# Chinese versus western medicine for threatened miscarriage: abridged secondary publication

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#### **KEY MESSAGES**

- 1. Effects of Chinese medicine and a combination of Chinese and western medicine on clinical pregnancy, ongoing pregnancy, live birth, and miscarriage were investigated.
- 2. The sample size was insufficient to detect <sup>2</sup> School of Chinese Medicine, The Chinese University of Hong Kong, beneficial or harmful effects.
- 3. A larger-scale multicentre trial may provide more conclusive results.

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# Introduction

Therapies for threatened miscarriage are empirical, and their efficacies in preventing miscarriage are unclear. Combinations of Chinese medicines (CM) and pharmaceuticals may be useful in the management of threatened miscarriage. We compared a modified classical CM formula with western medicine (WM) in terms of efficacy and safety among women with threatened miscarriage.

# Methods

This study enrolled women aged 18 to 35 years with viable pregnancy complicated by threatened miscarriage in early gestation. Participants were randomised into four groups to receive the following treatments until 12 weeks of gestation: CM + WM placebo, CM placebo + WM, CM + WM, or CM placebo + WM placebo. The primary outcome was live birth. Secondary outcomes were clinical pregnancy, ongoing pregnancy, miscarriage, and adverse effects.

### **Results and discussion**

In total, there were 200 participants; 196 completed the follow-up assessments and were included in the analysis. Participants in all four groups were comparable in terms of age, body mass index, gestational age, previous live birth rate, and miscarriage rate. Participants in the CM + WM group displayed slight (but not significant) increases in live birth, clinical pregnancy, and ongoing pregnancy rates; they also displayed a slight (but not significant)

decrease in miscarriage rate. Participants in all four groups were comparable in terms of hormonal profile and quality of life. There were no serious adverse events; only unrelated minor adverse events were recorded. The sample size was insufficient to detect beneficial or harmful effects of CM and a combination of CM and WM in terms of preventing miscarriage during early pregnancy. Studies with larger sample sizes are warranted.

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### Disclosure

The results of this research have been previously published in:

高雅婷,博士學位論文,先兆流產的古今用藥 1 分析及基於轉錄組測序探討壽胎丸安胎作用機 制。浙江中醫藥大學2020年6月

2. Li L, Tang LY, Liang B, et al. Evaluation of in vitro embryotoxicity tests for Chinese herbal medicines. Reprod Toxicol 2019;89:45-53.

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