

National and Kapodistrian University of Athens  
Department of English Language and Literature

MA Programme “Linguistics: Theory and Applications”

**“Metaphors of pain:  
Conceptual mappings and affective meanings”**

Aristea-Maria Metaxa  
219016

Supervisor: Anna Piata

Supervising Committee: Elly Ifantidou & Louis de Saussure

January 22, 2021

## Table of Contents

Declaration.....	iii
Acknowledgements.....	iv
Abstract in English.....	v
Abstract in Greek.....	vi
1. Introduction.....	2
2. Literature Review.....	6
2.1. Introduction.....	6
2.2. Metaphors of PAIN in Cognitive Linguistics.....	6
2.3. Emotion communication in Relevance Theory.....	13
2.4. Bridging the gap.....	20
3. Methodology.....	24
4. Data presentation and analysis.....	26
4.1. Introduction.....	26
4.2. EMOTIONAL PAIN IS PHYSICAL PAIN.....	27
4.3. PAIN IS A PHYSICAL FORCE.....	32
4.4. PAIN IS AN OPPONENT.....	34
4.5. THE BODY IS A CONTAINER FOR EMOTIONS.....	36
4.6. PAIN IS A NATURAL FORCE.....	38
4.7. PAIN IS BURDEN.....	41
4.8. PAIN IS DOWN.....	43
4.9. Creativity beyond conceptual mappings.....	45
4.10. Summary.....	48
5. Discussion and Conclusions.....	50
References.....	55
Appendix.....	61

## Declaration page

### Declaration

This submission is my own work. Any quotation from, or description of, work of others is acknowledged herein by reference to the sources, whether published or unpublished.

Name Aristeia-Maria Metaxa

A handwritten signature in blue ink, appearing to read 'Aristeia-Maria Metaxa', written in a cursive style.

Signature

## **Acknowledgements**

First and foremost, I would like to express my deep and sincere appreciation to my supervisor, Dr. Anna Piata, for the constant guidance and encouragement during my research, without which this work would not have been possible. For her unwavering support, I am truly grateful.

I would also like to thank the rest of the supervising committee, Pr. Elly Ifantidou and Pr. Louis de Saussure, for their insightful comments and questions.

Last but not least, I am extremely grateful to my family and friends for their patience and understanding throughout this endeavor.

## **Abstract**

This research aims to examine if and how two prominent theories can be combined in order to provide a comprehensive account of metaphorical expressions, i.e. Conceptual Metaphor Theory (Lakoff and Johnson 1980, 1999, Lakoff 1993) and Relevance Theory (Sperber and Wilson 1986/1995, Carston 2010, Wilson 2011). On the one hand, for cognitive linguists, metaphor shapes human thought. It is a conceptual mapping that influences a good deal of how people talk, reason, and imagine in everyday life. On the other hand, Relevance Theory claims that metaphor understanding is based on pragmatic inferencing. Despite the fact that these two frameworks build on different assumptions and employ a different methodology in the study of metaphor, it has been suggested that they can, and in fact should, be reconciled (Tendahl and Gibbs 2008, Tendahl 2009, Wilson 2011, Piata forthcoming). This thesis wishes to extend this line of research to a non-literary context.

More specifically, this thesis looks at metaphorical expressions of PAIN as these arise in narratives of women who have experienced miscarriage and/or pregnancy loss, to be found in the online forum of the Miscarriage Association in the UK. While they seem to largely conform to the conceptual metaphors of PAIN as proposed in CMT, the expressions of pain under examination communicate some less determinate, weakly implicated meanings that cannot be captured in terms of pre-existing mappings. This is where, I argue, Relevance Theory seems to bridge the gap between cognition and communication with the notion of non-propositional effects, which are imagistic and/or emotional (Carston 2018, Wharton 2003, 2009, de Saussure and Wharton 2019, 2020, Wharton and de Saussure forthcoming). In line with RT, it is suggested that language users make use of metaphorical language that communicates, not necessarily intentionally, certain vague implicatures, which are often interspersed with images and emotions, as a means to express their emotional state and induce emotional effects to the reader. Interestingly, even though such implicatures are mostly associated with poetic and literary language, this thesis shows that metaphorical expressions of PAIN can give rise to images and emotions also in a non-literary context.

**Keywords:** metaphor, Conceptual Metaphor Theory, Relevance Theory, emotions, pain, non-propositional effects.

## Περίληψη

Η παρούσα έρευνα έχει ως στόχο να εξετάσει αν, και σε ποιον βαθμό, δύο αντίθετες θεωρίες μπορούν να συνεργαστούν για να προσφέρουν μια πιο ολοκληρωμένη ερμηνεία των μεταφορικών εκφράσεων, συγκεκριμένα η Θεωρία της Εννοιολογικής Μεταφοράς (Lakoff and Johnson 1980, 1999, Lakoff 1993) και η Θεωρία της Συνάφειας (Sperber and Wilson 1986/1995, Carston 2010, Wilson 2011). Η μεν πρώτη θεωρεί πως οι μεταφορές διεισδύουν στον καθημερινό λόγο και παίζουν ενεργό ρόλο στον τρόπο που οι άνθρωποι όχι μόνο εκφράζονται λεκτικά αλλά σκέφτονται και πράττουν. Η δε δεύτερη εστιάζει στην επικοινωνία και στα νοήματα εκείνα που είναι εμφανή, σε μεγαλύτερο ή μικρότερο βαθμό, ανάμεσα σε συνομιλητές. Μολονότι αυτές οι δύο θεωρίες είναι εκ διαμέτρου αντίθετες ως προς τις αρχές τους και παρότι χρησιμοποιούν διαφορετικές μεθοδολογίες για τη μελέτη της μεταφοράς, θα μπορούσαν ωστόσο να συνυπάρξουν, όπως έχει προταθεί από τους Tendahl και Gibbs (2008), Tendahl (2009), Wilson (2011) και Πιατά (προσεχώς). Η εν λόγω μελέτη κινείται προς αυτή την κατεύθυνση.

Πιο συγκεκριμένα, η έρευνα εστιάζει στις μεταφορικές εκφράσεις για τον πόνο όπως αυτές συναντώνται σε αφηγήσεις γυναικών που έχουν βιώσει αποβολή και απώλεια εγκυμοσύνης. Οι εκφράσεις αυτές ανακτήθηκαν μέσω ενός διαδικτυακού χώρου συζητήσεων (φόρουμ) ο οποίος είναι διαθέσιμος στον ιστότοπο της Βρετανικής Ένωσης Αποβολών. Τα υπό εξέταση δεδομένα φαίνεται να συμφωνούν με τις εννοιολογικές μεταφορές του πόνου όπως αυτές έχουν προταθεί εντός της Θεωρίας της Εννοιολογικής Μεταφοράς, ωστόσο η ερμηνεία τους περιλαμβάνει πιο ασαφή υπονοήματα τα οποία δεν μπορούν να εξηγηθούν με βάση τις προϋπάρχουσες αυτές συνδέσεις. Η προτεινόμενη ανάλυση δείχνει πως η Θεωρία της Συνάφειας μπορεί να γεφυρώσει αυτό το κενό με τα μη λογικοπροτασιακά νοήματα, τα οποία αφορούν εικόνες ή/και συναισθήματα (Carston 2018, Wharton 2003, 2009, de Saussure and Wharton 2019, 2020, Wharton and de Saussure προσεχώς). Πιο συγκεκριμένα, υποστηρίζω, σε συμφωνία με τη Θεωρία της Συνάφειας, ότι οι χρήστες της γλώσσας χρησιμοποιούν τις μεταφορές, οι οποίες επικοινωνούν τέτοιου είδους ασαφή νοήματα, εικονικού είτε συναισθηματικού χαρακτήρα, περισσότερο ως μέσα για

να εκφράσουν παρά για να περιγράψουν τον πόνο. Παρόλο που τέτοια λιγότερο σαφή νοήματα συναντώνται ως επί το πλείστον σε λογοτεχνικά πλαίσια, η παρούσα έρευνα φανερώνει ότι εικόνες και συναισθήματα απαντώνται ακόμα και σε μεταφορές που εντοπίζονται σε μη-λογοτεχνικά περικείμενα.

**Λέξεις-Κλειδιά:** μεταφορά, Θεωρία της Εννοιολογικής Μεταφοράς, Θεωρία της Συνάφειας, συναισθήματα, πόνος, μη λογικοπροτασιακή σημασία.

## **Chapter 1**

### **Introduction**

Metaphor has been extensively studied through the lens of different disciplines, including linguistics. Two of the most prominent theories that have contributed to metaphor understanding are Conceptual Metaphor Theory (Lakoff and Johnson 1980, 1999, Lakoff 1993) and Relevance Theory (Sperber and Wilson 1986/1995, Carston 2010, Wilson 2011). Despite the fact that these two frameworks build on different assumptions and employ a different methodology in the study of metaphor (for more detail see Chapter 2), it has been suggested that they can, and in fact should, be reconciled (Tendahl and Gibbs 2008, Tendahl 2009, Wilson 2011). However, little empirical work has been done in this direction (cf. Piata forthcoming). This research therefore aims to fill this gap by examining if and how these theories can be combined in order to provide a comprehensive account of metaphorical expressions.

On the one hand, for cognitive linguists, metaphor shapes human thought. It is a conceptual mapping that influences a good deal of how people talk, reason, and imagine in everyday life (Lakoff and Johnson 1980, Lakoff 1993, Lakoff and Johnson 1999, 2003). Emotions, in particular, have been extensively analyzed under the scope of cognitive linguistics (see, among others, Wierzbicka 1986/89, 1992, 1994, 1999, Athanasiadou and Tabakowska 1998, Enfield and Wierzbicka 2002). In the domain of PAIN, highly influential is the work by Kövecses (1986, 1988, 1990, 1995, 2000, 2005, 2008), who maintains that emotion concepts are “largely metaphorical and metonymic in nature” (2014: 15). Thus, the concept of PAIN is metaphorically conceptualized in terms of its potential causes, with the causes being used as conventional source domains to metaphorically structure pain (Kövecses 2006: 24).

On the other hand, Relevance Theory advocates that human cognition and communication tend to be geared to the maximisation of relevance (Sperber and Wilson 1986/1995, Sperber and Wilson 2002, Carston 2002, Wilson 2004, Wilson and Carston 2007). It is concerned with ostensive acts of verbal communication, which draw the addressee’s attention to the fact that the

communicator intends to convey a proposition that therefore needs to be recovered by the addressee. Metaphor understanding is also based on pragmatic inferencing. However, the propositional meaning of a metaphorical utterance does not always suffice, especially when emotions are involved. Pilkington (2000), focusing on poetic language, claimed that emotions, attitudes, and moods are as integral an aspect of poetry as its propositional components. Similarly, in Carston's view the full understanding of any metaphor involves *non-propositional effects* (images and emotions) together with its propositional meaning (2010: 300). These effects are believed to be much closer to the indeterminate end of the paraphrasability continuum (Sperber and Wilson 2015) and to involve the activation of perceptual, emotional or sensorimotor mechanisms (Wilson and Carston 2019: 32). Recently, some new and promising insights have been provided by de Saussure and Wharton (2019, 2020), with their newly introduced notion of "emotional effects" aiming to complement that of cognitive effects. In this account, during emotional communication there are certain emotional procedures triggered by the user that are more likely to be identified and processed by the addressee (Wharton and de Saussure forthcoming).

It is widely acknowledged that both theories have had a remarkable impact on metaphor understanding. Nonetheless, they are not without their critics. On the one hand, the cognitive linguistic approach suffers from certain downsides since it is vastly underspecified as an account of moment-to-moment metaphor processing (Tendahl and Gibbs 2008: 1843). On the other hand, Relevance theory lacks specificity on how we loosen or narrow lexical concepts into *ad hoc* concepts and ignores a wider network of metaphorical expressions and conceptual metaphors (*ibid*: 1847). Such criticism has rightly brought to the fore the weaknesses of the two frameworks, but has also seen the two theories as complementary despite their differences. Tendahl and Gibbs (2008) were the first to embrace a combination of the two frameworks, supporting the idea of mappings as crucial in accessing contextual assumptions and also the idea that metaphor interpretation is relevance-driven. In a similar vein, Wilson (2011) claimed that Cognitive Linguistics and Relevance Theory can be reconciled if we look for evidence that some metaphors arise in language use and others in

thought. Last but not least, Piata (forthcoming) offers the first, to date, attempt to empirically combine conceptual mappings and contextual assumptions, albeit in the discourse context of poetry. The proposed research wishes to extend this line of research to a non-literary context. Both theories will be presented in detail in Chapter 2.

More specifically, this thesis will look at metaphorical expressions of PAIN as these arise in narratives of women who have experienced miscarriage and/or pregnancy loss, to be found in the online forum of the Miscarriage Association in the UK (see Chapter 3). This emotion was not arbitrarily chosen. Apart from the prolific linguistic literature, it was hypothesized that pain would be the ideal ground to explore the synergy of the theories due to its intrinsic nature. The International Association for the Study of Pain (IASP) has offered a revised definition according to which pain is an “unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage” (Raja et al. 2020: 1977). In other words, pain is broadly defined as any negative physical and/or emotional feeling that could be, but not necessarily, dependent on bodily damage. This definition serves the purposes of the study as it comprises a wide range of negative feelings and sensations. Pain is always a personal experience that is influenced, to varying degrees, by biological, psychological, and social factors and it is through their life experiences that individuals learn the concept of pain. More importantly, however, verbal description is only one of several behaviors to express pain; “inability to communicate does not negate the possibility that a human experiences pain” (*ibid*: 1977).

The corpus data will be primarily categorized and subsequently qualitatively analyzed with the aim to explore, on the one hand, which conceptual mappings underlie the metaphorical expressions of PAIN and, on the other, in what ways the interpretation of these metaphors may involve non-propositional effects, including emotional responses. In line with the existing literature (see Chapter 2), it is hypothesized that the two frameworks can provide complementary, yet differently grounded, perspectives on metaphor understanding. In addition, this study is aimed to also contribute to the on-going discussion of metaphors that

appear in lay people's personal narratives as a means to express past, private, and painful experiences of pregnancy loss (cf. Littlemore and Turner 2020). Although not artistically crafted, such metaphors are likely to be creative and expressive.

This thesis is structured as follows: in Chapter 2 I present the two theories and the attempts to bridge the gap between them. Chapter 3 is dedicated to the methodology of the research. Chapter 4 is concerned with an extensive analysis of the corpus data. Specifically, I refer to the conceptual mappings of the metaphors and I also address the issue of pragmatic inferencing and the non-propositional effects that are involved in the interpretation of the metaphorical expressions. Lastly, in Chapter 5 I discuss the findings of the thesis and make some suggestions for further research.

## **Chapter 2**

### **Literature Review**

#### **2.1 Introduction**

This chapter aims to present the theoretical background of this thesis. First, I will outline Conceptual metaphor theory (Lakoff and Johnson 1980, 1999, Lakoff 1993) and discuss its basic assumptions, with a particular focus on metaphors of emotion and especially conceptualizations of PAIN as these were studied by Kövecses (1986, 1988, 1990, 1995, 2000, 2005, 2008, 2014). Next, I will sketch Relevance Theory (Sperber and Wilson 1986/1995, Carston 2010, Wilson 2011), and how it treats metaphor, especially those instances that communicate non-propositional effects (Carston 2018), including emotional effects (Wharton 2003, 2009, de Saussure and Wharton 2019, 2020, Wharton and de Saussure forthcoming). Finally, I will consider how the two theories can provide complementary perspectives in order to reach a more comprehensive account of metaphor understanding. The idea is not in itself new, as Tendahl and Gibbs (2008), Tendahl (2009), Wilson (2011) and Piata (forthcoming) have already proposed a synergy between the two theories, albeit on a different basis.

#### **2.2 Metaphors of PAIN in Cognitive Linguistics**

This section aims to present how metaphor is treated within Conceptual Metaphor Theory. For Lakoff and Johnson (1980, 1999, Lakoff 1993) metaphor is regarded as a matter of cognition and is stripped of its merely stylistic proprieties. It is claimed to be pervasive in everyday life as it is believed that people speak metaphorically because they think, feel and act metaphorically. The gist of the theory is a system of conceptual mappings across cognitive domains, which are in essence a way in which a source domain is mapped onto aspects of a target domain. Thus, people structure an abstract concept on the grounds of more concrete aspects of thought, for instance SAD IS DARK as in, e.g., “He is *in a dark mood*”. These metaphorical conceptualizations are referred to as conceptual metaphors, which motivate and constrain our use of language. The linguistic

metaphorical expressions, or verbal expressions, are therefore seen as by-products of conceptual metaphors.

### *2.2.1 Metonymy and Embodiment of Emotions*

One of the main assumptions within CMT is that conceptualization, including that of emotion categories, depends on embodiment; that is, conceptualization has a bodily basis (Kövecses 1995, 2000b, Lakoff 1987, Lakoff and Kövecses 1987, Yu 1995, 1998). In order to explain the embodied nature of metaphor, we need to account for its metonymic basis.

Metonymies in general are defined as mappings within the same conceptual domain. They have a referential function as they involve the use of one entity to stand in for another closely associated entity. They are not arbitrary; like metaphors, they are motivated by, and grounded in, our experience, and are also culturally filtered. For instance, in THE PART FOR THE WHOLE metonymy, parts are related to the wholes in which they belong (Lakoff and Johnson 1980: 37). Consider the following example retrieved from Lakoff and Johnson (1980: 36):

(1) There are a lot of *good heads* in the university.

What is actually meant in this case is that there are many intelligent people in the university. The choice to refer to these people by means of their heads is motivated because intelligence is part of the mind/ head, which metonymically stands for the whole person.

Emotion concepts have been extensively analyzed in this framework (see, among others, Wierzbicka 1986/89, 1992, 1994, 1999, Athanasiadou and Tabakowska 1998, Niemeier and Dirven 1997, Enfield and Wierzbicka 2002). The most comprehensive account to date has been offered by Kövecses (1986, 1988, 1990, 1995, 2000, 2005, 2008, 2014).

In relation to emotions, metonymies within a given language are employed as the basis for the construction of an emotion's cognitive model and, along with the corresponding metaphors, they highlight particular aspects of an emotion (Kövecses 1990) (on universality and variation see Kövecses 2000, 2005). At the

same time, metonymies are closely related to physiological behavior associated with an emotion; this is what Barcelona (2000b: 42) calls “metonymic conceptual motivation of metaphor”, contributing to the embodied character of an emotion concept (Lakoff 1987: 407):

There is an important connection between emotion metaphors and metonymies; namely, that the metonymies can be said to motivate the metaphors. This motivation is not simply linguistic or conceptual but also physical, in the sense that the metonymies indicate certain physical aspects of the body involved in emotion. The physical aspect indicated by emotion metonymies can be factored into two types: behavioral and physiological.  
(Kövecses 2008: 382)

A case in point is ANGER as in “*She was boiling with anger*”, an example that indicates this connection between hot fluid in a container and anger. Thus, in other words, metonymies are, in essence, mediators between emotions and language, through one of its basic constituents, the body. This reflects the already existing metonymic relationship between emotions and the body, since the body is the stage for the manifestation of emotions. This close relationship had also been observed by Lakoff and Johnson (1980: 39), as the grounding of metonymic concepts involves physical or causal association.

### *2.2.2 Emotion conceptualizations*

The study of emotion metaphors in general is prolific in Cognitive Linguistics, including emotions such as sadness, depression, joy, happiness, and anger (Lakoff and Kövecses 1987, Lakoff 1987, Kövecses 1986, 1988, 1990, 1991b, 1995a, 2000). Drawing on Talmy’s (1988) force dynamics, Kövecses suggests that “the conceptualization of emotions relies on one of our most fundamental image schemas: the FORCE schema, in which two forceful entities are in interaction” (2013: 77). In essence, he contends that most metaphors of emotion are derived from a more general one, EMOTION IS FORCE. The FORCE schema is well motivated. We can trace back its origins in the EVENT STRUCTURE metaphor. In this account, causes of events are understood in terms of forces, giving rise to the CAUSES ARE FORCES conceptual metaphor. Since emotions are themselves seen as having causes, it is assumed that they can metonymically be understood in

terms of these causes, resulting to the EMOTIONS ARE CAUSES metaphor. Combining these two major metaphors, it thus transpires that EMOTIONS ARE FORCES, a pattern largely attested throughout the data as will be discussed in Chapter 4. This is schematically shown in the cognitive model of emotions, as suggested by Kövecses (2000):

Cause of emotion → emotion → (controlling emotion) → response

It should be noted that Kövecses is concerned with emotions that cause external responses rather than with forces that give rise to emotions (Lascaratou 2006: 157).

### 2.2.3 Pain, Sadness and Grief

In light of the discussion above, Kövecses' claims seem to apply also to the concept of PAIN. This emotion, he argues, is conceptualized metaphorically in terms of its potential causes, with the causes being used as conventional source domains to metaphorically structure pain (Kövecses 2006: 24). Based on linguistic evidence, Kövecses has identified several specific-level conceptual mappings (*ibid*: 25), shown in Table 1 below:

**Table 1:** Conceptual metaphors of PAIN, according to Kövecses (2006).

Conceptual metaphors of PAIN	Examples
PAIN IS PRESSURE IN A CONTAINER	'He was not strong enough to hide the <i>exploding</i> pain.'
PAIN IS A NATURAL FORCE	'He was trying to push back the <i>waves</i> of pain.'
PAIN IS A PHYSICAL FORCE	'He was suddenly <i>knocked down</i> by pain.'
PAIN IS A SOCIAL SUPERIOR	'My life is <i>ruled</i> by pain.'

