

PE1443/D

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By E-mail

Ms Alison Wilson
Assistant Clerk to the Public Petitions Committee
petitions@scottish.parliament.uk

Your ref:
Our ref:
21 December 2012

Dear Ms Wilson

CONSIDERATION OF PETITION PE1443

Further to your letter of 29 November 2012 in regards to the above petition, I offer below the Scottish Government's written response.

What plans do you have to collect national data on the number of women experiencing recurrent miscarriage in Scotland and the stage of pregnancy that miscarriage occurred?

National data is collected on miscarriages that require hospital inpatient or day-case treatment. Hospital based information is derived from two sources: the acute hospital inpatient and day-case record (SMR01) and the maternity inpatient and day case record (SMR02), with individual episodes being derived from only one of these sources. Some, particularly early, miscarriages which are either managed solely by General Practitioners or for which the woman does not seek medical care will not be recorded as the woman is not treated in a hospital.

Information on the stage of pregnancy at which miscarriage occurs is collected on those miscarriages that are recorded as a maternity inpatient or day case record (SMR02).

What are your views on what the petition seeks?

Miscarriage can be a very distressing experience for women. Miscarriage has a wide variety of causes. Scientific evidence, endorsed by the Royal College of Obstetricians and Gynaecologists (RCOG) and cited in their guideline, supports the investigation of couples following recurrent first-trimester miscarriages or a second trimester miscarriage. The

guideline recommends that a couple who have experienced recurrent first trimester, or a second trimester miscarriage should ideally be seen together at a dedicated miscarriage clinic and given accurate information to facilitate decision making about future pregnancies.

The third edition of the RCOG guideline was published in May 2011 and contains the evidence from an extensive review of the literature and the views of experts in the field. Investigations are recommended according to this evidence. The guideline should be followed by the healthcare professionals who are assisting these couples.

On the basis of the evidence, the Scottish Government supports the use of the guideline produced by the Royal College of Obstetricians and Gynaecologists.

Yours sincerely

JOHN FROGGATT

Head of Child and Maternal Health Division