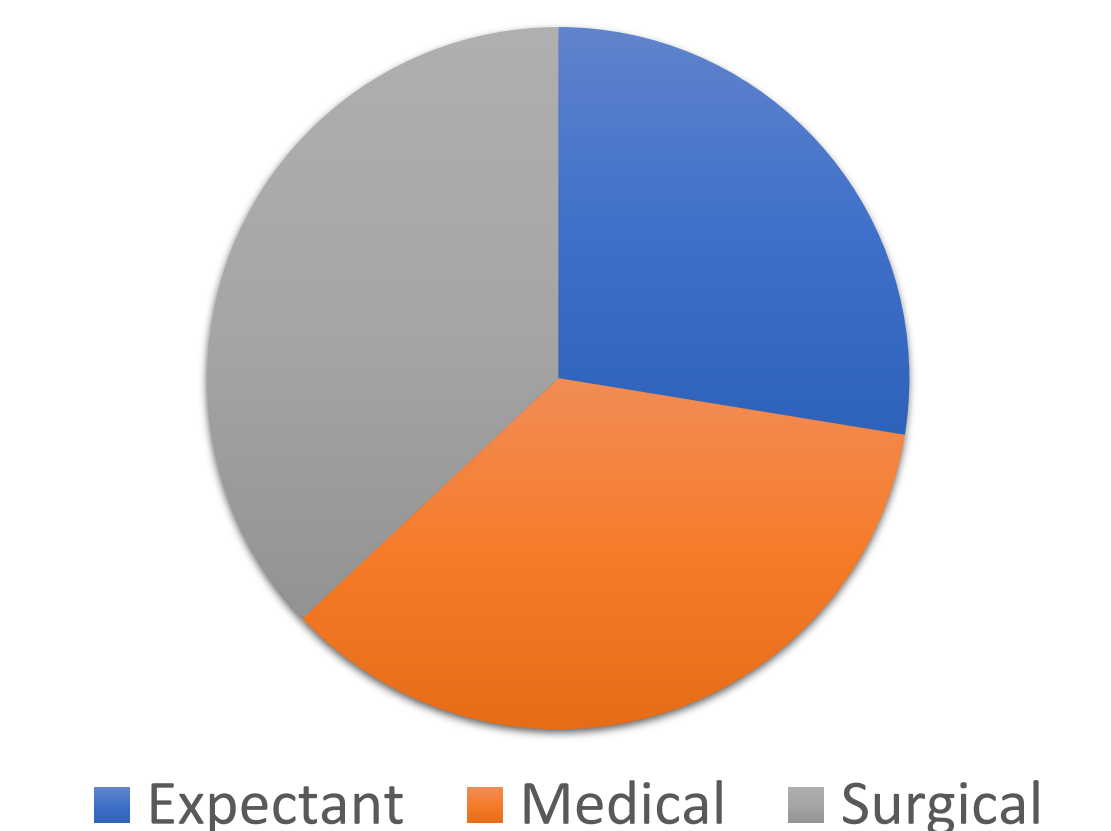
1b: **100%** offered an ultrasound scan

Expectant Management: **2.7%** resulted in medical management and **5.5%** resulted in surgical management.

Medical Management:
17% required **repeat treatment** for RPOC (12.8% - MMM and 4.3% - SMM)

Surgical Management:
No patients required **repeat SMM**.
1% - RPOC rate

Type of initial management



Conclusions

A **large proportion** of patients referred to EPU were **seen within 24 hours**, however this is still **below the NICE national standard of 100%**. Looking at dates of referral/ appointment time shows that most of those who did not were due to the **weekend** or a backlog created by the weekend on a Monday.

All patients were offered a TVUS **compliant with NICE standards**.

Rates of repeat management were generally **below national averages**, apart from the success rate of **medical management** which was **slightly below national rates**. Our figures are **below** the national figures for **RPOC post-SMM (1%, nationally 4%)** and also **below** national figures for **repeat SMM required (0%, nationally 0.3%-1.8%)**.