PAIN IS AN OPPONENT	'She's <i>struggling to</i> overcome pain.'
PAIN IS A CAPTIVE ANIMAL	'My pain <i>got out of hand</i> .'
PAIN IS INSANITY	'In the last hours she <i>grew crazy</i> with pain.'
PAIN IS A FORCE DISLOCATING THE SELF	'She was <i>beside herself</i> with pain.'
PAIN IS BURDEN	'Life is too short <i>to carry pain around</i> .'

It thus transpires that pain metaphors are not isolated and unrelated specific-level metaphors, but are organized around, and generate from, the generic concept of FORCE, as analyzed by Talmy: “[t]he various emotion/pain metaphor source domains are instantiations of the concept of force, providing a firm grounding for emotions/pain metaphorical basis” (Kövecses 2000: 85). If we take a closer look, we can see that the natural and physical forces are experientially based source domains. Consider a case of physical contact and the force it entails, especially if it is a violent one, or the case of a natural phenomenon, such as an earthquake and its powerful impact on nature and humans. In the case of burdens, they seem to be understood as entities that exert some kind of power/ force to the body causing distress, both physical and psychological. Similarly, a social superior is often understood as someone who exerts force, with a view to impose his social power or status. This difference in the nature of FORCE could possibly be the reason why the PAIN IS A BURDEN metaphor was found amongst the data but PAIN IS A SOCIAL SUPERIOR was not. The emotional pain of pregnancy loss is highly unlikely to have a social dimension.

The conceptualization of emotions, and subsequently PAIN, in terms of body parts seems to be strongly based in experiential terms (see Foolen 2005, Kövecses 2000, Niemeier 2003), but also varies cross-culturally and cross-linguistically (see Enfield and Wierzbicka 2002). Psychological pain is typically associated

with only one body part, the most predominant one being the heart, at least in the English language (Marmaridou 2006: 425). Exploiting this metonymic relation between the body part and the person, which is viewed as the seat of the soul, Marmaridou makes some interesting remarks on the conceptualization of pain:

... these observations argue in favour of the metaphorical understanding of psychological pain cross-culturally on the basis of the NON-PHYSICAL IS PHYSICAL metaphor, whereby the conceptualization of physical pain is extended and mapped onto the abstract domain of psychological pain in terms of a culture-specific model (e.g., the heart as the seat of the psyche/emotions/thinking, etc.). The interaction of conceptual, metaphorical structure and a cultural model of the non-material self appears to yield the conceptualization of psychological pain as residing in a particular body part in a language-culture complex.

(Marmaridou 2006: 426)

Psychological pain, however, cannot be strictly defined. As already noted in the Introduction, the proposed definition by IASP suggests that pain is “an unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage” and thus leaves room for other expressions that are closely related to pain, such as sadness. The latter is described as a negative emotion since it expresses an appraisal of something bad for the self, and is included among the basic or primary emotions (e.g., Ekman 1999, Izard 1991, Shaver, Schwartz, Kirson and O’Connor 1987). Izard, more specifically, defines sadness as being caused by the loss of someone or something held dear through death or separation (1991: 200). Amongst the numerous studies on sadness in different languages (e.g., Barcelona 1986, Esenova 2011, Kövecses 2000, Moradi and Mashak 2013, Stefanowitsch 2006, Tissari 2008, Van Trào 2014), Kövecses (2000), building on Barcelona (1986), provides some interesting insights on English. A closer examination of his proposed list of sadness metaphors (see Table 2 below) reveals that the most prominent ones seem to overlap with those of pain. In short, both pain and sadness are conceptualized as a physical force; a natural force; a burden; an opponent; a social superior; and insanity.

**Table 2:** Conceptual metaphors of SADNESS, according to Kövecses (2000).

Conceptual Metaphors of SADNESS	Examples
---------------------------------	----------

SAD IS DOWN	‘He <i>brought</i> me <i>down</i> with his remarks.’
SADNESS IS A PHYSICAL FORCE	‘That was a <i>terrible blow</i> .’
SADNESS IS A NATURAL FORCE	‘ <i>Waves</i> of depression <i>came over him</i> .’
SADNESS IS INSANITY	‘He was <i>insane with</i> grief.’
SADNESS IS A BURDEN	‘He <i>staggered under</i> the pain.’
SADNESS IS A CAPTIVE ANIMAL	‘His feelings of misery <i>got out of hand</i> .’
SADNESS IS AN OPPONENT	‘He was <i>seized by</i> a fit of depression.’
SADNESS IS A SOCIAL SUPERIOR	‘She was <i>ruled</i> by sorrow.’

Evidently, these findings corroborate the assumption that “the figurative linguistic expressions that speakers use to talk about their emotions derive from a largely shared conceptual system” (Kövecses 2000: 34). These commonalities cannot be arbitrary. They rather suggest that metaphors do not just surface by accident, but actually reflect systems of thought which in some cases are (near) universal. In the case of pain and sadness, these common patterns could potentially serve as indicators of the close ties between negative emotions at large.

Considering the focus of this thesis, namely women’s narratives of pregnancy loss, the pain expressed is found to be conceptualized similarly to grief. According to health psychology, grief can be manifested through figurative language, especially metaphors, as “metaphors provide a means to both cognitively and emotionally express grief” (Corless et al. 2014:136). On the basis of reports on bereavement, two common metaphors of grief have been identified: the metaphor of the hole, and the metaphor of the journey (Rosenblatt and Bowman 2013: 84). In the former case, the hole appears to be in various body parts, such as in the heart, in the body, or even as missing parts of the self. It is used to signify the loss of someone, the hole/empty space that is left behind on someone’s house, life, future plans or even in the giving and receiving of love.

Also, a hole could possibly imply that something, probably the self, needs repair in the form of acknowledgement and empathy. In the latter case, grief is commonly understood as a process in the form of a journey. Just like a journey, grief has a beginning and possibly an end, potential partners along the journey, obstacles along the way, etc.

So far, this chapter has focused on CMT and, in particular, on its account of emotion conceptualization. Along these lines, emotions are not merely feelings but concepts of the mind, structured by means of metaphor. Metaphor is thus viewed as a cognitive mechanism of understanding the abstract through the concrete. Through entrenched cross-domain mappings people understand and talk about, e.g., pain in terms of an opponent. Such a view, however controversial, has received empirical support through experimental studies (see Cienki and Müller 2008, Nikiforidou 2012). What is considered nonetheless to be a limitation in the study of emotions is that the latter are treated solely as cognitive structures while leaving aside emotional effects. CMT suggests that language and, in particular, figurative language is but a mediator to describe what lies in the mind. What will be proposed below is that metaphors do not only reveal the workings of the mind but also *express* emotions. I will specifically argue that this gap can be addressed through Relevance Theory.

## **2.3 Emotion communication in Relevance Theory**

### *2.3.1 Basic Principles*

This part of the chapter will offer an overview of Relevance Theory with the aim to provide a better understanding of language in communication. Unlike Cognitive Linguistics, Relevance Theory (henceforth RT) is interested in language per se and seeks to offer a comprehensive view of communication in general (Blakemore 2002, Carston 2002, Sperber and Wilson 1986/1995, Wilson and Sperber 2004, 2012). While emotion had long been disregarded within pragmatics, relevance theorists have recently attempted to account for non-propositional effects and for how these have an impact on the interpretation of metaphor and, in general, figurative language in verbal and non-verbal

communication (Wharton 2003, 2009, Wharton and Strey 2019, Sperber and Wilson 2015, de Saussure and Wharton 2019, 2020, de Saussure and Schulz 2009, among others).

Communication is defined as an ostensive-inferential process which gives rise to expectations of optimal relevance, with the aim to derive as many cognitive effects as possible for as little effort as possible. A positive cognitive effect is one that “contributes positively to the fulfilment of cognitive functions or goals” (Sperber and Wilson 1995: 265) such as ‘contextual implications’. The latter is a conclusion that one can derive when she processes a specific input in a specific context. Let’s assume that we are students waiting in class for the professor to arrive. Usually, the class starts at 09.15. Looking at the time, which is 09.20, we conclude that the professor has run late for the lecture. This certainly requires some processing effort, defined as “the effort which a cognitive system must expend in order to arrive at a satisfactory interpretation of incoming information” (Carston 2002: 379); a satisfactory interpretation is one which meets expectations of relevance.

The gist of RT is based on principles that are on a par with each other. The Cognitive Principle of Relevance suggests that human cognition tends to be geared towards the maximization of Relevance (Sperber and Wilson 1995). At the same time, all communication conforms to the Communicative Principle of Relevance according to which, “every act of inferential communication conveys a presumption of its own optimal relevance” (Sperber and Wilson 1995: 270). Optimal relevance is defined as follows:

- (i) The ostensive stimulus is relevant enough for it to be worth the addressee’s effort to process it.
- (ii) The ostensive stimulus is the most relevant one compatible with the communicator’s abilities and preferences.

*(idem)*

The output of communication is usually propositional import about states of affairs in the world, which can be expressed either explicitly or implicitly. This dichotomy gives rise to the underdeterminacy thesis. What is linguistically

encoded is not always enough for the hearer to understand an utterance, so pragmatic inference is also necessary if we want to work out ‘what is said’ as defined by Grice (Carston 2002).

### 2.3.2 *Ad hoc concepts*

In this account, metaphors are considered to be part of the explicit proposition of an utterance. Their interpretation process is a matter of pragmatic adjustment, which accounts for the modification of linguistically specified word meanings in context. More specifically, lexically encoded concepts are adjusted in the process of deriving the proposition explicitly communicated. Pragmatic adjustment results in an *ad hoc*, occasion-specific concept, whose denotation may be broader than that of the encoded concept or narrower or both. In the case of broadening, “a more general sense” of the word is communicated (Wilson 2004: 344), while narrowing gives “a more specific sense than the encoded one” (Wilson and Carston 2007: 232). Consider the following examples:

- (2) In order to climb the mountain, you will need a good pair of *shoes*.
- (3) The party starts at **8.00 pm**.

Example 2 illustrates a case of narrowing, since the word *shoes* refers to a specific kind of shoes, that of sports or climbing shoes that are suitable for this particular activity; thus, here the sense of *shoes* is more specific than the lexically encoded word. In contrast, in example 3, what is communicated by *8.00 pm* is that guests are expected to arrive around 8 o’clock, that is no sooner than that and not around 8.30 pm. The concept here is more general and has a broader denotation than 8.00 sharp, which is rarely the case for parties.

On the RT account, metaphor is considered to be a case of loose use of language, usually in the form of broadening, for which no special processing mechanism is required. As for all uses of language, metaphors simply follow the path to optimal relevance. Let us briefly consider an example:

- (4) My mother is *a saint*.

According to RT, the hearer first decodes the utterance. The encoded concept of SAINT is a clue to the speaker's intended meaning, activating the logical property of the concept (e.g., a saint is supernatural) and a number of encyclopaedic properties (e.g., a saint is kind, innocent, pure etc.). Depending on the context, different aspects of these encyclopaedic properties will surface. During the interpretation, the logical property of the encoded concept is left aside, causing the encoded concept to become broadened, resulting in the *ad hoc* concept SAINT\*, which is part of the proposition expressed. In a context, for instance, where someone describes her mother's character qualities and uses the utterance in example (4), the proposition expressed is that the mother is an extremely kind person who lacks any bad qualities.

RT has also attempted to account for instances where the encoded concept and the *ad hoc* concept are disjoint. This could be illustrated with a commonly discussed example, cited in (5) below:

(5) Robert is *a bulldozer*.

The intended meaning of the utterance is that Robert possesses certain characteristics, such as being unyielding, insensitive, pushy, unaware of the feelings of others, proprieties that are not part of the encyclopaedic entry of the bulldozer. These properties are referred to in the literature as “emergent properties”, since they are “neither standardly associated with the individual constituents of the utterance in isolation nor derivable by standard rules of semantic composition” (Wilson and Carston 2008: 1). At first, it was noted that these examples could threaten the value of the RT account of metaphor interpretation as there is no definite answer to how this ‘mapping’ from the lexically encoded concept to the *ad hoc* concept is realized as in cases like (5) above (Carston 2002). However, it was later argued that, following the relevance theoretic framework, the interpretation of ordinary expressions involves a wholly inferential processing (Wilson and Carston 2006: 404).

### 2.3.3 *Non-propositional effects*

However, RT is not concerned only with the strongly communicated propositional meanings of utterances. It is a basic tenet of RT that propositions vary in the strength with which they are communicated (Sperber and Wilson 1986/95, 2008, 2015). Therefore, a speaker “may have in mind a vague range of possible interpretations with roughly similar import, any subset of which would contribute to the relevance of her utterance, and a weak intention, for any of the implications in that range, that the hearer/reader should derive it; these are weak implicatures” (Sperber and Wilson 2008: 99). When dealing with a wide array of propositions, not all of them are equally evident to the addressee. Some inferences are stronger and more salient while others are not, making the processing effort vary as well. Relevance theorists employ the term manifest and flesh out ostensive communication in the form of intentions as follows (Wilson and Carston 2019: 37):

**Informative intention:**

To make manifest (or more manifest) to the addressee an array of propositions.

**Communicative intention:**

To make the informative intention mutually manifest to communicator and addressee.

Poetic and literary language are seen as the most appropriate representatives of weak implicatures (Clark 2013: 238). In fact, cases of figurative language, such as poetic metaphors, are seen as communicating something less determinate, more nuanced, perhaps interspersed with images, that Relevance theory has described as a non-propositional effect (Wilson and Carston 2019: 32). These instances, although non-restricted to figurative language, have an intrinsic nature, as they are open-ended, and they can be paraphrased in different ways (*ibid*: 32-3).

Most importantly, however, these effects activate perceptual, emotional or sensorimotor mechanisms and are considered ostensive as they attract the addressee’s attention and focus it on the communicator’s intentions. Similarly, Pilkington (2000), focusing on poetic language, claims that emotions, attitudes, and moods are as integral an aspect of poetry as its propositional components. For

RT, these effects are automatically activated by-products of linguistic and pragmatic processes, which may nonetheless be intentionally encouraged by creative uses of language. Thus, such cases of novel, creative and/or extended metaphors require a different mental processing route. On that mode, *ad hoc* concept formation is abandoned. Instead, the literal meaning of the linguistic metaphor is preserved, together with the mental images that it triggers. Literal meaning is thus the basis for a slower inferential processing, and in a sense strengthens these images. All implications derive from literal meaning and map onto the topic of the metaphor (Carston 2010, Carston and Wearing 2011, Giora 2003). A great example of this alternative process is the creative metaphor of pain analyzed in Chapter 4, Section 9.

For these ‘image metaphors’, the mental imagery evoked is crucial in their understanding, “without thereby making any commitment to images being *essential* components in the understanding of these metaphors” (Carston 2018: 214). During the comprehension of a metaphor, the possibility of mental imagery to surface or not is possibly dependent on other processes, such as the novelty, creativity and extendedness of the metaphor, and the time/effort involved in reaching an interpretation (*ibid*: 215). Thus, the more creative a metaphor, the more images are evoked, contributing to a more comprehensive interpretation of the intended meanings. Even if they are cognitive side-effects of pragmatic processes in verbal communication, mental images are still essential for several reasons. They may be the most powerful ones derived by the hearer, communicatively intended, making a valuable contribution to the derivation of cognitive implications (*ibid*: 215).

Emotions as such play an important role in human interaction at large and their effects are not only common but essential in communication as much as cognitive ones. For Wharton (2009), drawing on Rey (1980), emotions involve an interaction between several elements: *cognitive*, *qualitative* and *physiological*. So, the emotion of sadness is characterized as involving an interaction between a *cognitive* element – knowledge that something bad has happened; a *qualitative* element – the feeling of being ‘down’, typically met with these emotions; and a

*physiological* element – neurochemical changes, which, in the case of sadness or depression, involves depletion of norepinephrine (Wharton 2015: 20-21).

More recent developments within RT have incorporated emotions as central components of metaphor interpretation and understanding. According to Wharton and de Saussure (forthcoming), “creative metaphors can also be privileged agents for emotional effects”. Sperber and Wilson (2015: 138) argue that creative metaphors of this kind convey what they call ‘impressions’, which cannot be described in words. However, Wharton and de Saussure (forthcoming) further suggest that, apart from the weak implications they give rise to, they are also agents of a range of personal memories, intimate experiences, imaginary feelings, which actually motivate such metaphors. In their own words, “[i]t’s about sharing emotion by making them manifest, and expressing feelings rather than merely describing them. It is in this sense that we suggest such metaphors are not only ineffable but also agents of emotional effects” (*ibid*).

These emotional effects are believed to be ostensibly manifested and to echo one’s private emotions, either through memory of personal experience or by simulating feelings. In other words, it is not a matter of inference that is logically derived. There is a much more direct, immediate way of processing information that leads a hearer to somehow ‘catch’ an emotional state made manifest by a speaker using, amongst others, figurative forms of language loaded with emotional effects. *Emotional effects, or positive affective effects*, are passed on to a hearer by means of this kind of immediate process, an idea that resembles what psychologists call “emotional contagion” (Hatfield et al. 1994), in which both the emotional information and the states themselves are carried over to the hearer (Wharton and de Saussure forthcoming). Interestingly, they point out that especially in the case of creative metaphors affective effects are elicited since this kind of metaphor activates intimate experience in a specifically expressive way (de Saussure and Wharton 2020: 201). It is on the basis of our experiences that we understand and interpret these meanings.

These latest developments suggest a shift from propositional meaning as the intended import of any given metaphor to non-propositional effects that are also

derived from metaphor understanding – much less determinate, yet rife with affective meanings. These mental images and emotions that accompany creative, if not all, metaphors seem indispensable when it comes to metaphor understanding (see Chapter 4 and 5). Empirical data from an applied linguistics perspective further suggest that “emotional, imagistic meaning and literal paraphrases impact the interpretation of metaphors in EFL similarly and can be accommodated in Carston’s account which predicts that imagery is indispensable in metaphor processing regardless of processing mode” (Ifantidou and Hatzidaki 2019: 88). In other words, it seems that in cases where the literal meaning of a metaphorical expression is ambiguous, one could benefit from a deeper pragmatic processing and focus on the related mental imagery. By the same token, what I will propose is that images and emotions facilitate the comprehension of pain metaphors, given that the metaphorical expressions at hand are by definition highly subjective and affective, thus difficult to be properly explained in their own right.

## **2.4. Bridging the gap**

[w]e claim that Cognitive linguistics and Relevance theory are both much needed and can actually be integrated to a large extent as a cognitive theory of metaphor, even if there remain significant differences between these frameworks at a more global theoretical level.

(Tendahl & Gibbs 2008: 1824)

So far, this thesis has ventured into exploring two accounts of metaphor that have been, until recently, kept apart from each other. On the one hand, conceptual metaphor theorists treat metaphor as a figure of thought, which is fundamental in our conceptual system and thus structures abstract reasoning. On the other hand, for relevant theorists, metaphor arises in communication and is a manifestation (one among many) of speaking loosely in order to express our thoughts, which need not be metaphorical. Taking into consideration their fundamental differences, Tendahl and Gibbs (2008) set out to provide a more comprehensive account of both metaphor production and interpretation. The result is a “hybrid theory of metaphor” (Tendahl 2009), which integrates both frameworks by

incorporating conceptual mappings into a theory of utterance interpretation along the lines of RT.

More specifically, having critically discussed each theory's influential work, Tendahl (2009) systematically compares and contrasts the two frameworks based on several parameters. This comparison was crucial for his work as he claims that "one reason for the mutual disapproval of the two theories is probably a certain lack of knowledge about each other on both sides" (*ibid*: 249). He thus engages in a discussion, identifying shortcomings of the theories which could compensate for one another. Filling those gaps was the backbone of his hybrid theory. Amongst others, he arguably points out that relevance theorists are restricted in their possibilities to analyze what is going on in metaphorical language, because they ignore structures like conceptual metaphors and metonymies or image schemas, which are essential in metaphorical thought and language. Cognitive linguistics, on the other hand, has neglected the context in which metaphors appear or the pragmatic effects they give rise to.

In a similar vein, Wilson (2011) attempted to resolve some issues from a different perspective. First, she takes stock of conceptual mappings and how they can be reanalyzed in relevance theoretic terms. More specifically, she views conceptual mappings as recurrent patterns that arise from an extensive use of metaphorical expressions during communication. This means that an *ad hoc* concept that is regularly and frequently used may stabilize in a community, prompting an extra lexicalized sense (Sperber and Wilson 1998, Vega Moreno 2007, Wilson and Carston 2007). This routinization, as Vega Moreno (2007) shows, is relevance-driven. The more a word is broadened or narrowed in a particular way, the less effort it will cost to follow the same route in the future. For cognitive linguists, repeated metaphorical expressions create systematic cross-domain mappings, which in turn give rise to, and facilitate, the interpretation of new linguistic metaphors of the same patterns. For relevance theory, these patterns of activation would ultimately derive from the repeated use of linguistic metaphors; thus, they arise for communicative, rather than purely cognitive, reasons (Wilson 2011: 209). This central difference between communication and cognition could be

reconciled, according to Wilson (2011), if we look for evidence that some metaphors arise in language use and others in thought.

