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# Progesterone in pregnancy



## Patient information

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## What is Progesterone?

Progesterone is a pregnancy hormone that helps the fertilised egg implant in the uterus to establish and maintain a pregnancy. It is produced in early pregnancy by a cyst in the ovary that remains after ovulation, called the Corpus Luteum, and in later stages of pregnancy by the placenta.

## Why is it recommended?

Progesterone is offered as a support to women who have previously had miscarriages and are experiencing bleeding. It has been found that taking progesterone increased the likelihood of a live birth in women who had experienced one or more previous miscarriages *and* were currently experiencing vaginal bleeding. This is based on the PRISM trial (**PR**ogesterone **I**n **S**pontaneous **M**iscarriage), a study which included over 4,000 pregnant women in the UK.

Please look at the table below. It explains the effect of progesterone based on the PRISM trial:

Number of previous miscarriages	Chances of live birth with progesterone	Chances of live birth without progesterone
No previous miscarriage	74%	75%
1 or 2 miscarriages	76%	72%
3 or more miscarriages	72%	57%

## How long to take progesterone?

Progesterone is taken in a pessary form twice a day. When the heartbeat is seen in the embryo, the prescription will be given up to 16 weeks of your pregnancy.

## How will I take the progesterone?

The progesterone we use for preventing miscarriage is a small, cylindrical-shaped medication. You can insert the progesterone pessary into either the vagina or rectum. Wash your hands before and after inserting the pessary.

**For vaginal insertion:** place the pessary in the vagina and push the pessary upwards and backwards. You may do this while squatting or lying down.

It is recommended you use the progesterones vaginally, if you have the following:

- colitis (inflammation of the colon, causing frequent attacks of diarrhoea with mucus or blood)
- problems controlling your bowel movements (faecal incontinence).

**For rectal insertion:** it is recommended to lie on your left side with your right knee bent, and push the pessary into the rectum. Your muscles will hold the pessary in place when it is in far enough. Squeeze your buttocks together for a few seconds.

It is recommended you use the progesterones rectally, if you have the following:

- a vaginal infection (discharge from your vagina)
- or often have cystitis (a burning pain on passing water)

## What can I expect when taking Progesterone?

Not everyone experiences side effects from this medication, as the body also produces progesterone. The most common side effects are abdominal pain, constipation, feeling bloated, tiredness, hot flush, and breast pain.

If you develop an intense itch with skin rashes, swelling of the face and lips or difficulty in breathing after this medication, please call 999 or go to A&E.

Gynaecology Day Assessment Unit: 01923 217 344

Early Pregnancy Assessment Unit: 01923 217 831

Opening hours: Monday to Friday, 9am - 5pm

Elizabeth Ward (open 24 hours): 01923 217 902

## How to contact us

### Gynaecology

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