# Another pregnancy -for parents whose baby has died



As bereaved parents you may find that all sorts of people – doctors, nurses, relatives and friends – give different advice. Some may suggest that you try for another baby straight away, others that it's better to wait a while.

You may feel that all this conflicting advice just adds to your own confusion. You may even feel that you do not wish to act upon the advice you hear. Obviously, in the end the decision when to try again is up to both of you to make together. Nevertheless, there are some important points to consider.

In certain circumstances it is important to take heed of the advice of your doctor or specialist – if the mother was ill during the last pregnancy, if she is now under the care of a doctor for some reason, or if the baby was delivered by caesarean section.

Many people consider it sensible for you to talk things through with your family doctor or obstetrician before trying again. They are usually very happy to discuss things with you.

If your baby died of a genetic disorder, or a condition that may occur again in future pregnancies you will need extra advice and help.

It is sensible for the woman to have at least one period before becoming pregnant. This shows that her body has returned to normal again, and helps her and the doctors tell when the next baby is due, once conceived. An immediate pregnancy with no period between it and the last one can be more difficult to assess.

Experience seems to indicate that women who become pregnant very quickly after a pervious pregnancy are more likely to miscarry. This is probably because the internal organs take a little time to resume their normal shape and strength – something which is especially important in the case of the cervix, which must be strong if the baby is to be held safely in the womb.

Some people think that parents recover emotionally more quickly from the loss of a baby if they allow themselves some time to think about the dead baby – to say goodbye – before committing themselves to another pregnancy. A wait of about six months to a year is suggested.

If your new baby is expected in the same month of the year as when the previous one died it can be particularly distressing. It may be helpful to think carefully about the timing of another pregnancy.

For these reasons many people find it useful to discuss contraception with their GP, midwife or health visitor while they decide what to do.

Parents who lose their first baby often have another one fairly quickly. Those who already have one or more children are more likely to wait a while. However, each couple is different, and you must make your own decision in your own time, allowing for your individual circumstances.

Remember that you may not become pregnant straight away. You may have conceived quickly last time, or it may have taken a while, but the patterns could be different this time. No two pregnancies are the same; however, if you have been trying for six months with no success, it is worth asking your doctor for advice.

The next pregnancy is usually a very exciting and a worrying time, and the father, in particular, may feel helpless. A Sands group or contact can be most helpful now. You will

be able to draw on the experience of other parents who have gone through a subsequent pregnancy. They will know how you feel and will be able to offer practical help as well.

When you go to see your doctor and antenatal clinic for the first time you may wish to take someone with you for 'moral support', particularly if the father is unable to attend. You might like to ask a friend, or Sands member, to come with you.

Re-visiting a maternity unit can be distressing, which is another good reason for not going to your appointment alone. If you feel apprehensive, telephone the sister in charge of the antenatal clinic the day before your appointment (or, if your courage fails, ask someone to do it for you) tell her how you feel, and she may be able to arrange for someone to meet you when you arrive.

It helps if you write down all the things you want to ask before you go to the clinic. Spend a couple of hours, both of you together if possible, making a list of questions, and take it with you to your appointment. This will make sure you don't come away from the clinic thinking, "Oh, if only we'd remembered to ask about that...!"

Do tell people about your fears and anxieties. If you put a brave face on your worries, nobody will realise that you need help. Some parents feel that asking for reassurance is 'being a nuisance', and taking up unnecessary hospital time. It is not. Doctors, nurses and midwives say again and again that they would much rather know if parents are anxious. So tell them how you feel.

You might feel that as your pregnancy advances, a tour of the unit where you will have your baby would be reassuring. Ask someone at the antenatal clinic if this is possible (or get someone to ask for you).

As your baby's arrival comes closer you may wish to discuss what might happen during the delivery so that you feel that you will know what to expect. Again, ask at the antenatal clinic, or get someone to ask for you.

The more prepared you are, the less anxious you will be – but it is a very worrying time for parents who have lost a baby. Some fathers find it very distressing to return to the same hospital and stand by again while their partner has a baby – almost as if history is repeating itself.

Most people, mothers and fathers, have all sorts of conflicting feelings after a new baby is born.

If you have lost a baby in the past, these feelings can be even more complicated. You may feel happy that your new baby is here, but sad, too, as memories of your other baby return to you.

You might feel guilty because you love your new baby so much, and feel that you are being disloyal to the one that died. Everyone feels the same way, some for a few seconds, others for much longer. It is a natural and normal feeling, and it will go away as you realise that your love for the previous baby has not decreased – you still have a place in your heart for each baby.

Some people find that it may take a little time to adjust to their new baby. If you don't 'love' him or her straight away, it doesn't mean that there is anything wrong with you, just that you need time to take it all in. Again, everyone is different, and you will find that you come to love your baby in your own way, and in your own time.

In the early weeks and months you may find that you are anxious about your baby's wellbeing and needs lots of advice and reassurance. Again, don't be afraid to ask for it. Your doctor, midwife or health visitor are all there to help you – so don't struggle on alone if you are worried; no matter how small the problem seems to be. Most people understand that your experience of losing a baby naturally makes you anxious about the one you now have.

## **About Sands**

Sands, the stillbirth and neonatal death charity, was founded in 1978 by a small group of bereaved parents devastated by the death of their babies, and by the total lack of acknowledgement and understanding of the significance and impact of their loss.

Since that time we have supported many thousands of families whose babies have died, offering emotional support, comfort and practical help. Sands today operates throughout the UK and focuses on three main areas of work:

### We support anyone affected by the death of a baby

Bereavement support is at the core of everything we do. Some of the services that we offer include:

- Helpline for parents, families, carers and health professionals
- UK-wide network of support Groups with trained befrienders
- Online forum and message boards enabling bereaved families to connect with others
- Website and a wide range of leaflets, books and other resources.

#### We work in partnership with health professionals to try to ensure that bereaved parents and families receive the best possible care

We undertake a comprehensive programme of training, workshops and talks for health professionals based on the Sands Guidelines which give practical guidance on how to meet parents' needs and provide good bereavement care.

## We promote and fund research that could help to reduce the loss of babies' lives

In spite of medical advances, the shocking reality is that each day in the UK there are eleven babies who are stillborn and six who die within the first 28 days of life. Through our Why17? campaign, we are raising vital funds for research, while challenging government to address these individual tragedies as a matter of urgency and priority.

We depend on the extraordinary energies of our supporters to raise the vital funds that we need to deliver the wide range of services that we offer.

#### If you would like any further information or support please contact us or visit our website.

#### **Contact Sands:**

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