In addition, Wilson addresses the issue of inferential processing, highlighting ways that cognitive linguistics can benefit from RT. She acknowledged that both theories rely on inferential paths to derive meanings. Nonetheless, she distinguished between mere conceptual associations or co-activations from valid inferences. She claims that general-purpose, cognitive inferences fall short in explaining the essence of communication, that is the communicator's intended meaning. Instead, RT proposes a possible way out: "[w]hat makes it valid to draw a particular inference in interpreting a given utterance is that, unless this inference were valid, the utterance would not yield enough implications to be relevant in the expected way" (*ibid*: 210-211).

Last, but not least, Piata (forthcoming) offers the first, to date, attempt to empirically combine conceptual mappings and contextual assumptions, albeit in the discourse context of poetry. She tentatively sets the ground for an integrated account of poetic metaphor, maintaining that conceptual mappings are essential for metaphor understanding but at the same time they also give rise to contextual effects in the form of affective meanings.

This thesis wishes to extend this line of research to a non-literary context, namely narratives of miscarriage and/or pregnancy loss. It therefore aims to fill a gap by examining if and how these theories can be combined in order to provide a comprehensive account of metaphorical expressions related to emotion. In this effort, this work does not aspire to demonstrate the superiority of any theory over the other. It rather wishes to propose productive lines of thinking to help integrate the processing of affective information into metaphor interpretation. This endeavor is expected to be fruitful and in line with the existing literature, suggesting that emotion and metaphor are interwoven.

So far, I have attempted to present the two theories and the possibility of a synergy between the two. On the one hand, CMT believes that people think metaphorically as they talk and act metaphorically. Metaphorical language is a device that brings entrenched conceptualizations about the world into surface.

Research within the framework suggests that metaphors have their foundation in bodily processes, as it was previously elaborated, especially with regard to emotion concepts. Thus, the motivation of metaphor, the knowledge of what lies within the mind, is well grounded. However, the information that is conveyed through communication is disregarded and this is where Relevance Theory falls into place. As proposed by the latest developments within the framework, metaphors carry strongly intended propositions along with weaker ones, rich in affective meanings such as images and emotions. The way these two theories actually apply to the analysis of metaphor and emotion will be the focus of the next chapters.

## Chapter 3

### Methodology

As already noted in the Introduction, this research is based on authentic linguistic data. Specifically, I tracked down metaphorical expressions of PAIN coming from written personal narratives of women who have experienced miscarriage(s) and/or pregnancy loss, retrieved from an online forum endorsed by the Miscarriage Association in the UK (<https://www.miscarriageassociation.org.uk/myBB/index.php>). The aim, as mentioned before, is two-fold: first, to find out whether the data confirm the proposed conceptual metaphors of PAIN or if they introduce new ones; and secondly, to examine their interpretation process and whether this involves non-propositional effects, as we should expect. It is worth noting that metaphors about pregnancy loss have already been studied by Littlemore and Turner (2020), but on the basis of a small corpus of interviews and with the aim to explore the expression of bereavement.

At the first stage of the research, I aimed to collect metaphorical expressions using the lexeme “*pain*” as a key word for the searches. This was expected to yield expressions of “*pain*” together with adjectival (e.g., “*exploding pain*”), nominal (e.g., “*waves of pain*”), prepositional (e.g., “*in pain*”) and verbal (e.g., “*ruled by pain*”) complements, as well as expressions such as “*pain is/feels like...*”. Since “*pain*” results were limited, an additional lexeme was implemented as a key word: the lexeme “*feel*” as an indicator of expressions that implicitly denote pain (e.g., “*There have been plenty of tears, but I mainly feel empty and numb*”).

The latest version of the Metaphor Identification Procedure (Steen et al. 2010), known as MIPVU, was employed in order to identify those linguistic expressions that are metaphorical, considering that expressions of physical pain also appeared in the data. Through this process, I was able to identify the lexical units that need to be analyzed and determine if these have a more basic meaning or not. The procedure can be briefly described as follows: first, after establishing a general understanding of the text, I determined the lexical unit that was under investigation, e.g., “...the pain would *wash over* me”. Then, I identified its

contextual meaning; the woman feels that pain is like water covering, engulfing herself, i.e. her body/mind/heart. Since this meaning is in contrast with the basic meaning of ‘wash over’, which refers to water covering probably a piece of land, it is deemed metaphorical.

In total, 109 metaphorical expressions were found on the basis of the aforementioned keywords. Any metaphorical expressions related to physical pain were excluded from the results. Once collected, the data were categorized according to their shared patterns, namely the conceptual mappings proposed by Kövecses (2006), as already discussed in Chapter 2. The identified mappings will be discussed in detail in Chapter 4. Finally, the data were analyzed qualitatively in order to explore how the pre-existing conceptual mappings of PAIN give rise to non-propositional effects as predicted by RT.

A detailed analysis of the data will follow in the next chapter.

## Chapter 4

### Data analysis

#### 4.1 Introduction

This chapter is dedicated to the analysis of the data. As it has been previously mentioned, this is a qualitative research with authentic linguistic data that were retrieved from an online Miscarriage forum. In total, 109 metaphorical expressions of PAIN were tracked down and were consequently categorized according to the conceptual mapping they instantiate. This rendered seven conceptual mappings, namely PAIN IS A PHYSICAL FORCE, PAIN IS A NATURAL FORCE, PAIN IS A BURDEN, PAIN IS AN OPPONENT, EMOTIONAL IS PHYSICAL, BODY AS A CONTAINER FOR EMOTIONS and PAIN IS DOWN. Thirteen linguistic expressions that were only met once or twice were left uncategorized. Out of these seven, five categories correspond to the mappings of PAIN proposed by Kövecses (2006), as already discussed in Chapter 2. In particular, the data suggest that women who have experienced a miscarriage talk about, and therefore conceptualize, PAIN as both a PHYSICAL and a NATURAL FORCE, as an OPPONENT, a BURDEN and finally as PRESSURE IN A CONTAINER, which is part of a more general mapping. Kövecses's remaining conceptualizations of PAIN as a SOCIAL SUPERIOR, a CAPTIVE ANIMAL and INSANITY were not attested in my corpus, whereas the mapping of PAIN as FORCE DISLOCATING THE SELF occurred only once (see example 43). The absence of these patterns could be attributed to either the small dataset or to the particular type of pain I examined. Nonetheless, it is not likely that all conceptual metaphors are common and pervasive to the same extent (see Chapter 5).

The two remaining categories of my corpus, namely EMOTIONAL PAIN IS PHYSICAL PAIN and PAIN IS DOWN, largely attest to the metonymic nature of emotions and pain as maintained in CMT. Particularly, the most prominent category, i.e. EMOTIONAL PAIN IS PHYSICAL PAIN, contains metaphorical expressions that suggest that women understand and therefore express emotional pain in terms of physical reality, i.e. their body and especially the heart, as proposed by Marmaridou (2006) and Niemeier (2003). In contrast, instantiations such as “I

feel extremely low” suggest that PAIN IS DOWN, which is one of the main mappings for SADNESS (Barcelona 1986, Kövecses 2005) and DEPRESSION (Jackson 1986, McMullen and Conway 2002, Charteris-Black 2012). Table 3 below illustrates the categories and the number of instances in the corpus:

**Table 3:** Conceptual categories and Number of examples.

<b>Conceptual categories</b>	<b>Number of examples</b>
EMOTIONAL (PAIN) IS PHYSICAL (PAIN)	32
PAIN IS A PHYSICAL FORCE	23
PAIN IS AN OPPONENT	12
BODY AS A CONTAINER FOR EMOTIONS	11
PAIN IS A NATURAL FORCE	8
PAIN IS BURDEN	5
PAIN IS DOWN	5

In the remainder of this chapter, in each section I will analyze each and every conceptual mapping alongside illustrative examples from the corpus data. In so doing, my aim will be to explore how the metaphorical expressions of PAIN reflect more general, pre-existing conceptual mappings and how they also give rise to non-propositional effects related to imagery and affect. The different mappings are presented in order of frequency. Original spellings and punctuation are retained throughout when quoting from the data.

## **4.2 EMOTIONAL PAIN IS PHYSICAL PAIN**

In this section I present and analyze metaphorical expressions that emerge from the general mapping EMOTIONAL (PAIN) IS PHYSICAL (PAIN), which suggests that all emotional categories are experiential, based on the interaction between the self and their environments via metonymies. This pattern is in line with Marmaridou’s (2006) claim that emotional pain is an extension of physical pain. Evidence from neuroscience suggests that experiences of social exclusion or relationship loss may be just as emotionally distressing as experiences of physical pain as they

activate the same underlying neural machinery (Eisenberger 2012: 133). Usually, a particular part of the body is employed as the seat of emotions. In our case, women situate their pain primarily in the heart, following the main English cultural model HEART AS THE SEAT OF EMOTION (Niemeier 2003). Niemeier identified four categories of heart expressions which metonymically stand for the PERSON, a LIVING ORGANISM, an OBJECT OF VALUE or a CONTAINER, each one having its separate sub-models.

The metonymy that is exclusively evident in my corpus is that of the HEART standing for the PERSON as a whole and consequently for the emotional self that is severely inflicted by the loss. With regard to the lexeme ‘heart’ it is worth pointing out that it appears in a number of different grammatical forms. First, the compounds ‘heart breaking’ and ‘heartfelt’ appear in examples (6) and (7) respectively, as shown below:

(6) I had let myself get excited and attached to the pregnancy as if it was going to happen I wish I had stayed more reserved as I had done previously. ***It was heart breaking.***<sup>1</sup>

(7) All these little missing things  
The hot and stinging tears they bring  
The loss we feel. The ***heartfelt pain.***<sup>2</sup>  
At the sad, soft whispering of your name.

The expressions though are quite different. In the former case, the lexeme ‘break’ activates the FORCE schema and therefore construes the heart as a physical entity that breaks into pieces due to pain. This is not the case in the latter example in which pain is just situated in the heart. It is also worth noting that this last example is not creative, even though it appears in the context of a poem.

Moreover, pain metaphors appear in a variety of syntactic constructions. In the examples below, the heart is either the object of the verb (in 8), or the subject (as

---

<sup>1</sup> All examples, including the context in which they appear, are cited in the Appendix; examples 1-50 are forum posts while examples 51- 68 are poems. For every example I will refer the reader to the Appendix. For this particular example see Appendix 5.

<sup>2</sup> See Appendix 57.

in 9) in the transitive constructions “It broke our hearts” and “our hearts broken”, respectively. A different variant is found in the passive construction, again in example (8): “broken hearted”. These forms represent pain as the cause of the breaking in distinct ways. The full examples are presented below:

(8) This soon turned to grief, We lost our first little angel at 5-6 weeks Dec 2010,  
We were told you will find your pain will ease in time  
Our due date came and went Jul 2011, *it broke our hearts*.<sup>3</sup>  
We felt cheated, no baby and *broken hearted*

(9) We were called back, 10 days later, to find out you had no heart beat and died at 6.5 weeks old Dec 2011. Dismayed, I could hardly walk, we both were speechless, *our hearts broken*,<sup>4</sup> not again, why us?

It appears that ‘heart’ collocates mostly with ‘break’ in different variations and significantly less with other lexemes such as ‘wrench’ in example (10):

(10) Your story is very similar to mine and I find myself struggling to give anyone advice because I know the *heart wrenching feeling* of being told your baby has no heartbeat.<sup>5</sup>

This frequent co-occurrence of ‘heart’ and ‘break’ seems to be in accordance with conceptualizations of heart as a fragile object that is easily destroyed and must be handled with care (Niemeier 2003: 205). The heart is treated as the locus of pain but it is also affected by it and therefore destroyed, broken as a result of the loss.

Apart from the heart-related examples, there are also peripheral patterns where pain appears to be located in the ‘soul’ and the ‘gut’, as shown in (11) and (12) respectively:

(11) Having to sit for hours with awful contraction like pains and bleeding when you know your getting nothing at the end of of it was just *soul destroying* for me.<sup>6</sup>

---

<sup>3</sup> See Appendix 66.

<sup>4</sup> See Appendix 66.

<sup>5</sup> See Appendix 17.

<sup>6</sup> See Appendix 3.

(12) Seventh....

Two joyful scans and then silence and a gentle voice at the third

I can't do this again

We're not doing this again

Exhilarating relief and *gut wrenching grief* all at once

Adoption assessment...<sup>7</sup>

Daring to hope

These women attempt to describe their emotional pain of experiencing a miscarriage locating it in their heart, or even soul and guts, which suffer the damage of losing a baby. Interestingly, the lexeme 'soul' alludes to the Greek equivalent *psyche*, which metonymically stands for the person on the basis of the part-whole image-schema and the cultural model of the fragmented self (Marmaridou 2006). Elaborating on the Cartesian model, Marmaridou (*ibid*: 408) "based on an understanding of the self in terms of a part-whole image-schema" distinguishes between several aspects of the self. The non-rational self, the psyche, is the locus of emotions and feelings which is very similar to the heart metonymy as discussed above (see also Marmaridou 2010). It could thus be argued that in the above-mentioned example (11) of "soul destruction" pain damages this non-rational part of the self, the psyche of the sufferer.

However, pain is not exclusively related to heart. A very common pattern in the data is that of physical and subsequently emotional numbness. One could argue that numbness could be a literal, bodily manifestation ensuing a miscarriage, but cases such as examples (13) and (14) below suggest a rather emotional, psychological state of dullness, apathy, or even loss of any sensation:

(13) I look up at empty skies

I feel empty too *I feel numb*

Like all feelings have been drawn out.<sup>8</sup>

---

<sup>7</sup> See Appendix 58.

<sup>8</sup> See Appendix 51.

(14) Screen turns away and the lady shakes her head

I'm sorry to tell you it's bad news, she said

Shaking and sobbing on a plastic bed

*Feeling so numb I may as well be dead.*<sup>9</sup>

So far, the data are aligned with the common assumption that the conceptualization of emotions is experientially based. But these narratives are primarily communicative acts aimed to express the narrator's inner experience and feelings, in accordance with the discourse domain of an online forum. These metaphors clearly have a propositional meaning, which is feeling/being in emotional pain. But what is at stake is the weak implicatures that arise from an experience that is largely descriptively ineffable. Such implicated meanings are rich in emotional effects, which, as Wharton and de Saussure (forthcoming) suggest, are passed on to the recipient and interpreted accordingly, based on their experience, especially in cases such as these that relate to a shared experience amongst the sufferers. These women are trying to verbalize and therefore share a kind of experience that is very personal and difficult, if not impossible, for other people to access.

Looking at example (8), "It broke our hearts", and drawing on RT principles of metaphor interpretation, I take this example, along with all the heart-related examples above, to fit into the framework of loose use of language. Specifically, these examples seem to broaden the category of HEART so that it refers not only to the human organ but to the center of the feelings. It is thus the feelings that are damaged, the inner self afflicted by the loss and pain. It is also likely that such conventional expressions stem from the routinization of linguistic metaphor. Wilson (2011) and Vega Moreno (2007) argue that such patterns are derived from the repeated use of particular expressions, activated for communicative rather than cognitive reasons, and therefore they are relevance-driven. But still what the metaphor communicates cannot be captured in fully propositional terms. It rather evokes an emotional state, the impression of what this experience feels like. Even though the linguistic expressions at hand do not belong to the extreme end of the

---

<sup>9</sup> See Appendix 54.

non-paraphrasability continuum (Sperber and Wilson 2015), this highly subjective, private experience is hard to put into words. The expressions serve as mediators and help readers understand the intensity and severity of this emotion. The reader tries to simulate the feelings perhaps drawing on other, similar personal experiences, if not the same.

Considering now the context in which the phrases are met, the above examples of poetic language seem to involve another processing route as well. Taking into account the last example (“Feeling so numb I may as well be dead”), a lexical adjustment of the word ‘numb’ will get across the intended propositional meaning, that is, being desensitized. Nonetheless, following the woman’s narrative, it appears that this numbness is stronger as she lies in a hospital bed, surrounded by medical equipment and staff, exhausted and devastated by the news. Interestingly, she almost equates her lack of sensation to that of a dead body. This hyperbole, in addition to metaphor, adds an emphatic, perhaps exaggerated tone that cannot be accounted for in mere propositional terms.

### **4.3 PAIN IS A PHYSICAL FORCE**

The second most frequent pattern in the corpus is PAIN IS A PHYSICAL FORCE. As already noted, the FORCE schema is one of the most fundamental image schemata of human cognition, and Kövecses (2013) argues that emotion conceptualization in general relies heavily on it. PAIN is also metaphorically conceptualized in terms of its potential causes, taken from the general metaphor CAUSES ARE FORCES. The cause of pain in our case is the miscarriage, therefore it is the agent of the force that afflicts these women. Consider the following example:

(15) If one thing goes wrong the whole day is ruined but every day things are slowly sliding back into place. Probably not much help but just know ur not alone. Grief is a personal thing and sometimes *when it hits it can hit hard*.<sup>10</sup>

---

<sup>10</sup> See Appendix 19.

A typical expression denoting physical force is the transitive verb ‘hit’, which is a frequent pattern amongst the data. The following two examples, however, make use of another pattern, that of a whole breaking into pieces:

(16) I'm very sorry I my husband doesn't mourn a bit after we had a miscarriage at 16 week *it broke me into a million peaces* he acted like we lost a puppy or something and I still walk around sad and start to cry every time I see a small baby...<sup>11</sup>

(17) I was previously completely happy with my two (though asking me before this pregnancy if I'd wanted another child would have be akin to asking me if I wanted a unicorn, as it seemed so out of the realms of possibility), but now *I feel like a piece of my heart has been ripped out* and that our family is not complete.<sup>12</sup>

Another instantiation of the mapping, as shown below, suggests that the pain is a force that stems from within and causes damage to the self:

(18) It breaks me that I don't know if I have a boy or a girl. *It eats me up inside* that I'm a mama to a dead,<sup>13</sup> precious being when all I want - so soso badly - is to hold that darling child in my arms.

Evidently, women feel that this pain of loss has emotionally damaged them. The shared patterns, conventional as they are, do paint a picture of how women understand this particular emotion. Relevance theory has argued that “there is a continuum of cases from those where the communicator’s meaning is a proposition, or can be paraphrased as such, to those where it is not paraphrasable at all” (Sperber and Wilson 2015: 121). The examples above involve some kind of indeterminacy; consider, e.g., the hyperbolic utterances “it broke me into a million peaces”, “my heart has been ripped out” or “it eats me up inside”. Thus, what is roughly implicated is that pain had such a negative impact on them similarly to a force that is capable of breaking something into pieces, ripping out the core or even eating away, eroding the inner self. It is the intensity, the strength

---

<sup>11</sup> See Appendix 24.

<sup>12</sup> See Appendix 34.

<sup>13</sup> See Appendix 37.

of the emotion that is ostensibly communicated in this case, and the mental imagery that is evoked, related to a whole tearing apart, serves this specific purpose. The images that arise from our personal physical experiential basis of a hit or a break down are sufficient to carry over the intended import.

#### 4.4. PAIN IS AN OPPONENT

Another instantiation of the FORCE schema is the PAIN IS AN OPPONENT conceptual metaphor (Kövecses 2006). The abstract domain of pain is understood in terms of a more concrete one: it is personified as an opponent. Despite being a category with only a few examples, its presence in the corpus seems reasonable, originating from people's personal experiences. In everyday life, it is common that a negative incident or a feeling is perceived as an enemy who seeks to inflict some damage. Studies on healthcare communication suggest that there is an extensive use of war-related metaphors for talking about disease, especially cancer (e.g., "your fight against cancer"; Semino 2016, 2017), and the recent pandemic of Covid-19 (Semino 2021). In the data under examination, the miscarriage is the enemy that causes the pain, and the sufferer attempts to defend herself, fight back, engaging in a mental and emotional confrontation. This battle, which is most of the time unsuccessful, is expressed with verbs such as 'struggle' and 'fight' as shown below:

(19) I had a missed miscarriage at 18 weeks back in March. It's been six months and I'm still *struggling to cope with the grief*.<sup>14</sup>

(20) Take some time for yourself to grieve, *I fought my feelings* for a while to begin with but once I realised that wasn't working I tried to acknowledge them more.<sup>15</sup>

In addition to the abovementioned verbs that are associated with the domain of war, one of the women chose to express not only the battle but also the negative outcome, the defeat from the pain of loss, associated also with a sense of failure and shame:

---

<sup>14</sup> See Appendix 1.

<sup>15</sup> See Appendix 36.

(21) Nonetheless, it was the shame from the failure of being a mother that devastated me the most. *I felt utterly defeated* and “imperfect”.<sup>16</sup> This shame kept me silent about the painful experience.

Last but not least, the data reveal a simile through which the sufferer describes the battle in which she is engaged in purely physical terms:

(22) I can still hear the sonographer’s words, ‘I’m so sorry...’ I remember the feeling of utter devastation, yet the tears didn’t come straight away. *I felt winded, like I’d been punched in the stomach.*<sup>17</sup>

According to RT, similes are differentiated from metaphors as, although they seem to convey similar meanings and in similar ways, they involve different processing mechanisms. The implications derived by a simile follow a process of considering encyclopedic assumptions about a topic and accepting as implicated those that relevantly apply to it (Carston and Wearing 2011: 297). In other words, contrary to the *ad hoc* processes on the basis of which a metaphorical word/phrase is understood, in the case of similes the meaning is understood literally (*ibid*: 301).

