Providing comprehensive prenatal care: Integrating management of early pregnancy loss into your CHC

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FACULTY DISCLOSURE

All faculty in a position to control content for this session have indicated they have no relevant financial relationships to disclose.

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Background

• **Miscarriage is a common medical occurrence**
  – 15-20% of clinically recognized pregnancies end in miscarriage\(^1\)
  – Over 1,000,000 miscarriages each year in the US\(^2\)

• **Treatment used to be dilation and curettage (D&C) in an operating room\(^3,4\)**

• **All three treatment options for early pregnancy loss can be safely provided in primary care settings.**
3 options for miscarriage management

- Medication
- Procedure
- Expectant Management
### Expectant management

<table>
<thead>
<tr>
<th>Subcategory of Early Pregnancy Loss</th>
<th>Completed Miscarriage with Expectant Management (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>By Day 7*</td>
</tr>
<tr>
<td>Incomplete abortion</td>
<td>53</td>
</tr>
<tr>
<td>Embryonic demise</td>
<td>30</td>
</tr>
<tr>
<td>Anembryonic gestation</td>
<td>25</td>
</tr>
<tr>
<td>All categories</td>
<td>40</td>
</tr>
</tbody>
</table>

*From day of diagnosis.

Prine & McNaughton, AFP, 2011
### Completed Miscarriage After Taking Misoprostol (Cytotec) by Day 8* (%)

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incomplete abortion</td>
<td>93</td>
</tr>
<tr>
<td>Embryonic demise</td>
<td>88</td>
</tr>
<tr>
<td>Anembryonic gestation</td>
<td>81</td>
</tr>
<tr>
<td>All categories</td>
<td>84</td>
</tr>
</tbody>
</table>

*Prine & McNaughton, AFP, 2011*
Procedure
Dispelling myths about miscarriage

• NOT caused by food, sex, exercise, stress, travel, etc
• NO medical need to wait 3 months before trying again
• NO need to go to the ED during a miscarriage unless warning signs are present
What do we know about miscarriage care provided in community health centers?

How do Family Physicians trained in abortion care (uterine aspiration and medication abortion) use their skills to manage early pregnancy loss? What factors are related to the provision of miscarriage management in primary care settings?
Study Sample

• Respondents from a prior study of 3rd-year family medicine residents (n=505) who graduated in 2007-2012 from programs offering abortion training
• Received responses from 256 responders (RR = 50.7%), excluded 12 who were not practicing/dropped out (n=244)
Methods

• Online and mailed survey instrument that was developed from themes found in 15 qualitative interviews

• Survey questions:
  – Clinical practice
  – Reproductive health care offered
  – MM practices, included barriers and enablers
Just FQHC

Type of MM Provided

- Expectant management: 90%
- Medication management: 50%
- MVA management: 10%
Reported Barriers of Miscarriage Care Not Provided (FQHC)
Reported Enablers of Current Miscarriage Provision

- Clinical training
- Considered within scope/standard care
- Timely access to offsite ultrasound reports
- Onsite access to ultrasound machine
- Clinical systems in place
- Available practice prior to my arrival
- Staff members' support
- Colleague championed provision of care

Legend:
- Expectant Management
- Medication Management
- MVA Management
How we’re making this work... and how you can too!
Miscarriage Management

The following documents are available as Word documents (editable and printer-friendly) and in pdf format (non-editable and printer-friendly). Patient education materials are available in multiple languages to distribute to your patients.

Guidelines
Evaluating first trimester bleeding algorithm:

Misoprostol for Treatment of Incomplete Abortion and Miscarriage
Policy and Procedure for MVA for Miscarriage
Protocol for treatment of Miscarriage with misoprostol

Patient Education Materials
What are My Choices for Miscarriage Treatment?
Miscarriage Management Using Medications
Miscarriage Management with an Aspiration Procedure
Miscarriage Management: Letting Nature Take Its Course

Forms
MVA Consent Form

Teaching & Training Tools
Curriculum:

CORE (Curricula Organizer for Reproductive Health Education)
Managing Early Pregnancy Loss: Video-Based Curriculum by Innovating Education in Reproductive Health
Society of Family Medicine Resource Library