

Miscarriage impact report 2017

WHY WE NEED MISCARRIAGE RESEARCH



As many as **1 in 5** pregnancies end in miscarriage before 12 weeks. In women with a BMI over 30, the risk is 1 in 4.



About **1 in 100 women** in the UK experience recurrent miscarriages.



Currently for most couples experiencing miscarriage the loss remains unexplained.



A third of women in the UK attending specialist clinics as a result of miscarriage are clinically depressed.

TOMMY'S GOALS



To verify miscarriage rates and risk factors, to enable more accurate prognosis for patients.



To lead national and European guidelines for effective, continuous and compassionate miscarriage care.



To widen access to proven miscarriage tests and treatments.



To find new miscarriage tests and treatments that work.

Tommy's clinic

Established the largest miscarriage research group in Europe, helping over 24,000 couples each year. Tommy's miscarriage researchers are also working with more than 75 other hospitals throughout the UK to enable more couples to participate in clinical trials of new tests and treatments for miscarriage.

Clinic outcomes:



25% more clinical appointments in London, Birmingham and Coventry for couples experiencing recurrent miscarriages.



Shorter waiting times for follow up appointments (reduced by half in Birmingham).



More sensitive and accurate testing in Birmingham for chromosome anomalies that could cause miscarriages.



Miscarriage support groups operating in Birmingham and London.



Miscarriage counselling rooms in London expanded and refurbished.

Research pipeline

(projects in progress)



A new approach to recurrent miscarriage: the role of stem cells.



The paternal factor: sperm DNA damage.



Finding out if bacteria in the womb could cause miscarriage.



How the maternal immune system affects early pregnancy.