Consider the metaphors instantiated in the examples “fought my feelings” and “struggling to cope with the grief”. The encoded concepts are clues to the intended meanings and activate both the literal property of the words, that is engaging in a fight, and encyclopedic assumptions such as having difficulties. During the interpretation process, the logical properties are left aside and the concepts are broadened, resulting into the *ad hoc* concepts STRUGGLE\* and FIGHT\*, which are part of the proposition. In our case, thus, the sufferer has difficulty handling her emotional state, striving to win over the negative feelings. In the case of the simile, however, the literal process of meaning derivation evokes some kind of imagery. It is true that a phrase such as “I felt winded, like I’d been punched in the stomach” does give out a proposition in its own right and does not belong to the extreme part of the non-paraphrasability continuum

---

<sup>16</sup> See Appendix 42.

<sup>17</sup> See Appendix 48.

(Sperber and Wilson 2015). There are nonetheless some weakly implicated meanings which, I argue, are also equally evident and indispensable for utterance interpretation. An image of physical confrontation arises here where pain is an opponent that physically assaults the sufferer with a punch in the stomach. The reader then assumes a position where, drawing on personal experience, is able to understand the intended communicated meaning, which is the intensity of the fight and consequently the impact of the emotion.

#### **4.5 THE BODY IS A CONTAINER FOR EMOTIONS**

In addition to the FORCE schema, another common pattern among the data is that of the BODY AS A CONTAINER FOR EMOTIONS of any kind, including pain. This metaphor makes use of a more general mapping, i.e. EMOTIONS ARE SUBSTANCES, proposed by Lakoff (1987). In particular, emotion is represented as pressure or substance in a container, that is the body. In such cases physical states are used to talk about a mental state that is connected with certain physical features, like high blood pressure, rapid pulses, heat, red face, or dizziness. Conceptual metaphor theorists have extensively analyzed the emotion of anger (e.g., Lakoff and Kövecses 1987) but it seems that the emotion of pain also has an experiential basis. Almost all metaphorical expressions that belong to this category propose that women resort to the body as the place for their emotions. This container, however, is empty. The following examples represent the body as an empty vessel:

(23) I know the heart wrenching feeling of being told your baby has no heartbeat. It's a sadness that you can't even explain and *the emptiness that goes with it*.<sup>18</sup>

(24) Lost sounds so trivial but there are no better words,  
it was here one day and gone the next not destined for this world.  
Lost is really all we are, as we now *feel empty inside*.<sup>19</sup>  
As we fill our day with meaningless things which can help us hide.

---

<sup>18</sup> See Appendix 17.

<sup>19</sup> See Appendix 61.

A very interesting example of how literal ‘emptiness’ after the loss translates into an emotional sensation is illustrated below:

(25) You were there in our future plan.

You are gone, nothing left but your perfect figure on a scan.

You were there bundled up inside me.

You are gone and I feel alone, numb and *empty*.<sup>20</sup>

There is only one instance, cited in (26), in which depression is described as a substance rising within the body:

(26) Because my partner is away a lot on many days I am coming home to an empty house and this is causing my bad mood. *I can literally feel my depression rising inside me* as I make my way home.<sup>21</sup>

Thus, pain is not a substance but rather the lack of it. It is the lack of emotion that follows a miscarriage. A possible explanation of this lack can again be traced through the embodied nature of emotion and the experience of miscarriage itself. The loss of a baby entails the emptiness of the female human body, a feeling that is reflected in the soul as is the case in example (24). The woman was once complete carrying her baby, but after the loss the physical emptiness is extended and it is also the soul that is empty, being deprived of emotions. “Literally” in example (26) is also interesting in that the narrator feels her depression in physical terms.

As argued by Lakoff and Johnson (1999: 4), “[r]eason is not disembodied, as the tradition has largely held, but arises from the nature of our brains, bodies, and bodily experience. This is not just the innocuous and obvious claim that we need a body to reason; rather, it is the striking claim that the very structure of reason itself comes from the details of our embodiment”. When it comes to emotion though, reasoning does not suffice. Metaphors are also used to communicate how we feel, think and act, but not only through logical inferential processing. Taking into account the lexemes that instantiate the conceptual metaphor, I argue that,

---

<sup>20</sup> See Appendix 56.

<sup>21</sup> See Appendix 38.

indeed, their interpretation involves lexical adjustment processes. More specifically, in line with RT account of lexical broadening and *ad hoc* concepts, the words ‘empty’ and ‘emptiness’ are loosely used and the propositional meaning derived is that the women lack feelings and sensations as a result of their loss. The same applies to the last example, in which depression is perceived as a feeling that increases in size and power within the body/self. However, I argue that cases like the rising depression within the self convey an array of propositions, but at the same time make manifest feelings and emotions that, in essence, motivate the metaphor itself: “[i]t’s about sharing emotion by making them manifest, and expressing feelings rather than merely describing them” (Wharton and de Saussure forthcoming). The woman attempts to highlight and communicate the intensity of depression, how overwhelming this can be, overpowering the inner self and body.

#### **4.6 PAIN IS A NATURAL FORCE**

Another realization of the FORCE schema is that of pain understood in terms of natural forces, that is natural phenomena. Considering the total number of metaphorical expressions in the corpus, the linguistic expressions that concern the mapping at hand are only but a few. The natural phenomena pattern is not differentiated from that of physical force that was examined in Section 4.3. As with all forces, this pattern mostly serves to show the women’s loss of control, a kind of passivity as women are the victims of this force.

The data reveal that this pattern has two distinct manifestations. On the one hand, natural phenomena are active agents of force on the sufferer, who is but a victim; in essence this is the case with natural disasters. In contrast, the latter cases refer to weather conditions and are described as states. The sufferer is a passive experiencer of the conditions. The former category suggests that natural phenomena inflict pain to the self of the sufferer, as illustrated below:

(27) There’s an immense sadness that I just can’t shake.

*Gripping and dragging me through cracks of its quake.*<sup>22</sup>

---

<sup>22</sup> See Appendix 59.

If I think of how I was before this had been;  
I'm not sure I could show you ever again

(28) I've wandered aimless as a dandelion scattered to the wind,  
Watched helpless as *the tides of emotion sweep across your Mother's brow*.  
Seen *rivers bathe her tired cheeks*<sup>23</sup>

(29) At night I would sleep. Then I'd wake up and for a blissful moment, all seemed right with the world. Until I remembered. Then the *pain would wash over me* once more.<sup>24</sup> Day in day out.

Examples (27) and (28) are poems and this perhaps explains the creativity of the metaphors. They are highly imagistic and, considering the linguistic choices, not at all conventional. In contrast, the following examples illustrate how weather conditions are used for the conceptualization of pain. Conditions such as haze, fog or clouds are not indicators of the force of the emotion but rather represent pain, grief and sadness as states in which these women are found:

(30) I have experienced so many different emotions in the short space of time surrounding the passing of my boy - but I didn't want to remember him with this *big cloud of sadness hanging over my head*.<sup>25</sup>

(31) I cried uncontrollably for a few weeks, I talked to a nurse at my GPs and took a lot of comfort from this forum. Once I felt up to it physically I started going to gym classes and that hour or so gave my brain a break from *the heavy cloud of grief that has been hanging over me*.<sup>26</sup>

(32) This time was a lot more difficult to deal with emotionally. I felt like that there *was a constant layer of sadness fog*,<sup>27</sup> a kind of dull ache.

---

<sup>23</sup> See Appendix 68.

<sup>24</sup> See Appendix 45.

<sup>25</sup> See Appendix 8.

<sup>26</sup> See Appendix 16.

<sup>27</sup> See Appendix 41.

(33) I just sat shaking at my desk, desperately thinking about what I needed to do but not being able to do anything but cry. When, some weeks later, *the haze of despair and grief started to lift a little*.<sup>28</sup>

Since we are dealing with negative emotions, it is not surprising that the weather conditions that have been chosen denote bad weather, such as clouds, haze and fog. Pain is seen as a negative state, imposing its presence on the sufferer. The difference between these two distinct perspectives is also evident in the type of the natural phenomena. In the former cases, the tide, the earthquake, and the element of water are violent manifestations of natural forces. They are basically natural disasters that people cannot predict, impede, or control and which can bring about (great) damages and even losses of all kinds. In contrast, in the latter examples, pain is perceived as a dull, depressing weather condition. The weather conditions such as fog, haze, and clouds correspond to bad weather that limits visibility while covering the narrator, as suggested by “layer”, “over me” and “over my head”. The absence of sun/light is also associated with negative emotions, as suggested also in the DEPRESSION IS DARKNESS metaphor.

These metaphorical expressions are rich in imagery. Images of earthquakes or bad weather conditions are frequent in everyday life and quite common amongst humans; but the metaphors are linguistically novel. What they evoke is a physical sensation that is situated in the outer world, either as an external force or a state of affairs, as opposed to the examples of the previous sections which largely focus on the inner self.

In order for the addressee to fully grasp the meaning of the addresser’s intentions, she needs to leave aside any lexical adjustment processes and focus on the literal meaning of the words. This literal meaning is the basis for a slower interpretation process (Carston 2018), which strengthens the mental images and subsequently lets all implications map onto the topic of metaphor. The imagistic aspect of these metaphorical expressions is essential for a comprehensive interpretation of the intended meanings, as they are the most powerful effects derived and make a valuable contribution during communication. They give rise to implicatures that

---

<sup>28</sup> See Appendix 43.

clearly communicate a particular emotional state of fear, distress and loss of control. Compared to the rest of the examples in the corpus, these expressions seem to most powerfully communicate the strength and intensity of the pain via the mutually known imagery, which, when associated with pain, makes its experience shared.

#### **4.7 PAIN IS BURDEN**

One of the last categories of conceptual metaphors that is present in the corpus is one also met in Kövecses's list (2006). This metaphor conceptualizes pain as a particular kind of FORCE, namely as a physical burden. This is exemplified in the data through a few linguistic expressions that will be discussed below.

First, pain is perceived as a force that exerts some kind of power onto the sufferer. The phrase "weighs me down" in (34) suggests that pain is a load that is heavy, a burden to the self:

(34) I too felt that my heart was physically broken because my chest was just hurting constantly. I was and still am so, so sad and *it weighs me down quite heavily*.<sup>29</sup>

A similar pattern is also evidenced in the following examples, which underline the heaviness of the load, that is the pain:

(35) For me, it's taken me a while to process and to move forwards and even today I still have moments that overwhelm me and *the pain of losing my baby is too much to carry*.<sup>30</sup>

(36) I am so sorry for your losses, and for everything you've had to go through - it's so much and *I can feel how heavy that must have all been for you*.<sup>31</sup>

Another fairly conventional example is given below:

---

<sup>29</sup> See Appendix 3.

<sup>30</sup> See Appendix 3.

<sup>31</sup> See Appendix 5.

(37) Feeling as though healing is some kind of race,  
‘Isn’t it about time that you moved on?’  
‘Think of the time that has been and gone’,  
But it will never leave me, that feeling of loss,  
Fully aware that *I must bear that cross*.<sup>32</sup>

Again, pain as a burden motivates an idiomatic expression which refers to the burden one must endure, alluding to the cross carried by Jesus before his crucifixion.

Lastly, in the following narrative, cited in (38), a woman attempts to give advice to other sufferers drawing from her own experience. She is certain that grief, the burden, cannot go away, but as time passes there will be times when one could feel this burden lighter and hence more bearable:

(38) Be patient. Grief doesn’t leave. There will be days when *you feel lighter* which you’ll recognise only when your laugh takes you by surprise.<sup>33</sup> Don’t feel bad for laughing.

Pain therefore is seen as a burden that weighs one down, similarly to the conceptualization of melancholia and depression (Charteris-Black 2012). This burden is so heavy that it is impossible for the sufferer to lift and live their life as suggested in (35) above. It is even conceived as a cross, which must be carried throughout life as a mark of the miscarriage (example 37). The last example does not straightforwardly suggest a burden. However, the phrase “feel lighter” along with the immediate context of the utterance implies that grief is a burden that cannot disappear altogether but the weight can occasionally lift off allowing for better, pain-free days.

Pragmatically speaking, all instances above involve lexical adjustment processes. Consider, for example, the phrase “it weighs me down”. The lexically encoded concept WEIGH DOWN is broadened, resulting in an *ad hoc concept* WEIGH

---

<sup>32</sup> See Appendix 55.

<sup>33</sup> See Appendix 40.

DOWN\*. This new concept is loosely used to refer to the emotional suffering ensuing a miscarriage.

Despite the lack of creativity and the rather strongly manifested propositional meanings, I wish to suggest that metaphorical expressions such as “I must bear that cross” also give rise to an array of weakly implicated meanings, perhaps interspersed with images. The cross-bearing Jesus is an engraved image especially in the minds of Christian believers, which denotes the endurance of hardship. This reference potentially constitutes an attempt on behalf of the sufferer to express, rather than describe, the intensity of pain of loss which cannot be put into words.

#### **4.8 PAIN IS DOWN**

Last but not least, the findings of the research evoke yet another common conceptual metaphor, in which pain is understood as having a downward orientation. This conceptualization of pain is not found as such in the proposed list of mappings by Kövecses (2006). It is nonetheless one of the main patterns for the conceptualization of SADNESS (Barcelona 1986, Kövecses 2005) and DEPRESSION (Jackson 1986, McMullen and Conway 2002, Charteris-Black 2012) and, since these negative emotions have been previously argued to be interrelated (see Chapter 2), it seems likely that the DOWN schema will also appear in the data.

Lakoff and Johnson (1980) discussed those metaphorical concepts that organize a whole system of concepts with respect to one another, which they called orientation metaphors. They are primarily concerned with spatial orientation, as in our case, and are by no means arbitrary. These polar oppositions, such up-down, in-out etc. are both physically and culturally bound (*ibid*: 14). Negative emotions then are mostly associated with the downward orientation, which arises from our everyday experience and perception of negativity. When someone is sad, her bodily posture seems to be drooping. Similarly, physical sickness and death are forces that make one be down, and so is psychological pain. Moreover, Lakoff and Johnson suggest that being subject to control or force is down (*ibid*:

15), considering that during a physical fight the victor is usually on top. A similar pattern is found also in the following examples:

(39) I feel like I should be okay by now and I keep thinking all my friends and family are going to get fed up *of me been down*.<sup>34</sup>

(40) I didn't know where else to turn. I've posted in the last few days about feeling alone in my grief but today is horrible. I've been having difficulty with my friend who is the father of our miscarried baby lately but *I've been feeling so low* and I tried to talk today and he's just asked me to leave him alone...<sup>35</sup>

(41) I am really struggling as I feel like I'm still grieving and I had the hope and excitement of trying to conceive again and now I feel like that has been taken away from me. I don't know who to turn to or what to but *I feel extremely low* and just want this all to end.<sup>36</sup>

Both “down” and “low” denote downward movement, which corresponds not only to the emotional state of the sufferers but also to the physiological one, as feeling low usually entails low energy, and reduced activity. In contrast, example (42) illustrates a pattern that is slightly different:

(42) After my first miscarriage it took ages for my period to come back ( about 3 months,) . We started trying again almost immediately and every single time my period started I was devastated. I suffer from anxiety and depression anyway and *my mental health would take a nose dive* everytime I saw blood in my knickers.<sup>37</sup>

This is an idiomatic expression, common and frequent in everyday language, hence deprived of creativity. It is too a loose use of language (Vega Moreno 2004) and its interpretation does not necessitate an alternative route of processing. It simply assumes a descent, a rapid decrease. Similarly, the examples with ‘low’ and ‘down’ are also fairly conventional. Through lexical broadening, their senses

---

<sup>34</sup> See Appendix 3.

<sup>35</sup> See Appendix 9.

<sup>36</sup> See Appendix 14.

<sup>37</sup> See Appendix 15.

instantiate the downward movement of both the physical and the psychological aspect of self at once. However, I believe that there are certain weak implicatures they can yield. They evoke suppression and passivity, some kind of lack of agency. They can also allude to sickness. Even the ‘nosedive’ idiom, despite its conventionality, is capable of creating some kind of mental imagery of an abrupt, upright rapid fall. This negativity, although expressed in fairly conventional ways, could be the affective effect prompted to the reader.

#### **4.9 Creativity beyond conceptual mappings**

This section is exclusively concerned with a particularly novel, extended metaphor that appears in the data and is a great example of how the lexicalization of pain can be creative to the extent that it disregards existing conceptual metaphors – even in a non-literary context. The woman behind this post attempts to paint a picture of her feelings of grief which has become a part of her reality and guides the readers through a process of healing. Example (43) below contains the complete narrative, which is wholly structured on the basis of an extended metaphor:

(43) I think there’s so much cultural shame around grief, as well as cultural shame around miscarriage, that we don’t often talk directly about grief or how to work with it, so I thought I would start this thread and ask - how do you work with your grief?

This is how I was working with my grief this morning:

I woke up filled with grief, wanting to go back to sleep, but I felt too tense, so I checked in with my body. A headache, fatigue, tension in my eyes, softening around those physical experiences I found that my head hurt from grief, and I started to cry. *I felt like I was suffocating with grief, that I was trapped beneath a sheet of ice,*<sup>38</sup> crying and screaming to be let out, *to not drown in my own sorrow. Stuck beneath the ice, I shifted my consciousness until I became the ice. Cold, hard and strong, the ice sheet covers everything. The more I became*

---

<sup>38</sup> See Appendix 4.

*the ice, the less I could hear my pain, the screaming and the crying faded away, a certain kind of peace came, a clarity.*

Above the ice the world is crystalline, snow covered, sparkling in the sunlight. Everything is still, everything is fresh and clear, my perception is cool, clear, pure, but frozen. There is a stillness, no movement, no sound. It is a kind of freedom.

The sun continues to shine, the earth turns, the season changes and the snow and *the ice melt away. I am left standing in this lake of my own tears, grief spilling out of me, three rivers of sorrow that never end, but there is no ice above me now, I am not stuck or frozen, I am not suffocated by my grief. I am free and the trees leaf green again.* New life is coming.

This example is the epitome of what Carston (2018) must have had in mind when she proposed the alternative mental processing route of metaphor interpretation. In this account, novel and/or extended metaphorical utterances allow the reader to switch to an alternative processing mode in which “the literal meaning of the whole passage is metarepresented and entertained as an ‘imaginary world’ and the intended figurative implications are derived later in processing” (Rubio-Fernández et al. 2016: 15). The latter are not only ‘impressions’ as Sperber and Wilson (2015) have suggested but, drawing on Wharton and de Saussure (forthcoming), they are personal memories, intimate experiences, imaginary feelings, which actually motivate such metaphors.

More specifically, in this narrative grief is metaphorically represented as “a sheet of ice” that exerts power on the narrator/sufferer, thus suffocating her. The woman feels entrapped beneath the ice, stuck because of pain, hence unable to move and act. Snow is by no means arbitrary. It was precisely selected as snow and the cold it entails are mostly associated with negative sensations. More importantly, the cold and the negative feelings associated with it are also related with absence of life and therefore death. The woman, still imprisoned in her grief, becomes the ice. This gives rise to an array of implicatures; she is either embracing her pain, or she is engulfed by it, identifying herself with the emotion, thus losing any other parts of herself. She becomes cold herself, strong, she numbs

herself until the moment when she finds a way to not feel the cold, that is the pain, anymore. It seems that this “lake of tears” is, metaphorically speaking, the melting ice; it is therefore what frees her from her pain, as she lets it out through crying. This is yet another weakly implicated assumption to be derived from the metaphor.

The image is now upwards oriented, leaving behind the life beneath the ice. The snow and the cold are still elements of her life but have more positive connotations. Snow is pure, clear fresh but still cold and frozen. It is her life that has taken a different turn but grief and pain are not altogether gone. Then time passes and seasons change, so the ice melts into tears. The hard element of ice is liquified, helping her to make her way from the down world to the upper world, to the surface and to a new life. Her pain gradually fades away but does not completely disappear. She is still overwhelmed by her sorrow but is no longer entrapped. She has become able to accept her grief and all the implications of this painful experience and has chosen to live with them.

In the light of the above, it becomes evident that this extended metaphor lends itself to an array of weak implicatures such as entrapment, detachment from the outer world, passivity, coldness and hence lack of vitality and emotion. The woman’s narrative resembles more an impression of her experience rather than being an accurate representation of it – yet it is meaningful and even emotionally powerful. This metaphor, novel and extended as it is, makes extensive use of visual imagery and therefore qualifies for a RT account.

