

# Psychological trauma after miscarriage is more likely in women using assisted reproduction

April 30 2013

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Subfertile women who conceive through assisted reproduction are more likely to experience a greater traumatic impact following early pregnancy loss compared with women who conceive naturally, suggests a new study published today (1 May) in *BJOG: An International Journal of Obstetrics and Gynaecology*.

Miscarriage is the most common [complication of pregnancy](#) affecting 20% of all clinically recognised pregnancies.

This study, conducted at Queen Mary Hospital, The University of Hong Kong, aimed to identify the [psychological impact](#) following a [first trimester](#) miscarriage (less than 12 weeks of gestation).

Researchers compared the stress and anxiety depression levels between women who conceived naturally and those who required assisted reproduction. In total 150 women, 75 in the natural conception group and 75 in the assisted reproduction group, were monitored between 2008 – 2010.

Apart from mode of conception, there were a few [demographic factors](#) differentiating the two groups, with the mean age of women in the assisted reproduction group (37 years) significantly higher than that of women in the natural conception group (31 years). The duration of gestation at diagnosis of miscarriage was also notably shorter in the

assisted reproduction group (average of 6 days less).

Interviews and two standardised questionnaires were conducted after one week, four weeks and 12 weeks post-diagnosis of miscarriage to determine mental well-being, distress and [psychological response](#) patterns after the event.

The researchers found that, despite their demographic differences, the results were highest (for stress and anxiety depression levels) after the one week follow-up in both groups.

While these levels were noted to decrease with time in both groups, the assisted reproduction group maintained significantly higher scores than the natural conception group at the four and 12 week follow-up.

Furthermore women in the assisted reproduction group were nearly twice as likely to experience significant psychological morbidity after miscarriage compared to those who had spontaneous pregnancies (9.3% vs 5.3%).

Dr Cheung Sze Yan Charleen, Department of Obstetrics and Gynaecology, Queen Mary Hospital (Hong Kong), and co-author of the study said:

"Our results identified significantly higher stress, anxiety and depression levels in women who conceived after assisted reproduction, leading us to conclude that miscarriage resulted in greater psychological trauma to these women.

"Elevated emotional stress after miscarriage could therefore be associated with the duration of subfertility and the need of [assisted reproduction](#).

"Timely support and intervention would be beneficial in the management of this group of women, as would further research into the potential long-term impact for adverse psychological outcomes after miscarriage."

Pierre Martin Hirsch, *BJOG* Deputy-Editor-in-Chief, said:

"Though miscarriage is common, women are often unprepared for the loss and suffer a range of psychological reactions from grief, to anxiety and depression.

"The findings of this study emphasise the importance of early identification and appropriate management processes to help improve the psychological well-being of women who miscarry.

"[Women](#) should seek guidance from their obstetrician for their best treatment and support options after an early [pregnancy loss](#)."

**More information:** Charleen Sze-yan Cheung, Celia Hoi-yan Chan, Ernest Hung-yu Ng. Stress and anxiety-depression levels following first trimester miscarriage: a comparison between women who conceived naturally and following assisted reproduction. *BJOG* 2013; [dx.doi.org/10.1111/1471-0528.12251](https://doi.org/10.1111/1471-0528.12251)

Provided by Wiley

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