Medical oncology

Non-molar miscarriage – why you no longer need follow up Information for patients, relatives and carers

Introduction

The diagnosis of why your pregnancy ended has changed. This leaflet gives you more detail about why this happened in your case. If you have any questions, please call us on the number below.

We thought you may have had a 'suspected molar pregnancy' (hydatidiform mole). However, when our specialist doctor who examines body tissues (pathologist) reviewed your case they found that you did not have a molar pregnancy, you had a 'hydropic miscarriage'. This is a non-molar miscarriage and means that you do not need follow-up with us.

Why 'molar pregnancy'?

Molar pregnancy is a very rare condition. In England and Wales, there is only 1 molar pregnancy in every 600 pregnancies. It can be difficult to diagnose.

Diagnosis is done by a specialist doctor (a pathologist) who examines tissue samples under a microscope. Most local pathologists may only see one or two cases every year. The local pathologist will sometimes be cautious. They will over-diagnose this condition. This is a safety net. Molar pregnancies can be dangerous, and we need to make sure they are not missed.

The local pathologist will send the tissue sample to be double-checked by a pathologist who is expert in diagnosing molar pregnancy. In your case, your tissue sample was sent to our specialised pathologist at Charing Cross hospital. They found that you did not have a molar pregnancy. This happens in about 1 in 10 (10%) of cases they review.

Why was I registered for follow-up?

We register all people who have a **suspected** molar pregnancy to our follow-up programme. It's very important that people with molar pregnancies have this follow-up as soon as possible. But in your case, our pathologist has confirmed that you did not have a molar pregnancy, so you no longer need our follow up.

So, why did my pregnancy end?

You experienced a hydropic miscarriage. If a foetus dies early in a pregnancy, small watery cysts may develop in the placenta. These miscarriages usually occur by chance and in a way in which the foetus cannot survive. Unlike molar pregnancies, hydropic miscarriages do not have a risk of tissue persisting or spreading.

Sources of support

www.miscarriageassociation.org – call 01924 200 799 www.tommys.org – call 0800 0147 800

When can I try for a baby?

As you did not have a molar pregnancy, there is no reason for you not to try for a baby straight away if you would like.

However, we always suggest speaking with your GP before trying for a baby, as they will be aware of your full medical history and be able to offer further advice.

How can I get in contact?

We hope this leaflet explains some of the questions you may have. However, if you have any further questions or concerns, our team are more than happy to help.

You can contact us by telephone: 020 3311 1409

Or by email us on: ichc.hmole@nhs.net

How do I make a comment about my experience?

We aim to provide the best possible service and staff will be happy to answer any of the questions you may have. If you have any **suggestions** or **comments** about your visit, please either speak to a member of staff or contact the patient advice and liaison service (**PALS**) on **020 3312 7777** (10.00 – 16.00, Monday to Friday). You can also email PALS at imperial.pals@nhs.net The PALS team will listen to your concerns, suggestions or queries and is often able to help solve problems on your behalf.

Alternatively, you may wish to complain by contacting our complaints department:

Complaints department, fourth floor, Salton House, St Mary's Hospital, Praed Street London W2 1NY

Email: ICHC-tr.Complaints@nhs.net

Telephone: 020 3312 1337 / 1349

Alternative formats

This leaflet can be provided on request in large print or easy read, as a sound recording, in Braille or in alternative languages. Please email the communications team: imperial.communications@nhs.net

Wi-fi

Wi-fi is available at our Trust. For more information visit our website: www.imperial.nhs.uk

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