Despite the imagistic basis of this metaphor, it is still likely that some conceptual mappings underlie this narrative and the metaphors found therein, which by no means suffice to explain the metaphor. For this purpose we need imagery and impressions as proposed by RT. Firstly, the patterns suggest that grief is understood in terms of a trap, which is also associated with a more general pattern of darkness and downward orientation. Moreover, pain is equated with snow, ice and cold, which also evoke an experientially based conceptualization of cold temperatures as mostly associated with something negative, unpleasant. Kövecses (2000) identified, amongst the many source domains of sadness

conceptualizations, that this emotion is understood in terms of lack of heat as in “Losing his father *put his fire out*; he’s been depressed for two years.” (*ibid*: 25). Lastly, it could be also argued that grief in this case resembles some of the correspondences that were proposed by Kövecses (2006). For instance, expressions such as “I woke up filled with grief” and “grief spilling out of me” are instantiations of the PAIN/EMOTION IS PRESSURE OR SUBSTANCE IN A CONTAINER conceptual metaphor, with the container being the body of the sufferer. In addition, a mapping that was not present in the corpus so far but seems to be applicable in this case is that of PAIN IS A FORCE DISLOCATING THE SELF. The self is detached from the external world because of the layer of ice above the sufferer but eventually she is freed when the ice melts and therefore the pain fades away. Consequently, it would be legitimate to assume that both theories provide valuable tools for the analysis of metaphorical language, but it is only with a synergy that one can reach a full-fledged account of metaphorical meaning. Last but not least, it is worth emphasizing that this example is unique in the corpus data and its creativity goes well beyond the ordinary. One could even suggest that this narrative has literary qualities of some sort.

#### **4.10 Summary**

The aim of this chapter was to present and analyze the data that were retrieved from an online Miscarriage Association forum. Based on personal narratives of women who have experienced (a) miscarriage(s), metaphorical expressions of pain were collected and categorized under the conceptual emotion categories, as proposed by Kövecses (2006). Almost all conceptual mappings occurred in the data with the exception of three conceptualizations that were not found due to the nature of the pain discussed and possibly due to the limited set of data in the corpus. At the same time, this chapter was an endeavor to empirically combine two distinct theoretical frameworks with a view to provide a more comprehensive account of metaphors.

On the one hand, the plethora of metaphorical linguistic expressions in the corpus attest to the conceptualization of pain in accordance with the experiential basis of emotions sustained by CMT. The fact that the findings brought to light

shared patterns between the negative emotions themselves is by no means accidental. The expression of pain, sadness, grief and depression is motivated, at least to an extent, by the same source domains. These mappings are pervasive in women's narratives supporting CMT's claims for the conceptualization of emotions. Evidence suggests that metaphors do arise, albeit not exclusively, from behavioral and physiological responses, especially in this case, as they refer to emotions and pain in particular (Lakoff and Johnson 1980, Kövecses 2008). This is done so through metonymies which are believed to motivate metaphors in the sense that they indicate not only the conceptual but also the physical aspects of body when it is involved in the manifestation of emotions/pain. This manifestation can be either exhibited through one's behavior or body. For instance, when expressing pain as "feeling down" it is likely that this emotional state is accompanied with a lower bodily-posture, weakness, and dullness. On the other hand, RT seems to provide the necessary means to compensate for CMT's, communication-*less* approach to metaphor understanding. On this account, metaphorical meaning is a communicative act. As such, it is analyzed and accounted for at the level of communication and, in particular, via non-propositional effects. The images and emotions that surface during communication appear to be indispensable for metaphor comprehension.

The next, and final, chapter will offer a more elaborate discussion of these findings together with some concluding remarks.

## **Chapter 5**

### **Discussion and Conclusions**

The aim of this thesis was to offer a comprehensive approach to metaphor understanding by synthesizing two prominent theoretical frameworks in metaphor research. Both Conceptual Metaphor Theory and Relevance Theory, despite their deeply grounded differences, seem to be amenable to synergy as they provide analytic tools that prove to complement each other. Certain scholars would be rightly critical of a complementary perspective. However, an analysis applicable to all kinds of metaphor is beyond the scope of this research. Instead, a particular kind of metaphorical language, namely the emotional one, appears to lay a suitable ground for such a collaboration.

As previously mentioned, emotions and particularly pain have been the topic of interest among cognitive linguists for years now. The focus is exclusively on linguistic expressions that provide evidence for conceptual patterns shared among speakers. Such metaphorical expressions for pain were found abundantly in this research. Nearly all data retrieved from the forum are categorized under the mappings of pain proposed by Kövecses (2006). Women show a tendency to conceptualize and thus verbalize pain in terms of a force, physical or natural, that inflicts damage; as an opponent; and as a burden. These source domains and the entailed correspondences are experientially based. Experiencing an unpleasant natural phenomenon, a negative feeling when encountering a rival or even a purely physical discomfort when dealing with weights are all types of concrete knowledge employed by humans as a means to understand a more abstract phenomenon such as emotions/pain.

Apart from Kövecses's FORCE schema, the data under examination seem to also corroborate Marmaridou's (2006) claims on emotional pain. Exploiting the experiential, metonymic relation between the body and the person, Marmaridou maintains that people understand emotional pain on the basis of the NON-PHYSICAL IS PHYSICAL conceptual metaphor. In our case, the data support such claims since women who experienced a miscarriage show a preference in discussing emotional pain as an extension of the physical pain they have gone

through. Amongst the linguistic expressions retrieved from the forum posts, “heartbreak” expressions and its derivatives were the most frequent ones. These were in agreement with the existing literature, which maintains that in all languages people tend to locate emotions in a specific body part, with English employing the heart as the seat for emotions (Niemeier 2003) and consequently for pain. Thus, our research findings appear to confirm CMT’s main assumptions of emotion conceptualization and their experiential/bodily basis. Recall that negativity, whether pain, sadness or depression, seems to exploit the same source domains.

However, due to its intrinsic, multi-layered nature, emotion/pain cannot be properly accounted for from a single perspective: it is “the kind of subjective and poorly delineated experience that is difficult to express satisfactorily” (Semino 2010: 206). The metaphorical expressions of the corpus communicate something akin to an impression rather than a fairly accurate representation. CMT does not suffice to explain the meaning of the metaphor, and pragmatic inferencing needs to come into the spotlight. This is where, I argue, RT seems to bridge the gap between cognition and communication with the notion of non-propositional, weakly implicated meanings which are often interspersed with images and emotions (Carston 2018, Wharton 2003, 2009, de Saussure and Wharton 2019, 2020, Wharton and de Saussure forthcoming). It is a basic tenet of RT that propositions vary in the strength with which they are communicated (Sperber & Wilson 1986/95, 2008, 2015). I suggest, in line with RT, that speakers, writers in our case, make use of metaphorical language that communicates, not necessarily intentionally, certain vague implicatures which are either interspersed with images or are emotionally loaded or both. Even though such implicatures are mostly associated with poetic and literary language, I have shown that instances in non-literary contexts can equally well give rise to images and emotions. Of course, not all instances involve an alternative processing route (Carston 2018); *ad hoc* pragmatic processes are often employed for the derivation of strongly implicated meanings since the metaphors I examined vary greatly in terms of creativity, ranging from everyday, mundane metaphors to entirely new and original ones.

As the thesis reveals, the metonymic character of emotional figurative language is not merely a theoretical construct but is largely attested in language use. Women discuss pain mostly in terms of their physical realities, and, in a handful of cases, they do so in a mundane, conventional way, e.g. “I feel low or numb”. But why have those women chosen to use metaphors, both conventional and creative? Are they just a means to describe their thoughts? If yes, why haven’t they done so through literal language? Theodoropoulou (2012: 455-456) sees metaphor as that part of language which has the power to ‘cure’ the difficulty or ‘insufficiency’ of literality:

This power can only derive from the metaphor’s property to evoke experiences: the metaphor by drawing from the experience brings us back to a non-linguistic space, to the space of sensation, of feelings, resupplying thus the subject with the immediacy that has been lost due to the processes of abstraction and generalization (...) Metaphor *diffuses* what language could delineate through its categories.

This study seeks to make a similar contribution. I wish to propose that the examples that have been analyzed serve to *express* rather than describe inner feelings and sensations. It is the intensity of pain and its highly subjective nature that calls for metaphors. The view that metaphor is the space where people resort to express their emotions is also reinforced by Ortony and Fainsilber (1989: 181) who claim that “[m]etaphorical language may make it possible for people to convey what would otherwise be difficult or impossible to *express* (emphasis added)”. In line with Foolen (2012), I wish to highlight the expressive nature of figurative language alongside the role of metaphor in the conceptualization of emotions.

El Refaie (2018) has brought to light the importance of visual metaphors in communicating suffering, in her case infertility. The problem with the verbal metaphors and their conceptual mappings is that they “may over time become so naturalized in a particular discourse community that they are used unconsciously and automatically by a majority of speakers” (*ibid*: 15) and thus fall short in expressing the individuals’ own values and experiences.

This collaborative approach on metaphors of pregnancy loss has not been tested before. But the idea is not in itself new. Recently, the need for an integrative

account of ubiquitous experiences such as pain and suffering has resulted in the launching of a programme, namely the Pain and Suffering Interdisciplinary Programme, which aims at offering a collaborative experimental, theoretical and clinical perspective on the matter (<http://www.suffering-pain.net/welcome-research>). A comprehensive analysis of this kind is not merely theoretical, but can be also practically applied. In particular, Semino et al. (2016) have underlined the theoretical and practical importance of taking all three levels of generality in metaphor analysis into account when considering the use of metaphor for communicating about sensitive topics such as cancer (*ibid*: 627). In essence, it is suggested that metaphor at all three levels (i.e., conceptual metaphors, metaphor scenarios, and linguistic metaphors), allows for the analysis of the patterns used and the effects they have on both patients and health care professionals. In a similar vein, this line of research could have practical implications for women who have experienced a miscarriage, as it could provide interesting and useful insights not only on the broad metaphorical framings of the pain-inducing experience but also on other aspects such as agency, emotions, etc. Subsequently, health care practitioners could gain a better understanding of their patients and thus improve their practices and treatments. This thesis is likely to contribute to a better understanding of the role of metaphor in expressing psychological pain in a way that may benefit medical professionals while dealing with patients' emotional distress.

To conclude, my thesis is an endeavour to empirically combine two distinct theoretical frameworks with a view to better understand metaphors of pain. As I have attempted to show throughout the analysis, and in accordance with the existing literature, an all-encompassing interpretation is possible as emotions, and particularly pain, do not only reveal the workings of the mind and their experiential basis, but they also evoke non-propositional effects as a means to express their intensity. This is not, however, an exhaustive account of all metaphors of emotions. The focus was rather on a small set of data retrieved by a single forum. This line of research could therefore be further extended and future research may benefit from an application of the proposed synergy to other types of negative emotion metaphors. In particular, they could see how emotions such as anger, guilt, shame and jealousy, which were also evident in the narratives

found in the forum, converge in the way they are conceptualized and expressed, and how they differ.

## References

- Athanasiadou, Angeliki and Tabakowska, Elzbieta. 1998. *Speaking of emotions: Conceptualisation and expression*. Berlin: de Gruyter Mouton.
- Barcelona, Antonio. 1986. On the concept of depression in American English: a cognitive approach. *Revista Canaria de Estudios Ingleses* 12: 7-33.
- Barcelona, Antonio. 2000b. On the plausibility of claiming a metonymic motivation for conceptual metaphor. In Antonio Barcelona (ed.), *Metaphor and Metonymy at the Crossroads*. Berlin: Mouton de Gruyter. 32-58.
- Blakemore, Diane. 2002. *Relevance and Linguistic Meaning: The Semantics and Pragmatics of Discourse Markers*. Cambridge Studies in Linguistics.
- Carston, Robyn. 2002. *Thoughts and utterances: The pragmatics of explicit communication*. Oxford: Blackwell.
- Carston, Robyn. 2010. Metaphor: Ad hoc concepts, literal meaning and mental images. *Proceedings of the Aristotelian Society* 110(3): 295-321.
- Carston, Robyn and Wearing, Catherine. 2011/2014. Metaphor, hyperbole and simile: A pragmatic approach. *Language and Cognition* 3(2): 283-312.
- Carston, Robyn. 2018. Figurative Language, Mental Imagery and Pragmatics. *Metaphor and Symbol* 33(3): 198-217.
- Charteris-Black, Jonathan. 2012. Shattering the Bell Jar: Metaphor, Gender, and Depression. *Metaphor and Symbol* 27(3): 199-216.
- Cienki, Alan and Müller, Cornelia. 2008. Metaphor, gesture, and thought. In Raymond W. Gibbs, Jr. (ed.), *The Cambridge handbook of metaphor and thought*. Cambridge University Press. 483-501.
- Clark, Billy. 2013. *Relevance Theory*. Cambridge: Cambridge University Press.
- Corless, Inge et al. 2014. Languages of Grief: a model for understanding the expressions of the bereaved. *Health Psychology and Behavioral Medicine* 2(1): 132-143.
- Czechmeister, Catherine A. 1994. Metaphor in illness and nursing: A two-edged sword. A discussion of the social use of metaphor in everyday language, and implications of nursing and nursing education. *Journal of Advanced Nursing* 19(6): 1226–1233.
- de Saussure, Louis and Schulz, Peter J. 2009. Subjectivity out of irony. *Semiotica* 173(1/4): 397–416.
- de Saussure, Louis and Wharton, Tim. 2019. La notion de pertinence au défi des effets émotionnels. *Travaux interdisciplinaires sur la parole et le langage (TIPA)* 35(Emo-Langages): 1-23.
- de Saussure, Louis and Wharton, Tim. 2020. Relevance, effects and affect. *International Review of Pragmatics* 12: 183–205.
- Eisenberger, Naomi. 2012. The neural bases of social pain: Evidence for shared representations with physical pain. *Psychosomatic Medicine* 74(2): 126–135.
- Ekman, Paul. 1999. Basic Emotions. In Tim Dalgleish and Mick J. Power (eds.), *Handbook of Cognition and Emotion*. John Wiley & Sons, Ltd. 45-60.
- El Refaie , Elizabeth et al. 2018. Pictorial and spatial metaphor in the drawings of a culturally diverse group of women with fertility problems. *Visual Communication* 0: 1-24.

- Enfield, Nick J. and Wierzbicka, Anna. 2002. Introduction: The body in description of emotion. *Pragmatics and Cognition* 10 (1-2): 1-25.
- Esenova, Orazgozel. 2011. Metaphorical Conceptualization of Fear, Anger and Sadness in English. Doctoral Dissertation. Budapest: Eötvös Loránd Tudományegyetem Bölcsészettudományi Kar.
- Foolen, Ad. 2005. Where are our thoughts and feelings? Folk psychology in Dutch, Marind and Bare'e. Paper presented at the 9th ICLC, Seoul, Korea.
- Foolen, Ad. 2012. The relevance of emotion for language and linguistics. In Ad Foolen, Ulrike M. Lüdtke, Timothy P. Racine and Jordan Zlatev (eds.), *Moving Ourselves, Moving Others*. Amsterdam/Philadelphia: John Benjamins. 347-368.
- Giora, Rachel. 2003. *On Our Mind: Salience, Context, and Figurative Language*. Oxford University Press.
- Hatfield, Elaine et al. 1994. *Emotional Contagion*. Cambridge: Cambridge University Press.
- Ifantidou, Elly and Hatzidaki, Anna. 2019. Metaphor comprehension in L2: Meaning, images and emotions. *Journal of Pragmatics* 149: 78-90.
- Izard, Carroll Ellis. 1991. *Emotions, personality, and psychotherapy. The psychology of emotions*. Plenum Press.
- Jackson, Stanley W. 1986. *Melancholia and Depression: From Hippocratic Times to Modern Times*. Yale University Press.
- Kövecses, Zoltán. 1986. *Metaphors of anger, pride and love. A lexical approach to the structure of concepts*. Amsterdam/Philadelphia: John Benjamins.
- Kövecses, Zoltán. 1988. *The language of love. The semantics of passion in conversational English*. Lewisburg, PA: Bucknell University Press, London and Toronto: Associated University Presses.
- Kövecses, Zoltán. 1990. *Emotion concepts*. Berlin and New York: Springer-Verlag.
- Kövecses, Zoltán. 1991b. Happiness: A definitional effort. *Metaphor and Symbolic Activity* 6: 29-46.
- Kövecses, Zoltán. 1995a. Metaphor and the folk understanding of anger. In J. A. Russell et al. (eds.), *Everyday conceptions of emotion*. Dordrecht: Kluwer. 49-71
- Kövecses, Zoltán. 1995. American friendship and the scope of metaphor. *Cognitive Linguistics* 6-4: 315-346.
- Kövecses, Zoltán. 2000. *Metaphor and emotion*. New York and Cambridge: Cambridge University Press.
- Kövecses, Zoltán. 2000b. *Metaphor and Emotion: Language, Culture and Body in Human Feeling*. Cambridge: Cambridge University Press.
- Kövecses, Zoltán. 2005. *Metaphor in culture. Universality and variation*. Cambridge and New York: Cambridge University Press.
- Kövecses, Zoltán. 2006. The conceptual structure of happiness and pain. In Chryssoula Lascaratou, Anna Despotopoulou & Elly Ifantidou (eds.), *Reconstructing pain and joy: Linguistic, literary and cultural perspectives*. Cambridge, UK: Cambridge Scholars Publishing. 17-33.
- Kövecses, Zoltán. 2008. Metaphor and emotion. In Ray Gibbs (ed.), *The Cambridge handbook of metaphor and thought*. New York: Cambridge University Press. 380-396.
- Kövecses, Zoltán. 2013. The Metaphor–Metonymy Relationship: Correlation Metaphors Are Based on Metonymy. *Metaphor and Symbol* 28: 75–88.

- Kövecses, Zoltán. 2014. Conceptualizing emotions. A revised cognitive linguistic perspective. *Poznan Studies in Contemporary Linguistics* 50(1): 15–28.
- Lakoff, George. 1987. *Women, fire and other dangerous things: what categories reveal about the mind*. Chicago: University of Chicago Press.
- Lakoff, George. 1993. The contemporary theory of metaphor. In A. Ortony (ed.), *Metaphor and thought*. New York: Cambridge University Press. 202-253.
- Lakoff, George and Johnson, Mark. 1980. *Metaphors we live by*. Chicago: University of Chicago Press.
- Lakoff, George and Johnson, Mark. 1999. *Philosophy in the flesh*. New York: Basic Books.
- Lakoff, George and Johnson, Mark. 2003. *Metaphors we live by* (2nd ed.). Chicago: University of Chicago Press.
- Lakoff, George and Kövecses, Zoltán. 1987. The cognitive model of anger inherent in American English. In Dorothy Holland and Naomi Quinn (eds.), *Cultural Models in Language and Thought*. Cambridge: Cambridge University Press. 195-221.
- Lascaratou, Chryssoula. 2006. *The language of pain. Expression or description?*. John Benjamins Publishing Company.
- Littlemore, Jeannette and Turner, Sarah. 2020. Metaphors in communication about pregnancy loss. *Metaphor and the Social World* 10(1): 45–75.
- Marmaridou, Sofia. 2006. On the conceptual, cultural and discursive motivation of Greek pain lexicalizations. *Cognitive Linguistics* 17(3): 393–434.
- Marmaridou, Sofia. 2010. Polysemy and semantic change: The case of the Greek ψυχή. *Pragmatics & Cognition* 18(1): 68–110.
- McMullen, Linda M. and Conway, John B. 2002. Conventional Metaphors for Depression. In Susan R. Fussell (ed.), *The Verbal Communication of Emotions*. New York: Psychology Press. 167- 184.
- Moradi, Mohammad Reza and Mashak, Shahrzad Pirzad. 2013. A Comparative and Contrastive Study of Sadness Conceptualization in Persian and English. *English Linguistics Research* 2(1): 107-112.
- Niemeier, Susanne and Dirven René. 1997. *The Language of Emotions*. John Benjamins Publishing.
- Niemeier, Susanne. 2003. Straight from the heart—metonymic and metaphorical explorations. In Antonio Barcelona (ed.), *Metaphor and Metonymy at the Crossroads: A Cognitive Perspective*. Berlin/New York: Mouton de Gruyter. 185–213.
- Nikiforidou, Kiki. 2012. The constructional underpinnings of viewpoint blends. In Barbara Dancygier and Eve Sweetser (eds.), *Viewpoint in Language A Multimodal Perspective*. Cambridge: Cambridge University Press. 177-197.
- Ortony, Andrew and Fainsilber, Lynn. 1989. The role of metaphors in descriptions of emotions. In Yorick Wilks (ed.), *Theoretical issues in natural language processing*. Hillsdale, NJ: Erlbaum. 178-182.
- Piata, Anna. Forthcoming. Conceptual mappings and contextual assumptions: The case of poetic metaphor. In Elly Ifantidou, Louis de Saussure & Tim Wharton (eds.), *Beyond meaning*. Amsterdam/Philadelphia: John Benjamins.
- Pilkington, Adrian. 2000. *Poetic effects: A relevance theory perspective*. Amsterdam/Philadelphia: John Benjamins.

