York and Scarborough Teaching Hospitals
NHS Foundation Trust

Viable Pregnancy

An explanation for patients

Early Pregnancy Assessment Unit (EPAU)

ⓘ For more information, please contact:

York Hospital, Wigginton Road, York, YO31 8HE or telephone 01904 726489

Or

Scarborough Hospital, Woodlands Drive, Scarborough, YO12 6QL or telephone 01723 385134

Contents **Page**

An explanation for patients 3

What causes bleeding in early pregnancy? 4

Progesterone pessaries for current viable pregnancy and bleeding 6

What causes abdominal pain in early pregnancy? 7

What to do if you get further abdominal pain or vaginal bleeding? 9

What happens next? 10

Tell us what you think of this leaflet 11

Teaching, training and research 11

Patient Advice and Liaison Service (PALS) 11

Leaflets in alternative languages or formats 12

The result of your ultrasound shows that your pregnancy is progressing as expected.

An explanation for patients

Bleeding and pain in early pregnancy

Any amount of vaginal bleeding or abdominal pain in early pregnancy can cause concern that something is wrong with your pregnancy. However, up to one in three women have these symptoms during the first twelve weeks of their pregnancy and it does not necessarily indicate a problem such as a miscarriage.

What causes bleeding in early pregnancy?

In most cases we do not find a reason for the bleeding and the pregnancy continues with no effect on the baby. However, these are some reasons why vaginal bleeding may occur:

- **Implantation site bleeding**

As part of the normal development the pregnancy attaches itself to the lining of your uterus (womb). This can cause some of the blood vessels from your womb to bleed. This does not harm you or your baby and there is nothing that you need to do differently.

- **Haematoma or small area of bruising**

This is also referred to as extra chorionic haemorrhage (ECH). This is seen on an ultrasound scan as a small area of bleeding near the pregnancy. If your scan shows one, it will either be reabsorbed by your body or come away naturally as mild (usually dark or brown) vaginal bleeding. It does not harm you or your pregnancy.

You do not need a repeat scan in early pregnancy to check on it, however, if your bleeding persists longer than two weeks or you have any fresh red bleeding, see your GP or Midwife who will reassess you and re-refer to EPAU if required. You do not need to do anything differently although avoiding heavy lifting may settle your symptoms sooner.

- **Cervical erosion/ectropion**

During pregnancy, an area on the neck of your womb (cervix) can develop which is soft and rich in blood supply. This is a normal process but may cause bleeding. This area may be found during an internal examination.

It is not harmful to your or your baby and you do not need to do anything differently although you may find that sexual intercourse and vigorous exercise may cause bleeding.

- **Vaginal infections**

Thrush and other vaginal infections can cause bleeding from swelling (inflammation) within your vagina.
This may be found during an internal examination and swabs may be taken. If an infection is found, you may be prescribed antibiotics to take. Some infections are sexually transmitted, and your partner may be advised to get checked and treated as well.

Progesterone pessaries for current viable pregnancy and bleeding

If you have had a previous miscarriage and have had vaginal bleeding in this pregnancy you will be offered progesterone pessaries, which are inserted into the vagina twice a day until 16 completed weeks of pregnancy.

If you have had one or two miscarriages, taking progesterone may increase your chances of having a successful pregnancy by around one in five. If you have had three or more miscarriages, taking progesterone may increase your chances of having a successful pregnancy by around 15% (PRISM trial- 2016).

What causes abdominal pain in early pregnancy?

Pain is very common in early pregnancy. The most common reasons are outlined below.

- **Growing pains**

You may experience aching and cramping pains as the womb increases in size in early pregnancy. This is common and may be eased with paracetamol which is safe for most women at any stage of pregnancy.

- **Muscle and joint pain**

Muscle and pelvic joint pains are common especially towards the end of the first three months of pregnancy. This is because the joints of your pelvis are under the influence of pregnancy hormones. Simple pain relief and keeping active should help relieve this.

- **Constipation**

Constipation and wind are common in early pregnancy. Your bowels work slower, and you may find you open your bowels less frequently. It is important to drink plenty of fluids and eat a healthy diet with fresh fruit and vegetables every day. Peppermint water or tea may help relieve discomfort. Occasionally you may need a short course of laxatives from your General Practitioner (GP).

- **Urine infection**

Pregnancy can increase your chance of getting a urine infection. You may have a urine sample tested to check for this. To reduce the risk of getting a urine infection it is important to drink plenty of fluid and to completely empty your bladder when you go to the toilet. We would also recommend passing urine after having sex. If your test shows that you have a urine infection you will be prescribed a short course of antibiotics.

- **Threatened miscarriage**

If you have had vaginal bleeding with lower abdominal pain, you may experience pain because the womb is trying to expel the blood. The pain should settle as the bleeding slows. Simple pain relief should help. If your bleeding increases significantly (like a heavy period), you pass large clots, or you are concerned, you should contact your GP or Midwife.

What to do if you get further abdominal pain or vaginal bleeding?

Most women who have had a scan confirming an early pregnancy with a heartbeat do not need a further scan in the early pregnancy unit. It is understandable to be concerned if you get more symptoms, however, in most women there is nothing to worry about.

If you get mild or moderate bleeding wear a pad and monitor the loss over the course of two days. In most cases the bleeding settles. If it increases in its amount during this time or persists as fresh red bleeding after two days, then contact your GP or Midwife for advice.

If you have heavy bleeding or bleeding with clots (bigger than a twenty pence piece) please contact your GP, Midwife or contact NHS 111 for advice.

If you get mild or moderate abdominal pain take pain relief (paracetamol one gram) and have a bath. This will usually help to relieve pain. If this does not help, then either contact your GP or Midwife. Scarborough EPAU also accept self-referrals. Currently York EPAU does not.

What happens next?

You will be discharged from this clinic, but if you have further pain or bleeding please contact GP, Midwife or the GP out of hours service.

If you have not already done so you will need to self-refer to the midwife online- please visit York and Scarborough teaching hospital website.

Our maternity service is now using Badger Notes. This is an electronic system aimed at giving mothers more access to and control of their pregnancy records and care notes.

If you have any further worries and would like further help or advice from this clinic, please telephone:

- York EPAU

Telephone 01904 726489
Monday to Sunday, 8am to 2.30pm

- York Gynaecology Assessment Unit (GAU)

Telephone 01904 726275
8.15am to 7.30pm (Use this number for out of hours enquiries)

- Scarborough EPAU

Telephone (24 hours) 01723 385134

Or you may prefer to contact your own GP or midwife.

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:
V. Hughes, Women's Unit Deputy Manager,
York Hospital, Wigginton Road, York, YO31 8HE or
Telephone 01904 726489.

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email yhs-tr.patientexperienceteam@nhs.net.

An answer phone is available out of hours.

Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website: www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/

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Date first issued	November 2003
Review Date	October 2028
Version	14 (issued October 2025)
Approved by	Obstetrics and Gynaecology Clinical Governance Group
Document Reference	PIL 60 v14

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