Trauma

In every pregnancy, a woman starts out with a 3-5% chance of having a baby with a birth defect. This is called her background risk. This sheet talks about whether exposure to trauma may increase the risk for birth defects over that background risk. This information should not take the place of medical care and advice from your health care provider.

**What is trauma?**

Trauma can include damage to both your body and/or your mind. Trauma can be caused by sudden physical injury, such as being in a major car accident, taking a bad fall, or being a victim of violence or from mental/emotional stress. Pregnancy outcomes may differ based on the type of trauma experienced and based on the severity of the trauma. For a discussion of the mental/emotional side of trauma, see our fact sheet on Stress at https://mothertobaby.org/fact-sheets/stress-pregnancy/pdf/.

**Can trauma cause a miscarriage?**

Miscarriage is fairly common during the first trimester of all pregnancies. Most times, the cause is not due to trauma. However, miscarriage or late pregnancy loss can happen with some types of trauma, especially those that affect the uterus or placenta.

**Can trauma cause birth defects?**

While there are individual reports of babies born with and without birth defects following trauma, it’s unclear if there is an increased risk for birth defects. One study of 62 women who were hospitalized for car accidents in the first trimester did not find a higher chance for birth defects than in the general population. Studies are needed to determine if trauma during pregnancy increases the chance for birth defects.

**Can trauma cause pregnancy complications?**

Among women who experienced domestic violence, studies have found an increased chance for low birth weight and premature delivery (born before 37 weeks of pregnancy).

Another concern with trauma is for placental abruption, which can occur with trauma to the abdomen such as in domestic violence or car accidents. Placental abruption is a serious condition in which the placenta (the connection from the mother to the baby) pulls away from the uterus. This is thought to be a leading cause of pregnancy loss and stillbirth after trauma in the second and third trimester of pregnancy.

Women who experience trauma in pregnancy are also at increased risk to develop post-traumatic stress disorder.

**What should I do if I experience trauma during pregnancy?**

You should call 911 or go to an emergency room for treatment of serious physical trauma (bodily injuries). Health care providers can treat injuries and may check the pregnancy by drawing blood, performing an ultrasound, monitoring the baby’s heart rate, and checking for uterine contractions. Also continue to follow up for monitoring with your health care provider.

If you or someone you know is experiencing domestic or interpersonal violence, please call the National Domestic Violence Hotline 1-800-799-7233 (SAFE).

**What if the father of the baby experiences trauma?**

There are no studies looking at how a man’s exposure to general trauma would affect pregnancy. However, trauma that injures a man’s scrotum or testicles (organs involved in making sperm), could affect his ability to father a pregnancy. In general, exposures that fathers have are unlikely to increase risks to a pregnancy. For more information,
please see the MotherToBaby fact sheet Paternal Exposures and Pregnancy at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/pdf/.

Selected References:

December, 2017