- Raja, Srinivasa N. et al. 2020. The revised International Association for the Study of Pain definition of pain: concepts, challenges, and compromises. *Pain* 161(9): 1976-1982.
- Rey, George. 1980. Functionalism and the emotions. In Amélie Rorty (ed.), *Explaining Emotions*. Los Angeles: University of California Press. 163-198.
- Rosenblatt, Paul and Bowman, Ted. 2013. Alternative approaches to conceptualizing grief: A conversation. *Bereavement Care* 32(2): 82-85.
- Rubio-Fernández, Paula et al. 2012. Are single and extended metaphors processed differently? A test of two Relevance-Theoretic accounts. *Journal of Pragmatics* 94: 15-28.
- Semino, Elena. 2010. Descriptions of Pain, Metaphor, and Embodied Simulation. *Metaphor and Symbol* 25(4): 205-226.
- Semino, Elena et al. 2016. An Integrated Approach to Metaphor and Framing in Cognition, Discourse, and Practice, with an Application to Metaphors for Cancer. *Applied Linguistics* 39(5): 625–645.
- Semino Elena et al. 2017. The online use of Violence and Journey metaphors by patients with cancer, as compared with health professionals: a mixed methods study. *BMJ Supportive & Palliative Care* 7: 60–66.
- Semino, Elena. 2021. “Not Soldiers but Fire-fighters” – Metaphors and Covid-19. *Health Communication* 36(1): 50-58.
- Shaver, Phillip, Schwartz, Judith, Kirson, Donald and O'Connor, Cary. 1987. Emotion knowledge: Further exploration of a prototype approach. *Journal of Personality and Social Psychology* 52(6): 1061–1086.
- Sperber, Dan and Wilson, Deirdre. 1985/1986. Loose talk. *Proceedings of the Aristotelian Society* 86: 153–171.
- Sperber, Dan and Wilson, Deirdre. 1995. *Relevance: Communication and cognition* (2nd ed.). Oxford: Blackwell.
- Sperber D., Wilson D. 1998. The mapping between the mental and the public lexicon. In Peter Carruthers and Jill Boucher (eds.), *Language and thought*. Cambridge: Cambridge University Press. 184–200.
- Sperber, Dan and Wilson, Deirdre. 2002. Pragmatics, modularity, and mind-reading. *Mind & Language* 17: 3–23.
- Sperber, Dan and Wilson, Deirdre. 2008. A Deflationary Account of Metaphors. In Ray Gibbs (ed.), *The Cambridge Handbook of Metaphor and Thought*. Cambridge: Cambridge University Press. 84-105.
- Sperber, Dan and Wilson, Deirdre. 2015. Beyond speaker’s meaning. *Croatian Journal of Philosophy* 15(2): 117-149.
- Steen, Gerard J. et al. 2010. *A method for linguistic metaphor identification. From MIP to MIPVU*. Amsterdam: John Benjamins.
- Stefanowitsch, Anatol. 2006. Words and their metaphors: A corpus-based approach. In Anatol Stefanowitsch and Stefan Th. Gries (eds.), *Corpus-Based Approaches to Metaphor and Metonymy*. De Gruyter Mouton. 63-105.
- Talmy, Leonard. 1988. Force dynamics in language and cognition. *Cognitive Science* 12: 49-100.
- Tendahl, Markus. 2009. *A hybrid theory of metaphor*. Basingstoke: Palgrave Macmillan.

- Tendahl, Markus and Gibbs Jr, Raymond W. 2008. Complementary perspectives on metaphor: Cognitive linguistics and relevance theory. *Journal of Pragmatics* 40: 1823–1864.
- Theodoropoulou, Maria. 2012. The Emotion Seeks to Be Expressed Thoughts from a Linguist's Point of View. In Angelos Chaniotis (ed.), *Unveiling Emotions: Sources and Methods for the Study of Emotions in the Greek World*. Franz Steiner Verlag. 433-468.
- Tissari, Heli. 2008. On the concept of sadness: Looking at words in contexts derived from corpora. In Barbara Lewandowska-Tomaszczyk (ed.), *Corpus linguistics, computer tools, and applications - State of the art*. Frankfurt am Main: Peter Lang. 291-308.
- Van Trào, Nguyễn. 2014. A Cross-cultural analysis of the metaphorical conceptualization of sadness in Modern English and Vietnamese. *Journal of Science: Foreign Studies* 30(2): 33-47.
- Vega Moreno, Rosa. 2004. Relevance Theory and The Construction of Idiom Meaning. UCL Working Papers in Linguistics.
- Vega Moreno, Rosa. 2007. *Creativity and Convention: The Pragmatics of Everyday Figurative Speech*. John Benjamins, Amsterdam.
- Wharton, Tim. 2003. Natural Pragmatics and Natural Codes. *Mind & Language* 18(5): 447–477.
- Wharton, Tim. 2009. *Pragmatics and non-verbal communication*. Cambridge: Cambridge University Press.
- Wharton, Tim. 2015. That bloody so-and-so has retired: expressives revisited. *Lingua* 175-176: 20-35.
- Wharton, Tim and Strey, Claudia. 2019. Slave of the Passions: Making Emotions Relevant. In Robyn Carston, Billy Clark and Kate Scott (eds.), *Relevance: pragmatics and interpretation*. Cambridge: Cambridge University Press. 253-267.
- Wharton, Tim and de Saussure, Louis. Forthcoming. The pragmatics of emotion: Love, argument and conflict. In Jeanette Altarriba, Bee Chin Ng and Gesine Lenore Schiewer (eds.), *The handbook on language and emotion*. Berlin: de Gruyter Mouton.
- Wierzbicka, Anna. 1986/1989. Human emotions: Universal or culture-specific?. *American Anthropologist* 88(3): 584-594.
- Wierzbicka, Anna. 1992. Defining emotion concepts. *Cognitive Science* 16(4): 539-581.
- Wierzbicka, Anna. 1994. *Emotion, language and cultural scripts*. American Psychological Association.
- Wierzbicka, Anna. 1999. *Emotions across languages and cultures: Diversity and universals*. Cambridge: Cambridge University Press.
- Wilson, Deirdre. 2004. Relevance and lexical pragmatics. *UCL Working Papers in Linguistics* 16: 343-360.
- Wilson, Deirdre. 2011. Parallels and differences in the treatment of metaphor in Relevance theory and Cognitive linguistics. *Studia Linguistica Universitatis Iagellonicae Cracoviensis* 128: 195-213.
- Wilson, Deirdre and Carston, Robyn. 2006. Metaphor, Relevance and the ‘Emergent Property’ Issue. *Mind & Language* 21(3): 404 – 433.
- Wilson, Deirdre and Carston, Robyn. 2007. A unitary approach to lexical pragmatics: Relevance, inference and ad hoc concepts. In N. Burton-Roberts (ed.), *Pragmatics*. Basingstoke: Palgrave Macmillan. 230-260.

- Wilson, Deirdre and Carston, Robyn. 2008. Metaphor and the 'emergent property' problem: a relevance-theoretic treatment. *The Baltic International Yearbook of Cognition, Logic & Communication* 3(1): 1-40.
- Wilson, Deirdre and Carston, Robyn. 2019. Pragmatics and the challenge of 'non-propositional' effects. *Journal of Pragmatics* 145: 31-38.
- Wilson, Deirdre and Sperber, Dan. 2004. Relevance theory. In Laurence R. Horn and Gregory Ward (Eds.), *The handbook of pragmatics*. Oxford: Blackwell. 607-632.
- Wilson, Deirdre and Sperber, Dan. 2012. *Meaning and Relevance*. Cambridge: Cambridge University Press.
- Yu, Ning. 1995. Metaphorical Expressions of Anger and Happiness in English and Chinese. *Metaphor and Symbolic Activity* 10(2): 59-92.
- Yu, Ning. 1998. *The Contemporary Theory of Metaphor: A Perspective from Chinese*. John Benjamins Publishing.

## APPENDIX

### Forum Data

1. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1484>  
[6](#)

Hi All,

***I had a missed miscarriage at 18 weeks back in March. It's been six months and I'm still struggling to cope with the grief.*** I'm fine for a while and then all of a sudden ***it hits me again***, as if I've made no progress. I've read that grief isn't linear so I guess it's normal. And that there is no "normal" for how long it takes to get through something like this. Every pregnancy announcement triggers me. I want to be at peace with it all, but I'm not yet.. and I'm not sure how to get there. My partner also thinks that I should talk to someone since I'm not getting "better". He feels like I'm focusing on the negatives but I feel like he doesn't really get it. For him, it's very easy to focus on the positives. I think my feelings are valid and that there's no real timeline for this process... but am I wrong? I know he just wants me to feel better, but it's hard when he doesn't understand what I'm going through. I feel so alone sometimes..

I'm not sure how to not be triggered by pregnancy announcements of our friends and how to move forward with this. Do I just need time? I've ordered another book to read, I have friends to talk to.. but I'm not so sure I will ever be "okay" with this, or if I will just learn to live with the pain...

Sending love to anyone else feeling this way..

2. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1463>  
[6](#)

Hi all

I just wanted to share something with you, I know we are all at different stages of this awful grieving process. I am so very sorry for all of your losses.

I had a missed miscarriage last month and had a D&C on 20 June. This was my first pregnancy and the emotional pain that followed, and still follows me, is the worst I have ever felt in my life.

Yesterday, almost 4wks since my D&C, I met my very dear friend for the first time. I just couldn't face anyone until now.

As I told my friend what had happened, and the raw reality of what miscarriage actually looks like - ***the pain, the emptiness, the shock, the immense grief, anger, the awful internal examination at A&E***, hearing the words "no heartbeat" whilst alone at a scan, having repeat scans all alone to confirm no heartbeat, the huge amount of blood loss, being wheeled away to theatre past pregnant ladies, waking up from surgery and feeling lost and scared. It's not like how the portray it on TV, that's far from the reality.

I will never forget my friends face as I relayed the last 4wks to her.. and her words were this - "you're way stronger than anyone I know, I could never cope with that". But the reality is that we have to "cope" somehow, we go from day to day, hour to hour at times. No-one comes along and makes it all better. ***No-one stops the heartache. There is no way around this, we have to go through it. And it's the most heart wrenching thing to happen.***

So I just wanted to say that wherever you are in this grieving process, please know how brave you are... how well you're doing right now. You've got this far, and you'll get through the next stage, and the next stage after that. So just take a minute and say out loud "I'm doing my best, I'm really brave".

It took me a while to see this. I've beat myself up so many times for feeling angry, sadder than I ever thought I could feel, I even felt bad for laughing at something my dog did one day.

It's not until we hear ourselves saying it out loud that we realise what we have been through, and are going through, a really really difficult grieving process. So please just give yourself a break, and realise you are so brave, and you're doing your best..

Paula xo

---

Thank you for this , this my third mmc in a year . We are strong , amazingly strong , ***especially as we continue to fight through the pain for our rainbow babies*** . Alexandra - I had my d&c yesterday , if your hospital is anything like mine there's a team of wonderful nurses around you so you won't feel so alone when you wake up . Bring lots of things with you before the surgery as there can be a wait , I brought mags , downloaded things on my iPad etc , it helps the time pass . Also bring something to eat after the surgery as you have to fast before it ( unless you want to eat hospital food!) I'm up and about today and feel fine after a good sleep , so hopefully you will feel the same x

3. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=14716>

Hi everyone

I had A miscarriage 3 weeks ago now. I was 9 weeks and started spotting so went for a scan but baby was only measuring maybe 6 weeks and with no heartbeat. I was told to come back in 2 weeks to see what was going on. However the bleeding got heavier and 5 days later I had the most horrendous pains and I passed everything naturally at home. I know this sounds strange but we buried what I passed in the garden but it just didn't feel right to throw 'my baby' in the bin or down the toilet. I've now stopped bleeding and having negative tests which I guess is good but mentally I'm still really struggling. My best friend just gave birth and I'm so happy for her but it also really hurts at the same time and I feel like the worst person for feeling like this. I'm not great at talking about how I feel and I can't even describe how I feel. ***All I can say is I feel like my heart physically***

**hurts. I feel like I should be okay by now and I keep thinking all my friends and family are going to get fed up of me been down.** I'm usually the life and soul of everything always laughing and smiling and I just don't feel like I can be that person right now. I'm hoping this will get better but all I can think about is what happened and getting pregnant again.

---

Hello Amzann. I completely feel for your loss and sympathize with you. I am in a similar position. I went for a scan 10 days ago also due to light bleeding. They measured the baby at that point at 6+1 (which could have been about right but I did think I was a bit further along than that) but no heartbeat. I went back today and there was no growth and no heartbeat. It's so hard that that's it. It's over. **I feel so empty, I feel hollow and I feel guilty** - guilty for emailing work and saying I need time off when I was on annual leave last week (stupid I know), angry that I can't ring my mum and tell her as I lost her to cancer 10 years ago (and I feel like shouting 'come on, have I not suffered enough for that'. Sad for my partner. Feeling like a failure. Angry that stupid coronavirus meant that I had to declare my pregnancy at work to my boss at a stage I never would have wanted to (knowing things can change) and now feeling the dread of someone else knowing that it all went wrong. He's a guy too - not being sexist but it is different. My husband knew, then my boss and then my best friend. Noone else. Worst of all I can rationalise it all - it's not right/something was wrong/better to find out now than at the 12 week scan but it still hurts. Is it naive also that I didn't think I would have to have tablets/procedure to have the baby removed- this was like another blow I was not expecting. I thought at 6-8 weeks it would just reabsorb naturally by the body. I think everything you have done is right because its right for you Amzann. There's no certain way we should deal with this, just to support each other and know that it will get better, there are happier days ahead. You're not alone. We just have to hold on. Sending you lots of love and socially distanced hugs xxx

---

Hi

both,

So, so sorry for your loss. I know how incredibly painful this is and I just wanted to tell you both not to feel guilty about how you're feeling because everything you're feeling is totally valid.

I found out that my baby didn't have a heartbeat when I was 12+5, and miscarried three days later at home (in March). It was and is the most physically and emotionally painful experience that i've ever had to go through. I felt all of the things you ladies have described including feeling lonely, scared, angry, bitter, overwhelmed, anxious. **I too felt that my heart was physically broken because my chest was just hurting constantly. I was and still am so, so sad and it weighs me down quite heavily.**

There is no right length of time to grieve for your baby, everyone is different. Some people may find that they can bounce back quicker than others, or that they feel strong enough to move forward more quickly than others. **For me, it's taken me a while to process and to move forwards and even today I still have moments that overwhelm me and the pain of losing my baby is too much to carry.** But, in time I've also learned to be positive again and to hold onto the hope that I will

have my happy ending - I hold onto the belief and hope that I will fall pregnant again and it will all be okay. It doesn't change what's happened, but the thought of becoming a mum one day is what keeps me going today.

Allow yourself to feel everything you feel. Cry, shout, talk it out, whatever it is that means it's not building up inside of you waiting to explode. I shut myself off from family, friends, work and the general world (and Covid-19 didn't help in that sense) for a few months and now my anxiety has rocketed so I encourage you to talk openly about what you've gone through, even if it's with a close family member or trusted friend for example. I've found this forum to be a life saver for me, it's a place I can talk openly and without judgment and everyone has been so incredibly supportive of one another.

Sending you both lots of support and positive vibes. Hold onto hope xx

---

Thank you all for your replies, it really helps to know your not alone in this when at times that's all you feel. Sad and alone..

Cornflake24 I've started trying again but it makes me very anxious we started having sex as soon as I stopped bleeding from the miscarriage and I was so sad when my period showed up last week. I am trying to take the positives from it that it was bang in 28 days from when my miscarriage started so hopefully that means my cycle is back on track but I still felt really sad. I fell straight away the first time so I guess I'm just hoping it doesn't take as long this time but it's all I think about pretty much everyday. My period as finished now and I've got some ovulation sticks just to check that everything is back on track to try and help I guess what will be will be....

I'm still finding it hard with my best friend I've not been able to see her as she has to shield for 2 weeks after getting discharged from the hospital. She's had a tough time and keeps saying how the Labour was so awful but she now has a perfect, healthy little baby girl and I can't help but feel a bit angry and bitter when she tells me about how awful it was... I'd take a horrendous Labour to get a healthy baby over this situation. ***Having to sit for hours with awful contraction like pains and bleeding when you know your getting nothing at the end of it was just soul destroying for me.*** I know that's awful and I know I shouldn't disregard how she's feeling and I don't I give her support and comfort but it really does hurt.

4. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=14650>

***I think there's so much cultural shame around grief, as well as cultural shame around miscarriage, that we don't often talk directly about grief or how to work with it, so I thought I would start this thread and ask - how do you work with your grief?***

*This is how I was working with my grief this morning:*

*I woke up filled with grief, wanting to go back to sleep, but I felt too tense, so I checked in with my body. A headache, fatigue, tension in my eyes, softening around those physical experiences I found that my head hurt from grief, and I started to cry. I felt like I was suffocating with grief, that I was trapped beneath a sheet of ice, crying and screaming to be let out, to not drown in my own sorrow. Stuck beneath the ice, I shifted my consciousness until I became the ice. Cold, hard and strong, the ice sheet covers everything. The more I became the ice, the less I could hear my pain, the screaming and the crying faded away, a certain kind of peace came, a clarity.*

*Above the ice the world is crystalline, snow covered, sparkling in the sunlight. Everything is still, everything is fresh and clear, my perception is cool, clear, pure, but frozen. There is a stillness, no movement, no sound. It is a kind of freedom.*

*The sun continues to shine, the earth turns, the season changes and the snow and the ice melt away. I am left standing in this lake of my own tears, grief spilling out of me, three rivers of sorrow that never end, but there is no ice above me now, I am not stuck or frozen, I am not suffocated by my grief. I am free and the trees leaf green again. New life is coming.*

5. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1456>  
[1](#)

April 2020. I had missed my period, I didn't go back on contraception, we used condoms in the time of recovery. So we stopped using them. I tried so hard not to focus on my periods and ignore the dates somewhat of when I was due etc. I would tell my partner when I came on just so it was logged but I purposefully didn't keep track personally. it was about 2 weeks after my last due period so I thought I had better test. it was positive. I was genuinely so excited again. I don't know why because last time I was hesitant on getting excited, something felt different this time. Almost like de ja vu from when I had my son. This would be the 3rd time lucky situation again. I rang midwives told them my history they booked me in for 7 weeks scan. we waited. By this time we are in lockdown from Covid 19 so I am so nervous to do this all alone given my past. but I went to the scan. The sonographer told me that they could see the foetus but there was no heartbeat.. Was I sure about the dates.. This time I was positive of the dates I had text my partner on the day I started letting him know. they informed me that they could see cysts but were unsure if they were related to pregnancy or not. I went a bit numb "here we go again". They asked me to come back 2 weeks later because the foetus was too early to tell if it was viable or not, I tried not to loose hope, at least this time it had come further than just the egg planting itself. I struggled to think of anything else the next following weeks but I felt pregnant this time. I told my other half I couldn't make sense of the dates but I didn't feel the same as last time. Something felt right.. I was getting the cravings or losing my appetite on foods I used to like, getting mild morning sickness etc so I had hope. the second scan came. I was feeling so ill going in on my own again. A couple before me had

just had bad news and I was just expecting to hear the same. The sonographer looked at me and said they couldn't see any of the cysts that they previously worried about and that she could see a heartbeat! I had tears in my eyes I was so happy I couldn't stop smiling. I waited for the doctor afterwards and they were happy to carry out the pregnancy as healthy. I rang my partner as soon as I came out and I burst into tears with excitement. I was getting my second baby! I was feeling complete. I bought a toy from the baby for my son to let him know we told family and friends and all was looking well we had the scan to prove it I couldn't be happier. I wouldn't stop talking about it and how excited I was. All my plans coming to life. Then 5 days before the 12 weeks scan I bled. it wasn't heavy but it was there and it was there every time I went to the toilet. I rang the number I was given and they couldn't get me in any earlier than when my scan was due to reduced staff because of Covid 19. so I waited. I cried a lot. People reassured me, maybe I was overreacting because of what I had been through and become to expectant. It's quite normal to bleed in early pregnancy it might be fine, I had seen the heartbeat this time it's bound to be fine. I went in for the scan alone again. I waited and I was seen. The sonographer looked at me and said it's not good news unfortunately, I cant find a heartbeat and your baby is measuring under what we expect at this stage. because I had previous scans already they were certain this was not viable. ***I was numb again lying there.*** All I could say was it's ok I was expecting it. I came away sat in the quiet room - which I became all too familiar with. I rang my Partner and Mum and sobbed. ***I was devastated. I had let myself get excited and attached to the pregnancy as if it was going to happen I wish I had stayed more reserved as I had done previously. It was heart breaking.*** I was asked to come back the next day to see the doctor. I went back and was told I had experienced a missed miscarriage. My baby's heartbeat had stopped not long after my 7 weeks scan. I wanted to have surgical management again.. I knew what I was doing there I could try and not get attached and be responsible for the excess. But because of Covid they had stopped any unnecessary surgery. I had no option but to go medically unless I wanted to wait it out and see if I miscarried naturally eventually. I opted for medically to speed things up. I had the option of being in hospital alone to go through the miscarriage or taking the medication at home myself and having my partner there for support. I chose to go home. I was given a pot for the foetus so they could do testing and give any answers as to why this pregnancy failed. I miscarried midnight that night. I was in so much pain (almost felt like labour pains) and there was a lot of blood. I wasn't sure if I would know what the foetus was, I had never seen a foetus before. but I suddenly had a mass release and was uncontrollably loosing blood so I got to the toilet quick and everything came away. I could see a thick cluster of tissue in the toilet.. I had to go find some gloves and get it out I couldn't leave it. I couldn't make it out at first but then amongst it al I saw the foetus wrapped in sac.. I had to rip through the sac to get to the foetus. I was in so much shock at this point I was just staring for ages. I could see the little limbs and eyes. It was so real. I haven't properly cried since this as I feel like I am still in shock (this just over a week ago now) 19th of June 2020.. My nieces birthday.. another miscarriage I wont forget. The whole thing was traumatising. I have taken the foetus to the hospital for testing and I had more bloods done. Now I am waiting for any answers. I have also been referred to recurrent miscarriage to see if there is anything.

