



Bleeding while pregnant

Pregnant women sometimes have light spotting. That's when a tiny bit of blood leaks from the vagina or the surface of the cervix. It may happen after a vaginal exam. It may also happen after sex.



BLEEDING CAN BE A SIGN OF A PROBLEM

IF:

- The blood is bright red.
- Pain or cramps are present, too.
- The bleeding is heavy. Heavy means the bleeding soaks a sanitary pad.
- The spotting keeps going on.

If the blood starts out pink or red and turns dark brown, it is not active bleeding. This is not usually a problem. But let your health care provider know when there is any bleeding.

CAUSES

Before the 20th week, bleeding could be, but is not always, a sign of miscarriage. Other causes of bleeding include:

- Loss of the mucus plug
- Kidney infection
- Preterm labor
- Placenta previa and other problems called vasa previa and marginal previa
- Placenta abruptio
- Swollen cervix



Normal pregnancy



The placenta attaches high up in the uterus.

Placenta previa



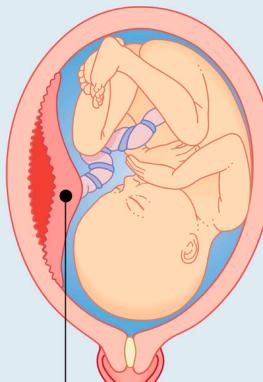
The placenta covers the cervix.

Normal pregnancy



The placenta attaches high up in the uterus.

Placenta abruptio



The placenta leaves the wall of the uterus.

PLACENTA PREVIA

The placenta carries oxygen and food to the baby. In most pregnancies, the placenta attaches high in the uterus. In placenta previa, it attaches low, over the cervix. The lower uterus stretches during late pregnancy. Parts of the placenta tear from the wall. That causes bleeding.

Placenta previa is rare. It happens in only 1 in 200 pregnancies. Its cause is not known. Falls and injuries are not factors.

Symptoms of placenta previa:

- Bright red vaginal bleeding. This could start as early as the 24th week. Often, it starts during the 34th or 35th week.
- Usually, there is no pain or cramping.

A woman may not know that she has placenta previa until bleeding happens. Then an ultrasound test can show the problem.

Women with placenta previa have to spend a lot of time in bed. It prevents stress to the uterus. The goal is to keep blood loss down. A lot of blood loss means danger for both mother and baby. In severe cases, the mother may have to go to the hospital for treatment.

In some cases, the bleeding stops, but the placenta blocks the cervix. The mother will need a Cesarean section (C-section) delivery if the placenta completely blocks the cervix. The mother may need a C-section if the placenta only partly blocks the cervix. When this happens, the mother may have more bleeding after she delivers the baby.

Note: Some pregnant women may have a “low lying placenta.” This means the placenta lies at the bottom of the uterus (not higher where it should be). If it is found before the 24th week, the placenta can move upward and out of the way of the cervix. If so, there is no longer a problem.}

There is a right time for delivery of the placenta. That's after the baby is born. But sometimes it happens another way. The placenta starts to leave the wall of the uterus too early. It starts before the baby is born. This can happen whether the placenta is attached high or low.

Placenta abruptio happens in about 1 in 200 pregnancies. Some cases are more serious than others. Causes might be high blood pressure or a serious blow to the belly. An older mother may be more apt to have placenta abruptio. So are women who use cocaine during pregnancy.

Symptoms of placenta abruptio:

- Bright red vaginal bleeding
- Severe pain in the abdomen. The pain lasts. It doesn't come and go.

There are no tests for placenta abruptio. Even ultrasound may not show it. Regular prenatal visits help. The health care provider looks for blood in the mother's vagina. The provider finds out if the uterus is tender.

Women with placenta abruptio need to go to the hospital right away. Some women can have a vaginal delivery. That's if labor begins on its own and the baby is healthy. Otherwise, a C-section is done. The mother may be given blood.



TRIAGE QUESTIONS



Do you have bright red vaginal bleeding and severe, constant pain in your abdomen?

NO

YES ➔ **GET EMERGENCY MEDICAL CARE**



Do you have sudden vaginal bleeding or do you pass large clots of blood?

NO

YES ➔ **GET EMERGENCY MEDICAL CARE**



With vaginal bleeding, do you have any of these signs?

- Pain in the uterus and back
- Throwing up
- Severe headache
- Sudden urine decrease

NO

YES ➔ **CALL DOCTOR**



Are you between weeks 20 and 36 of your pregnancy and do you have any signs of preterm labor?

- Contractions that:
 - Occur every 15 minutes or closer (for more than 1 hour)
 - Last from 20 seconds to 2 minutes each
 - Come closer together as time goes on
- Sudden gush of vaginal fluid (your “bag of waters” breaks)
- Change in vaginal discharge. This discharge could be blood, water, or mucus.
- Pressure in your pelvis, back, or in the insides of your thighs. It feels like the baby is pushing down.
- A dull backache below your waist. This can come and go or you can feel it all the time.
- Cramps like you get with a menstrual period

NO

YES ➔ **CALL DOCTOR**



USE SELF-CARE



SELF-CARE

- Watch closely for bleeding. If you see any, call your health care provider.
- Rest in bed for light bleeding.
- Avoid doing things that could injure you. Examples: heavy lifting, hard exercise. Don't do work, sports, or exercises that could give you a blow to the belly.
- Wear a special seat belt when you drive. You can get one that protects a pregnant woman's belly.
- Follow your health care provider's advice about sex. You may be told to:
 - Avoid sex.
 - Use extra caution during sex. Your partner can focus on more gentle touching. Limit how deeply the penis enters the vagina. Use positions that help control the depth.
 - Don't smoke.
 - Don't be exposed to other people's smoke.