



# Intrauterine pregnancy of uncertain viability

This information leaflet is aimed at helping you understand the diagnosis of an intrauterine pregnancy of uncertain viability (IUPUV) and to answer any questions you may have.

#### What is a viable pregnancy?

For a pregnancy to be 'viable', the pregnancy needs to be in the right place inside the womb and an embryo needs to be seen with a heartbeat.

#### What is an IUPUV?

With an IUPUV, a pregnancy sac is seen in the womb but it may be empty without an embryo or appear irregular. Sometimes an embryo may be seen but it may be too small to expect to see a heartbeat. This affects around 1 in 5 women attending early pregnancy clinics. It will not be possible to tell you if the pregnancy will continue on to be successful based on a single scan; therefore, you will need at least another scan.

#### When will I have another scan?

A normal pregnancy sac and embryo grow one millimetre per day. Therefore, an appointment will be made for you to have another scan after at least seven days, or up to 14 days, if this is thought to be more appropriate. The problem with doing another scan too soon, is that the scan may still be inconclusive and you may then need another scan.

## What is the possible diagnosis?

It is likely that your pregnancy is fine but that we have scanned you too early to see normal development. However, sometimes it may be that you have experienced a miscarriage and the pregnancy stopped developing some time ago, even though it was in the right place.

## **Getting more help**

We understand that having an IUPUV may make you feel very anxious, especially if you have had a miscarriage before.

If you have any further questions, or if you experience any worsening symptoms, please call Early Pregnancy and Acute Gynaecology Unit based on Sonning Ward any time on 0118 322 7181, and member of staff will be able to help and advise you.

Alternatively, if you suffer with any of the symptoms below, please attend the Emergency Department (A&E) urgently:

- Heavy bleeding and/or passage of large blood clots or having to change your pad every hour.
- Severe abdominal pain that you are not able to manage with regular painkillers (paracetamol or codeine phosphate).

## **Further information**

More information can be found on the following websites:

- <u>http://www.aepu.org.uk/information-about-your-pregnancy/ultrasound-information/what-will-the-scan-show/</u>
- <u>https://www.miscarriageassociation.org.uk/information/worried-about-pregnancy-loss/ultrasound-scans/</u>

To find out more about our Trust visit <u>www.royalberkshire.nhs.uk</u>

# Please ask if you need this information in another language or format.

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