---

Hello,

***I am so sorry for your losses, and for everything you've had to go through - it's so much and I can feel how heavy that must have all been for you.***

It doesn't matter if you already have a child, a loss is a loss and having a living child doesn't take away from the loss of any of your babies. You're allowed to grieve, and to feel everything you feel because you've been through so much.

I suffered a MMC in March, with my first pregnancy and ***that hit me really hard***. I've found comfort in this forum as it's allowed me to talk about my loss in an open, honest and raw way amongst those who really know what it feels like. So I hope that in writing your story down, and reading others, you too feel some comfort and also feel less alone and isolated in your grief.

Have you spoken to anyone professional about your loss and how you're feeling, such as a therapist? I've tried this myself because I didn't know how to even begin to process my loss, and that has also helped me.

I don't have any magic words to make you feel better, other than to remember you're not alone and to just allow yourself to feel everything without any guilt.

Sending lots of love xx

6. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=14639>

***I had a miscarriage last year, it was the hardest and most heartbreaking thing I've ever had to go through and still to this day almost a full year later I still grieve for and miss my baby.*** I'm not in a proper relationship with the father, he's a good friend with the odd benefit and he's been a support through most of it though at times doesn't understand my level of grief or what I'm feeling. We recently discovered that we had actually had another unplanned pregnancy and again another loss, this time twins. I know that I have to keep going and do my babies proud but I just feel so so lost. I know it's the wrong way to think and none of us should feel this way but I feel like a failure to all of my children. I'm barely 22 and I've lost 3 babies, ***I feel so alone and scared and empty***. It's almost the anniversary of our first loss and that in itself is hard to think of nevermind having had this happen again. I don't really know where this is going I just needed to vent I guess

7. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=14605>

I lost my baby. Miscarriage first trim, first baby, about 5 + weeks old. I feel so alone and so emotional. I want to try again but he didn't want the baby in the first place. ***My depression is sky high***, I can't take care of myself right now. I feel dirty and unclean but I can't take a bath, I have no energy, no hunger needs, I can't sleep well. What should I do?

8. <https://2ndstartotherightrg.wixsite.com/straightontilmorning>

Mum of TWO.

Wife.

Frenchie Lover.

A self confessed Disney Princess waiting also waiting on her letter to Hogwarts.

After the (very) recent and raw loss of my son Reggie Edward Gill at 15+4

weeks I decided to share my thoughts and ramblings of life after loss.

Nothing can quite prepare you for the way your life will change once you have

that little piece of your heart ripped out - for it leaves the biggest hole.

Grief can affect us in many ways.

*I have experienced so many different emotions in the short space of time surrounding the passing of my boy - but I didn't want to remember him with this big cloud of sadness hanging over my head, I don't want my days that follow after loss to be sad ones –Jaxon (my eldest) deserves to have a happy*

Mum that smiles fondly when speaking of his younger brother.

I founded the Second Star To The Right with a mission to end baby loss being a subject we tread lightly around or avoid altogether.

In speaking out and sharing our experiences it might just make it that little bit more bearable for people to address the Elephant in the Room with a little more kindness and compassion and not feel so uncomfortable when the issue of baby & childhood loss is mentioned.

So many women feel the need to keep what they have been through to themselves and by doing so cannot allow themselves to grieve for their lost baby, still using that motherly instinct to protect - only instead of being able to protect their children they are protecting those around them from the hurt and pain they endured due to making them feel uncomfortable hearing about it for that short space of time.

1 in 4 pregnancies will result in a loss.

A statistic I had no idea about until I became that 1.

I wish I had of known then what I know now.

It definitely wouldn't have prepared me for what was about to happen but I would have taken comfort knowing I wasn't alone, and I knew exactly where I could turn to for support or just a listening ear from someone that understood me, really understood how my life had changed forever from that point in time. There isn't enough openly available support for women like myself...we have to almost go finding it ourselves.

Hopefully this page can be the start of that support finding you.

Through social media, your own experiences, that of friends, let's get talking about this subject, put an end to the uncomfortableness and show that it IS ok to speak out - every story deserves to be heard.

Take some time to explore the blog, read something interesting, and feel free to reach out - even if it's just to say hello!

Lots of love,

Michelle xXx

9. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1434>  
[3](#)

*I didn't know where else to turn. I've posted in the last few days about feeling alone in my grief but today is horrible. I've been having difficulty with my friend who is the father of our miscarried baby lately but I've been feeling so low and I tried to talk today and he's just asked me to leave him alone and not talk to him today as he has his own things going on and won't talk to me and I've never felt so alone.* I just needed to talk about what I'm feeling but I have nowhere else to go. I don't even know if there's a point to posting this, it's more so a rant but I feel so alone. I just want my baby

10. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1438>  
[5](#)

Hi Violet,

I read your post and feel I could have written it myself. Like you my 1st pregnancy was in 2018, found out 1st March, by may 18th I was having my d&c , due to huge complications from this we couldnt try again for a year and fast forward to today I've had 4 mc's. *I feel like there is a huge baby shaped hole missing, its hurts so much.*

Like you I feel friends and families babies have often passed in a blur as I needed to detach myself to stop myself from sinking into a dark place. I wonder whether I will ever be a mum, I feel like I'm less of a woman for not having kids. It annoys me that people get pregnant so easily and just take being a parent for granted.

When people even friends and family make comments like stay positive, relax, things happen for a reason, your time will come I get so angry and bitter and feel like screaming at them and saying 'how do you know all of that?! Dont you think I'm staying positive?!, if I wasnt I wouldnt be continuing to pursue my dream of being a mum. So you are saying there was a reason I lost my precious babies?!. Like me getting stressed and anxious which I will have you know is totally to be expected after loss is the reason I have had my losses?!- it's like they are saying its your fault you had a mc because you were stressed and anxious!.

I feel out of touch with some people who I was close to before as they live in the world where experiencing miscarriage doesnt exist and I suspect think it could never happen yo them as such they are devoid of that pain and simply dont **and cant understand the sheer gravity of the pain you feel**. My close friends try to understand as much as they can but they simply cant if they havnt been through it. It's a very lonely place.

I look back at pictures before our 1st loss and wish I was carefree like I was then. I feel like my whole life has been taken over by fertility issues. Like you I've taken up lots of hobbies but feel these are just filling a massive void that should be filled with family time.

Society has no idea how hard miscarriage is recurrent miscarriage is horrendous and if you couple that with lack of answers it's so hard. We have had all the tests apart from nk cells and hsg, we were a couple or months away from completing them and the virus struck. Its hit me so hard as the appointments kept me going, knowing we had tests booked gave me hopes, currently feel like I'm stuck in no man's land not knowing whether to wait or try again, we seem to fall pregnant easily but we lose them.

I do have alot to be thankful for. I have a lovely home, great job, wonderful friends and family, amazing husband. **But I feel empty** alot of the time because I so desperately want to be a mother. I even get jealous of my sister for having 2 kids. We lost our 1st when she was pregnant with my niece. They are such gorgeous children and melt my heart. I absolutely being an auntie but I long to be the one who is reading my child a story before bed, having adventures, making memories, seeing them grow and learn and having them say thw words mummy and daddy and saying they love us. I feel like some second rate citizen that people pity. Have you had any tests carried out? I'm so sorry for your losses. I just wanted you to know you are not alone in your thoughts. Hugs xxxxxx

11. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1436>  
[9](#)

Hi.. I had my MMC 2 months ago and since then, this is the first month we are actively trying again.. And I got a big negative pregnancy test.. I know, it's just one month we are trying straight after a miscarriage but I had weird symptoms before today, like headache, nausea, cramping. Normally I am not like this so I really put lots of hope onto this month. But it turned negative ? ***I am very sad, very low and disappointed.*** I got pregnant very quickly the first time and now I wonder that it will never happen again for me. I consider myself very unlucky and all I want it's to have my family, give my husband a baby and be together. I am so negative.. I am so scared this will never be the happy ending for me. I am so scared this is not meant to be.

---

Dear Laura, I felt exactly the same this month. This is the first month we was actively trying and yesterday I was 3 days late for my period. I also was having strange symptoms, I couldn't believe it, I was so excited and thought it was our turn again! My husband bought a pregnancy test and agreed to take it in the morning. However during the night, I came on my period. I couldn't believe it, I've woken up this morning so disappointed and ***heartbroken*** all over again. This is so painful to go through and ***it's really taking its toll on me.*** I'm no longer the positive person I used to be. I fear we will never be able to have children :(  
Xx

12. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1436>  
[9](#)

@MrsH. Thank you too for your words, it's so nice to feel that you're not alone and other women get you and support you. thanks :) I am exactly like you atm, I am no longer the positive person i was. I bought 2 pregn tests and one now is there waiting for who knows what miracle that might never happen. this is so hard and it hurts so much. Unfortunately i have colleagues that are due in three weeks and during skype calls i need to face them. ***I can't, it's so hard, i feel like i am being eaten from the inside I fear too I will never have kids*** :((( this is so extremely unfair

13. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1426>  
[8](#)

Hi, my name is Ami. I'm 25 years old, and in the past three years my life has completely changed.

In 2017, I became pregnant. My husband and I were overjoyed, and instantly I bonded with the little bean in my belly. Sadly, we lost our little one. We named little bean Oakley. In 2018, I had two further losses, named Quinn and Robin. It was only then did Doctors diagnose me with Hypothyroid, and they put that down as the reason for my three losses. I have suffered with a mental health Personality Disorder since I was a child, so you can imagine how traumatic those losses were for me, but I was finally glad to know that I hadn't done anything wrong.

Fast forward to last year, 2019. I was diagnosed with Fibromyalgia, and I have

gotten used to living my life in pain. However, I was learning to adapt, and had goals for having children in the future. However, in May 2019, I was rushed to hospital at risk of cardiac arrest due to low potassium levels. I was in and out of hospital three times a week for nearly three months, before the kidney team decided that I had a rare kidney condition. Apparently only 1 in a million people get it, and it's genetic. I was officially diagnosed with Bartter's Syndrome (the rare condition). While I was in hospital, the doctors also told me that I was constantly tachycardic, but no one seemed like it was a problem.

In the last few weeks, I've been under investigation for a heart condition related to the tachycardia. I'm yet undiagnosed, but after a talk with both the kidney team and the heart team, it has been decided that it would be too risky for me to fall pregnant again, as my potassium levels could change, or my heart (already under too much strain) might give up.

***I'm numb, devastated.*** It's always been natural for me to have that mothering instinct, and I've known that I wanted children ever since I was 17 and acted like a second mother to my best friend's baby. I'm 25 and I've been told that pregnancy is too much a risk for my life. My husband just says "we'll see what happens" and things like that. I can't bear having to tell our parents that they won't have any genetically related grandchildren from us. I know adoption is an option, but it's not the same. I want to carry that baby and bond with the little bean in my stomach once again. They were the best couple of months of my life, and nothing has been the same since.

I'm lost. Mentally I'm trying to get on with life and not really think about it, but the last few years have just been so traumatic. I'm lost without being a mother. I've become a mother to my animals, but it isn't the same. I need that connection. I can't bear to see other people pregnant and enjoying having children; so much so I've been declining going to family gatherings because someone's pregnant, or the family are gushing over a newborn baby.

For Oakley, our first loss, we bought a travel system, car seat, bottles, and so much more that we had to sell. I miss them. I wish I still had them just to prove that some of it was real, because it feels like I'm living a nightmare.

How can I move on from this?

14. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1426>  
1

First pregnancy, had a MMC in December and eventually had surgical management on 14th Jan. I've been clinging on to the hope that me and my partner were going to try again this month as I was letting my body and trying to heal my mind. We unfortunately aren't living together as our house is under renovation and I am a nurse on the frontline and with the pandemic going on me & him are not able to see each other.

***I am really struggling as I feel like I'm still grieving and I had the hope and excitement of trying to conceive again and now I feel like that has been taken away from me. I don't know who to turn to or what to but I feel extremely low and just want this all to end.***

*I feel my heart is breaking all over again*, I'm feeling the anger again and I'm also feeling anger towards my partner as I don't feel like he can understand how I am feeling all these months along. I don't know where to turn?

15. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1373>  
[2](#)

Hi footprints.

I was a little chuffed with myself feeling really much better this past week and then bam, period arrived yesterday (first since missed miscarriage 4 wks ago today). Was secretly hoping that I'd get pregnant before this one arrived as we'd been on honeymoon since and around time I'd have been ovulating again I reckoned.

Cue crying halfway round the golf course this morning?.OH isn't emotional, he gave me a hug then started talking golf again. I feel so incredibly sad. I don't care about anything in life just now, just existing day to day and trying to be 'happy' to the outside world. I have told a close circle but only one actually asks how I'm doing, think the rest are scared to upset me.. Including my 2 sisters.  
Aww man. Life sucks.

Sending you big hugs?

---

Hi MillyMoose

Thanks so much for your reply.

*It's just a total kick in the teeth isn't it?!* Especially when you start to feel that maybe you are getting through this and feeling a wee bit stronger. ***Then it hits and just takes you right back.*** Mine started on first day back to work after 5 weeks off. Thank you very much!! Sometimes I really really dislike my body! 8am last Tuesday morning was one of those times!

I completely understand how you feel about existing and surviving. My husband isn't an emotional person either. It does make it lonely. We told a few close friends. But none of my friends have lost and they've all got children ? . I just wonder if I'll ever get my rainbow baby. Doesn't it hurt more when they ignore it? I find that really hard. I'm like 'excuse me I have just lost 2 babies in 3 months. Please ask how I'm doing and don't tell me that I'm fortunate I can get pregnant or that it was meant to be'

I'd like to know how you are really doing?

Sending hugs right back at you sister ? xx

---

After my first miscarriage it took ages for my period to come back ( about 3 months,) . ***We started trying again almost immediately and every single time my period started I was devastated. I suffer from anxiety and depression anyway and my mental health would take a nose dive everytime I saw blood in my knickers. In addition my cycle had been 28 days for years and after the***

*miscarraige it went to 34 days.* I had one period in January where the cycle had gone back to 28 days but I've no idea if this was a fluke, as I then found out I was pregnant again. Sadly as I write this I'm currently miscarrying again ( passed pregnancy tissue last time naturally at home, but scan showed as incomplete). I can't believe this is happening again ( this one really felt like it was going to work until the spotting started last week- we even had a scan on Thursday that confirmed a heartbeat, then less than a week on it's gone). I'm so devastated, and worried about going through more months and months of uncertainty and anxiety, especially regarding my period.

16. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=14088>

Hi

Abi79

I am so sorry to hear what you are going through. I had a missed miscarriage in November putting an end to an already traumatic and high risk pregnancy. I had the tablets too. It has been the worst thing I have ever been through, there just aren't the words to explain how awful it is and you really find out who you can rely in terms of friends and family which I found just added to the heartbreak. I cried uncontrollably for a few weeks, I talked to a nurse at my GPs and took a lot of comfort from this forum. ***Once I felt up to it physically I started going to gym classes and that hour or so gave my brain a break from the heavy cloud of grief that has been hanging over me, it also gave me some structure to my day and I felt better for it afterwards.*** I am back at work now and have found classes to fit round my work schedule and I actually look forward to them. I think they give my brain a break from the sadness because I have to concentrate so hard and the class.

You are not on your own feeling this way, please think about contacting your GP for support. ***After about 4 weeks I asked for counselling as I was still really struggling and I started counselling a few weeks later which was helpful in getting me back to work and is helping me understand what I am feeling, and that it is normal.***

I am not person I was, I know I am not as patient as I was and I can see that I am more irritable. I too have felt like I have been losing my mind which is terrifying. Sadly I think everything you have described is normal, it is grief and miscarriage causes a unique kind of grief.

I am still working on getting through this but I can tell you that the pain does get less raw and the tearfulness reduces slowly. Please don't be hard on yourself over what you are feeling, you have been through such an awful experience, it will take time but you will be ok.

Take care x

17. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=14135>

Hi garnett

I didn't want to read your post and not comment. *Your story is very similar to mine and I find myself struggling to give anyone advice because I know the heart wrenching feeling of being told your baby has no heartbeat. It's a sadness that you can't even explain and the emptiness that goes with it,* I opted for medical management to just "get it over and done with" I suffered enough over the 10 days with 2 scans everything being ok and the third being where we were told.

This miscarriage wasn't because of anything you did or didn't do, it's important that we don't blame ourselves. Please keep talking about it and please don't feel alone everyone on here understands your pain.

I will be thinking of you x

---

Hi

Garnett

So sorry to hear what you are going through. I had a missed miscarriage in November and it is truly the most awful experience I have ever had. I had medical management as I couldn't cope with not knowing when it finally happen.

I have felt all the feelings that you and the other ladies have described. Although I still feel very sad about what happened, *the pain is less raw and less consuming now.* I have found exercise classes, including yoga and pilates, have really helped give my brain a break from the awful things that have swirled around in there. I have also been having counselling which has given me someone else to talk to and we have looked at coping strategies as I am surrounded by pregnant women at work at the moment.

Look after yourself and give yourself time, I had 8 weeks off work and went back on a phased return. I wasn't mentally well enough to do my job but other people want to try and carry on as a distraction.

I can't imagine that I will ever be quite the same person but I can reassure you that it does get easier.

Sally x

18. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=14068>

I found out I had a MMC on 30th July 2018. *It completely destroyed me.* In December 2018 I was diagnosed with anxiety and depression and am still on the highest dosage of anti-depressants they can give me. What would have been my baby's due date well 1st Birthday is just around the corner, my grandad died on the 28th December and my brother has just had a baby. *I'm really struggling to cope.* I don't feel like anyone else understands now a lot of time has passed I feel like everyone's expected me to forget about it and move on. I feel so alone. I was 13 weeks pregnant when I found out my baby had died at 7 weeks. I am not just grieving for a baby I never met, I was planning a future for them, and I had prepared my son for his big brother duties. All of that was just ripped away from

me and I'm still trying to come to terms with that. I just don't know what else I can do to ease *the burning ache I feel in my chest*.

19. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1389>  
[8](#)

09clar

I am so sorry for ur loss. Its absolutely shit. Thats the only way to describe it. I miscarried in August. i only knew i was pregnant while i was miscarring. And my mental health took a nose dive into a big o black hole. Talking with my partner, family and friends really helped and getting back to work as well. There are a few support groups around my area and i found these very beneficial. Still have a huge block with thinking im a failure. ***If one thing goes wrong the whole day is ruined but every day things are slowly sliding back into place. Probably not much help but just know ur not alone. Grief is a personal thing and sometimes when it hits it can hit hard.*** I bottled mine and found myself crying everytime i was alone. Its ok to let ur grief out. Its just not ok to want to hurt urself. Im sure ur wee angel in heaven wouldnt want it either. Thats why i stopped crying. I write letters to my wee baby when i feel sad.

20. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1388>  
[8](#)

Hi

Clar,

I completely understand where you're coming from, this is the battle I'm also having at the moment. After having weeks of feeling happy and on top of things the last few mornings getting up and facing the world is just a struggle, even just showering and getting ready for work takes most of what I have to give but at the same time I want to be positive and look to the future and not dwell etc.

As you say, this group is a god send, as literally no-one else seems to understand unless they've been there and for friends and family and colleagues in the know it's almost like I'm present so I must be ok, when inside I'm fighting just to function.

***Grief is a funny old game***, but as I've said you just have to go with it and one day it will all get easier without even realising it is.

Do you have a duvet day planned today? Is there anything you find helps take the edge off? Xx

21. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1381>  
[2](#)

Hey both of you I'm so sorry for what has happened. I just wanted to say take it slow and be gentle on yourselves. Miscarriage is so traumatic and it's early days it's not surprising you feel as you do. I had lots of bad days but eventually it did get a bit easier. ***I still feel so sad but I'm more able to manage it whereas at the start it floored me.*** I found it helpful to talk about it to those I felt able to. I also took time off sick and made myself pop out if only for a few mins each day and

do small jobs (eg post a letter/get a takeaway coffee) and gradually it got easier and I started to function but it took a while. Look after yourselves xxx

22. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1381>  
0

I'm so sorry for your loss.

After my first loss in February all I could focus on was trying again and it's what kept me going. We conceived in May but lost the baby in June. ***Then it hit me really hard*** and I had to seek professional help. I then didn't focus on trying again and let my mind heal.

I'm so sorry for how you're feeling, I know exactly what it's like to obsess about trying again, sadly for me it didn't work out

23. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1376>  
3

Hi

I had my first miscarriage last Sunday evening at 5 weeks pregnant.

I was told by the early pregnancy unit at the hospital to go to A&E if my cramps of bleed got worse in which it did but I hadn't a dreadful experience at the hospital with the dr on duty that night after confirming my miscarriage she continued the conversation with ' I don't know if you wanted to be pregnant or wanted a baby' I was totally shocked by the words that came out her mouth because of course I wanted both.

***Since then I have really struggled with my emotions, I feel sad/lost/numb.***

I don't want my partner to touch me in an sexual way.

