

## Women's Services Patient Information

# Manual Vacuum Aspiration for Management of Miscarriage

We are sorry that you have had a miscarriage, to help you get through this difficult time; you should have already received information on the different treatment options available and had opportunity to discuss these with a doctor or nurse.

This leaflet aims to answer your questions about having manual vacuum aspiration. It explains the benefits, risks and alternatives, as well as what you can expect when you come to hospital. If you have any questions or concerns, please do not hesitate to speak with your doctor or nurse.

### What is manual vacuum aspiration (MVA)?

MVA is a way of emptying the uterus (womb) using local anaesthetic while you are awake. MVA uses a narrow tube which enters and empties the womb using gentle suction. Anaesthetic is applied to the cervix (neck of the womb) to numb the pain.

### It is used to treat women in the following situations:

- Delayed miscarriage (where the pregnancy has failed but the pregnancy is still within the womb) which occurs before 12 weeks of pregnancy.
- Incomplete miscarriage (where some of the pregnancy tissue remains inside the womb).

### Is MVA a new procedure?

MVA has been performed for more than 30 years in the United Kingdom. It has been shown to be a safe procedure, with high success rates and good patient feedback .

It offers an additional choice to women who have had a miscarriage who want surgical treatment without having a general anaesthetic (being put to sleep).

<b>Why choose MVA over surgical management under general anaesthetic?</b>	
<b>Manual vacuum aspiration under local anaesthetic</b>	<b>Surgical management under general anaesthetic</b>
Undertaken in a clinic setting	Undertaken in an operating theatre setting
Planned appointment - less risk of cancellation	Planned admission to the ward however there is an increased risk of delays or cancellation while waiting for availability of theatre space
<b>The success rate of treatment is equal</b>	
Local anaesthetic used therefore no grogginess and minimal nausea after the procedure	General anaesthetic used therefore increased grogginess and nausea after the procedure
Shorter stay in hospital. Approximately 2 hours.	Longer stay in hospital. Usually a minimum of 6 hours

## What happens if I choose MVA?

Your doctor or specialist nurse will explain the procedure and give you a date, time and place for your appointment. You may be asked to have some blood tests and to have some vaginal swabs to check for vaginal or pelvic infection.

You will also be consented for the procedure.

**If you change your mind or if you experience heavy vaginal bleeding before your appointment, please call the EPAU and discuss this with a nurse.**

## What happens on the day of the procedure?

The doctor will ask you questions on your symptoms and general health. They will then confirm you are happy to proceed. You will be given some medicine before the procedure including:

- Painkillers (paracetamol and/or ibuprofen)
- An anti-sickness tablet (usually a medication called cyclizine).
- Tablets to soften your cervix (neck of the womb) to make the procedure safer. This medication is called **Misoprostol**.
- You may also require antibiotics.

## Are there any side effects with Misoprostol?

A small proportion of women will experience side effects with the misoprostol tablets. Possible side effects include: nausea, vomiting, diarrhoea, abdominal pain, headache, hot flushes and unpleasant taste in the mouth. If you have any questions or concerns, please do not hesitate to speak with your doctor or nurse.

## What does MVA involve?

You will have a speculum examination (similar to a smear test) which will allow the doctor to assess the cervix. A local anaesthetic gel will be inserted into the vagina before local anaesthetic is injected into the cervix. When you are comfortable, a small tube will be inserted through the cervix into the uterus which will then be emptied using a syringe. The procedure is over once the womb is empty.

## How long will MVA take?

The whole procedure takes about 15 minutes. You may feel slight discomfort during the procedure similar to period pain. If you feel pain please let the nurse or doctor looking after you know. You may also be given gas and air to help reduce the pain.

You will be in hospital for a total of 2-3 hours. The medicine you will have been given before the procedure takes up to 60 minutes to work and after the procedure you may need to stay for up to an hour to make sure you feel well enough to be discharged from hospital.

## What happens after the MVA?

- We will monitor you for up to an hour after the procedure. You can leave the hospital once you feel well enough to go home.
- We recommend someone escorts you home after the procedure.
- You can expect some vaginal bleeding after the MVA. This usually settles within seven days. If the bleeding becomes heavier or you are concerned about the amount of bleeding you will need to contact Ward 12 or go to your GP as this may indicate an infection.
- We recommend you use sanitary towels instead of tampons and do not have sexual intercourse until the bleeding has settled. This reduces the risk of infection.
- You may return to work after 48 hours, or when you feel able.
- **If your blood group is Rhesus negative you will need an injection of Anti-D. Please ask for further information on Anti-D, if required.**
- **You will need to repeat a pregnancy test after 2-3 weeks.**

## What are the possible complications of MVA?

MVA is safe but, like all procedures, there is a small risk of complications. These include:

- Heavy bleeding (haemorrhage)
- Infection (this risk is the same as all other treatment options for miscarriage)
- Need for a repeat operation if not all the pregnancy tissue is removed (3 in 100 women)
- Perforation (tear) in the womb that may need to be repaired under an anaesthetic (less than 1 in 1000 women)

## What are the options if I do not want MVA?

Other treatment options will be discussed with you by a nurse or doctor. These include:

- Conservative management (waiting for the pregnancy to pass naturally).
- Medical management (using medication to encourage the pregnancy to pass).
- Surgical management under a general anaesthetic

## **Contact numbers:**

**The Early Pregnancy Assessment Unit (EPAU)** on 01274 364325 8am -5pm Monday – Friday or  
**Ward 12 for urgent advice on 01274 364380 (24hr contact).**

We use Next Generation Text for people with hearing difficulties. To contact us ring 18001 364325 (EPAU) or 18001 01274 364380 (Ward 12)

## **Smoking**

Bradford Teaching Hospitals NHS Foundation Trust is a smoke-free organisation. You are not permitted to smoke or use e-cigarettes in any of the hospital buildings or grounds.

## **Wristbands**

When you are in hospital it is essential to wear a wristband at all times to ensure your safety during your stay.

The wristband will contain accurate details about you on it including all of the essential information that staff need to identify you correctly and give you the right care. All hospital patients including babies, children and older people should wear the wristband at all times.

If you do not have a wristband whilst in hospital, then please ask a member of staff for one. If it comes off or is uncomfortable, ask a member of staff to replace it.