I don't know if am the only one who experiences these feelings towards their partners too and am just looking for a bit of help from other people maybe in the same situation.

How do you ever think about trying again because all I think about is what if it happens again the next time.

Thanks

24. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1378>  
2

***I'm very sorry I my husband doesn't mourn a bit after we had a miscarriage at 16 week it broke me into a million peaces he acted like we lost a puppy or something*** and I still walk around sad and start to cry every time I see a small baby or a pregnant woman and hes moved on ready for another try at having a baby I'm just still to broken right now everyone in my family just doesn't understand the pain of having a miscarriage it doest matter it it at 1 week or 30 weeks it hurts the same

25. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=13674>

Last week, at my first initial midwife appointment I had to tell them I'd started to spot blood but it was progressively getting worse. The midwife continued with the appointment and told me not to worry. She got me an appointment with the epu that afternoon where I had more bloods, an external and internal scan. All very unpleasant. They said potentially I was earlier than 6 weeks as they could see a pregnancy sac but no foetus. I was asked to come back for more bloods, 2 days later. My Hcg levels rose but didn't double. 3000 odd to 5000 plus. I knew deep down what was about to happen. Another 2 days pass, I begin to pass (at the time what I thought was a clot) turns out it was tissue but of course it made me panic. My next bloods showed my levels had halved and then I came home after having lots of pain at work and in the space of an hour I'd filled a pad, and then I saw it. A large clot... ***I had a complete and utter melt down and my poor partner had no idea how to help. This is when it really hit me. I've lost my baby. I feel complete and utter grief, shock, emptiness and loneliness.*** My partner is doing his best but I'm also worried about him, his grief but I honestly don't even know what I'm supposed to do. Everyone at work knows something is wrong, know I'm going to bloods (they don't know I was pregnant and I'm playing dumb like I don't know properly what the bloods are for) and I've got to go again on Monday which I'm dreading. They've told me I have to keep going till I'm not pregnant anymore, that was the most painful thing I had to hear. My last nurse was absolutely lovely though, she explained 1 in 4 women lose a pregnancy and my body chose to not continue with an unhealthy pregnancy. She told me about her experience and gave me a hug.

I don't know what I'm going to do, I'm scared of the future, the risk of further medical needs, trying again, telling people, my partner's mental health, work, so much is going on in my head.

26. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=13149>

Hi

zozoeee123

Thank You For your reply,  
It really does help to know you're not alone in all of this, although it feels like we are.

But sometimes you just can't help but to feel the way we do? It really doesn't help knowing that although I mc early I still carried for 3 weeks without knowing anything was wrong and was so just so excited we were finally going to have our rainbow baby to then have it all ripped apart again. The midwife and nurse was very helpful but then I can't help but to think how didn't they pick it up on my first scan? Surely they knew?.. I knew something was wrong, I just had 'that' feeling. Turns out I was completely right. ***It has left a huge huge hole in my heart and I just cannot repair it.***

I am so so sorry you too has had to go through such an awful thing as well. I completely know where your coming from.. I was rearranging my photos on my

phone and moved all my precious photos of the scan and the PPT's into one folder .. then I just found my self in floods again. I hope your okay and I too am here if you need to chat xx

27. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1361>  
[9](#)

I think most of us suffer mental health problems, I've had anxiety and depression for years. It's so hard to deal with even small things , **let alone massive grief like this It's hard isn't it** , because you'd never keep signing yourself up to get hurt like this but you feel compelled to don't you ? I read in your other post that you had got past the safe point or where we think we are safe with the second pregnancy and that makes it so much harder . It's also cruel with a missed miscarriage because you look and feel pregnant.. and you dare to hope. It literally is just trying to put one foot in front of the other but it feels like food has no taste and things that made you happy before make you less happy now . However , both my sisters had miscarriages and they are both ok now and talk openly and say it does get much better. It's still very new and raw for both of us . We both got to keep hope x

28. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1362>  
[1](#)

Hi this is my first post on this as I've been referred to it by the helpline

I lost a baby at 11 weeks and 6 days just before Christmas, I had an early scan and everything was fine but then I started bleeding and getting cramps, I lost the baby that day, waiting in the hospital, bleeding heavily and sobbing and screaming my heart out, after 6 days in hospital I was let out with painkillers and told to rest.

Just before my birthday, in the middle of June, I lost my second baby at 12 weeks and 2 days, again had an early scan and everything was fine, then when I went to my 12 weeks scan I was told there was no heartbeat. I shouted at the woman, cried my eyes out and just didn't know what to do. I'm still grieving for my babies who I named sylver and talia. **I feel so empty and all I can think about is becoming pregnant again but everyone around my is telling me to wait a few months but I cant, being pregnant is all i can think about and i just feel so alone and helpless and empty and so so down**, i have no energy to even get myself dressed, I'm on antidepressants and go to see my gp regularly but I just cant seem to help myself and dont know what to do other than think about being pregnant again  
Any advice and support is really appreciated x

---

Hiya

Laurab

Sorry for your loss.

My advice is to take some time to yourself. I hear you about wanting to be pregnant and feeling empty. I feel the same. I only knew i was pregnant for like 2 days but the love i felt for the wee baby was unmeasured and **the loss i felt**

**two days later shattered me.** I still have to cope with it everyday but i feel that i have to have a health frame of mind again to have a healthy frame of mind during my next pregnancy whenever that might be. My advice is to work on ur mental health right now and when the next time you get pregnant you will be able to enjoy it instead of worrying all the time and not enjoying it.

Again i am so sorry for your loss. Everyone here understands and feels the same way and will help you.

29. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1359>  
[6](#)

Hi ladies,  
I'm so sorry for the hurting you're all feeling.

I had my third miscarriage in March and can confirm from experience that people do forget, or otherwise want me to never bring it up again once I've physically recovered.

I'm not sure that it's because they don't care though, I just think it's because it makes them feel awkward. So many people brush miscarriage off as something trivial, and who can blame them really because until it's happened to you there is no way to know **how deeply the grief cuts us.** My husband has been right by my side through my miscarriages and he doesn't really understand why I still need to be cuddled while I cry sometimes.

Be kind to yourselves, it hasn't been very long for any of you so I think you're all doing a fabulous job of keeping your chins up. And on the days when you can't, we'll be here to support you.

Paula x  
Paula & David (31 & 34)

30. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1349>  
[6](#)

I'm new here. I lost my first pregnancy on March 18 this year. We had seen the heartbeat on a scan twice (excitement for the first baby combined with my anxious personality) but at 10 weeks no heartbeat was detected. My body refused to recognise this and I opted for surgical ERPC. I ended up in hospital for two days with extreme blood loss then there were various visits to doctors and hospital because of unusual pain. I was off work for 3 weeks. Not ideal before exam period when you're a teacher.

We started trying again as soon as I was physically well. 3 months later I got that BFP again. We hadn't told many people the first time we got pregnant and we told even less this time. Just as well really. I miscarried naturally this time at 5 and a half weeks. **Very early on I know but I am absolutely destroyed.** 10 days on and I haven't been back to work because I cant make myself do very much. Tears fall when I least expect it and i just want to avoid people..... both ideal

when I should be in front of a class of 30 kids. I spend most days between my bed and the sofa.

I'm gutted by the idea of a third one before testing. I'm 35 and my husband is 40. Not sure I can put myself and him through this over and over again. I'm scared by how low I feel this time around. I'm not sure I'll manage to go back to 'normality' after this either. Is this normal? I have friends and family who spoke to me the last time of their miscarriage but now even they don't know what to say because it has happened again.  
Pauline x

31. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1347>  
[3](#)

A colleague brought her baby in to work and *it felt like a punch in the heart*. I was just starting to feel like myself again after an early miscarriage in January. Then yesterday I came out of a meeting to find the whole office surrounding a colleague and her new baby cooing and getting excited. *It hit me so hard*. I went to hide in the toilet. Today I feel almost as I did earlier in the process, sad, don't want to leave the house. Luckily I'm working from home today. Just trying to be gentle with myself. I'm new to this forum but after yesterday I thought it might help to join. V sad to read other people's experiences but also less isolating. Can anyone relate?  
Wishing everyone the best

---

It's silly isn't it. I had my miscarriage in February at 9 weeks. I've struggled, really struggled. I removed myself from all social media because some of my friends on Facebook were pregnant. I didn't want to see that. Anyway, after starting counselling I was feeling better so at the weekend I reactivated my Facebook account.

Today, a lad that I went to school with has shared a photo of their month old baby and *it smacked me like a rock in the face*. Thoughts of "why can he have one and I can't" start floating about. All the good work of my counselling gone. Xx

32. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1344>  
[6](#)

Hi everyone

Your posts are so encouraging. I'm so glad I found this site. My overwhelming feeling during my miscarriage has been loneliness and you guys are a godsend. I miscarried my baby 3 nearly 4 weeks ago. It only occurred to me last night that it hadn't even been a month. *I felt like I've been trapped in this gloom, panic and depression for so long* I lost my baby at 8 weeks but the sonographer couldn't even find anything on the external scan so probably really small. My symptoms just stopped and I bled and have a mini type labour.

Logically, I know all the cliches are true but my head keeps thinking why aren't you over this but I just feel devastated. Physically I'm not recovering, I've been

dizzy, exhausted, and now for the past week I can't sleep. I sit and panic about getting up for work. It's a new job/short staffed/on my feet all day. I've been medicating with calms and nytol. One night to supermarket at 2am. How can I get myself out of this? Will it ever end? Looking for support and inspiration. Yesterday I slept and I wasn't so depressed but today is another story.

33. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=13127>

I am so, so sorry for your losses. ***You are dealing with grief piled on top of grief, of course you are overflowing.*** No one should have to go through what you are dealing with right now. Partners are great, but it just isn't the same for them as they don't carry the babies within them, focussing all their attention on growing a healthy baby. I am sure all your efforts feel for nothing right now, but those little babies, your angle babies, did and do feel your love for them. You are still their Mum. It will never be OK but it will also never be as dark as it is now. Keep going, but do allow yourself to grieve. If all you can cope with right now is sobbing on the sofa then that's alright. Maybe tomorrow you will feel able to cope with something more. Keep letting your feelings out and keep talking. Sending you love and hugs. S xxx

---

It's all still so raw but it will get easier.

I haven't experienced the loss you have but have now had two MC and my second has been rather horrific and long drawn out. A few weeks ago I struggled to get out of bed and couldn't face every day life. ***Today suddenly I realised the clouds have lifted so much and I suddenly feel optimistic again.*** I didn't think it would be possible ever

Remember you are full of hormones and need time to grieve. But I promise it gets easier

Sending hugs xx

---

Sara,

I am so unbelievably sorry for your loss and for the world of grief and pain that surrounds you now, coming from nowhere, as it did.

***There is a depth of darkness in grief*** that is scary and impossible to comprehend, a place where if you visit, you will never see anything in quite the same way again. On this forum, we understand

You don't need to do anything just now. In some cultures, grieving relatives do nothing but sit and wail for a whole week, with friends around to comfort and provide food. The loss you've had, you might need longer before the inner wailing stops. Please let yourself grieve.

I wish no one ever had to visit this terrifying hole of pain. I am sorry that you are there.

Katie x

34. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1307>  
[2](#)

Hi,

I'm new to this website and forum, and I'm not sure anyone is going to be able to help me but I have a desperate need to talk about/write about my feelings.

I learnt that I had suffered a MMC on Friday, at 11w1 pregnant. Baby had stopped developing some time ago, and I went on to naturally miscarry over the weekend (horrendous experience, labour like pains, admitted to the hospital, lots of pain killers taken, and some tissue removed by forceps).

I'm absolutely distraught and I know it's still all very recent, but I feel like I'll never feel truly happy again- everything going forwards is going to be tinged with grief, a person is missing from my life and I don't know how to pick myself back up... \

I'm 30, I'm a mother of two (3 year old twins). Fortunately (with hindsight) I learnt very early on that I had fertility issues and was very lucky to conceive my boys on our 2nd round of IVF (3 failed iui's, 6m on clomid after 5 years of ttc). This latest pregnancy was a complete surprise, my husband and I did not believe we were able to conceive naturally. So, when I got that positive test result I was absolutely ecstatic, it felt like a miracle, and I couldn't have been happier.

As soon as we learnt we had lost the baby, my husband has been constantly telling me to be grateful for the children that we do have (and I am, they're beautifully healthy lovely little boys, who at times I didn't think we'd ever be so blessed to have) and has stated a number of times that he does not want any more children and feels that this loss is a bit of a relief. I could not feel more differently to this...***I was previously completely happy with my two (though asking me before this pregnancy if I'd wanted another child would have been akin to asking me if I wanted a unicorn, as it seemed so out of the realms of possibility), but now I feel like a piece of my heart has been ripped out and that our family is not complete...*** Even if my husband did change his mind (which seems very doubtful), it's highly unlikely I'd go on to conceive again and so I really, really need some advice on how to move on from this...

***I'm heartbroken*** and can't concentrate on anything for very long. I'm really angry with my husband for being so insensitive, and for his feeling relieved. I'm being a rubbish mummy to my little boys that I love so much because I feel so sad, please someone tell me it will get easier?

35. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1300>  
[3](#)

It will be 2 weeks tomorrow since my collapse at home and emergency surgery and I am at the drs tomorrow, So I will just be honest with them and it can be their decision.

***I am just shattered*** and haven't gone a day without crying and I don't know how I am going to handle a 12-hour day with preterm babies.  
I tried talking to my partner last night, whilst he is totally amazing. I'm not sure he understands at all.

36. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1269>  
[4](#)

I never thought that after suffering a miscarriage 18 months ago, that I would be posting on here as I've just suffered another miscarriage! My partner and I had been trying for 11 months to conceive after the first miscarriage and I was confident that once I got to my 12 weeks I'd be safer! Went for my dating scan yesterday only to discover I'd had a missed miscarriage! I was crushed seeing an empty screen and no baby!

---

I'm so sorry for your loss.

I had a missed miscarriage in June, an emergency scan at 11 weeks showed a sac with no baby inside, just a black hole.  
***Take some time for yourself to grieve, I fought my feelings for a while to begin with but once I realised that wasn't working I tried to acknowledge them more.***  
Hugs xx

37. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=1207>  
[6](#)

I had my first pregnancy end in a miscarriage at exactly eight weeks. The father is just a friend of mine, and is glad there is not going to be a baby while I'm absolutely devastated. I'm finding myself extremely anxious to the point of random muscles twitching, and I have huge life decisions to make in the next ten days. Meanwhile, my hormones are off the charts. I have pregnancy, miscarriage, labor and delivery, and post-partum hormones all at the same time and most of the time I can't even tell that I'm being irrational. I can't stay on track during a conversation, I forget what I said five seconds later, I can't read because I can't remember the words, and almost everything on TV makes me sob. Plus, I keep ordering random things on the internet, and then they come to my door and I'm shocked. It's bizarre.

I thought this was a miracle. My miracle baby. I was on an IUD and got pregnant anyway, so it seemed absolutely meant to be, but I didn't know until about six weeks because I had no idea about "implantation spotting", so I thought I had gotten my period. ***It kills me that I was about to, but didn't get to hear my baby's heartbeat. It breaks me that I don't know if I have a boy or a girl. It eats me up inside that I'm a mama to a dead, precious being when all I want - so so so badly - is to hold that darling child in my arms.*** I went through labor and delivery for seven hours alone in my apartment because it just started and I was in too much pain to get to the door and call an ambulance. I ended up losing so much blood and sodium that the next day when I went to get checked out at the hospital, I passed out in the waiting room. When I saw my obgyn, she said I passed almost everything myself, but there was still some "extra tissue" in the left side of my uterus from where my baby was actually living. While I was awake, I got shots

all around my cervix and uterus and was still awake while they sucked and scraped out the last parts of my pregnancy. It's the first time I've screamed in a doctor's office since I was a child. I don't know what hurt more - that "procedure" or labor with a dead baby.

I just want my baby back and I can't stop crying or feeling anxious and I have no help. Before I knew I was pregnant, I planned to move in early November, so now I have a new job and apartment waiting for me somewhere else and I'm somehow supposed to pack everything up while I'm still having contractions. This is the worst version of the opposite of heaven ever, and I don't see how people get through losing their baby. The grief is unbearable. When do the contractions end? When do you start being able to eat "regular" food without feeling sick? Why do I still have cravings? How do I survive losing my beloved baby? What in the world am I supposed to do now?

38. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=11470>

Hi

Maria,

Sorry for your loss. Just wanted to reply as I too feel like I have many bad days. I don't know about you, but I find that miscarriage is such a lonely experience and sometimes it feels like no-one understands. It is nearly 4 months now since my second miscarriage and the few people who know seem to think that I'm over it. I'm not.

I'm having counselling and this has helped me to realize the patterns in my low moods. When I go out to work in the morning I feel like I am becoming someone else - someone who gets involved in their job and copes with things. ***Because my partner is away a lot on many days I am coming home to an empty house and this is causing my bad mood. I can literally feel my depression rising inside me as I make my way home.*** My counselling has helped me to realize that I need to plan what I am going to do each evening so that I'm not just sat there feeling depressed. However everything just seems so pointless. I was planning and hoping for a baby and now all that has been taken away from me.

Hope your counselling sessions start soon, I have found them helpful. Do you have anyone you can talk to? In the meantime, stick with the forum. I have found it helpful, even slightly addictive as it feels that only here do people understand me.

Claire x

39. <https://www.miscarriageassociation.org.uk/myBB/showthread.php?tid=11319>

I don't know where to start with my story. I'm 26, and was expecting my first baby. At 26 weeks, however, my waters broke. This was my first pregnancy and I was devastated. I cried a lot on my way to the hospital to get myself checked. The doctors claimed it wasn't the amniotic fluid and was given some meds. Things

got back to normal but I started having cramps a few days later on the 24th of March 2016. I went back to hospital only to fall into active labor on the way.

The doctors said they could reverse the process, put me on bed rest to try keep my baby in there as all the amniotic had drained off. A few hours later and I feel my baby coming. In the process of giving birth to him, the doctors told me I had lost him and I lost every ounce of strength to push him out. When he was born, I saw him breath and informed the doctors. He was taken and put on life support only to pass on a few hours later.

*I'm devastated. I feel lost and I feel like I'm sinking into deep dark hole I don't know how to deal with the pain.* I just go through the motions daily without anything really registering in my mind. Most times I just feel I want to see my baby.

Sorry for the gory details. Just had to let it out somehow.

40. <https://www.miscarriageassociation.org.uk/story/dear-me/>

Dear Me,

I was writing a piece about how to support a friend through loss, but I realised what we often need is to be a better friend to ourselves.

So instead I'm writing to you, past me, to be the friend you haven't got the strength to be right now, and to tell you that it's okay to not be okay.

\*

It's March, 2018. You're 26-years-and-4-days-old. It's been snowing again. Today is The Worst Day.

Today, your world implodes.

You feel the initial rumble in the loaded silence before the words are even muttered and you know then what's about to happen. The phrase, "I'm sorry there's no heartbeat" serves only as punctuation.

Just a week ago you turned right out of the sonographer's room, your legs wobbling with relief after seeing the fluttering heartbeat.

Today you turn left. Past the waiting women held rigid with fear and into the 'bad news room' where you wait for hours before the surgery is booked in for the following morning.

You're carried through the motions of surgery and recovery by some invisible resilience, masked gloriously by anaesthetic and morphine, and return home in a groggy and delirious state. You sleep for 11 hours, surrounded by family who don't know what to say, but who buy you pizza and clean your kitchen.

You wake up the next morning and are winded by the weight of it: what on earth do I do now?

So here's what I've learnt you need, and I want you to know that you are going to be okay. Even if it doesn't feel like it right now.

\*

**Trust the process.**

I'm not here to tell you it's going to get easier, that the grief will lessen or dissipate. No. That missing piece in your heart will always be there; the weight

of grief will rest heavy on your shoulders, and the emotions will render you unrecognisable. The pain is physical, too, which will come as a surprise; it will bruise your muscles, squeeze your lungs free of air, shock you into stillness.

But know that whatever you feel right now is exactly what you need to feel. Your feelings are valid.

And I promise you this; you will gain the strength to carry the weight of grief.

*Grief doesn't get lighter; you get stronger.*

But it takes a really long time.

**Be patient.**

***Grief doesn't leave. There will be days when you feel lighter, which you'll recognise only when your laugh takes you by surprise.*** Don't feel bad for laughing. You don't have to be sad to prove you are grieving, and you don't have to be happy to prove that you're not. You can live your life with a missing heart piece; some days you just have to work a little harder to breathe. And on those hard days, if breathing is all you manage, that's okay.

**Listen to your body.**

Despite how cross and betrayed you feel, your body has only ever looked after you. Repay it in kind. Slow down when it needs to rest, move when it needs to rejuvenate, and enjoy the sun on your skin when it needs warmth.

Oh, and wine will make you cry, so go easy on the Chianti. Or share it with friends; it's good to cry. They might even make you laugh, too.

**Release.**

You have had so much to process, your little brain is fit to burst. You don't have to carry all of this in secret, grieving silently in the shadows. Find an outlet, whatever that may be; some run (*if I tell you you'll be running a daily 5k in a couple of years you won't believe me*); some talk, whether to a counsellor, therapist, friends (*you'll find it helpful to open up eventually*); some find a creative hobby (*yours will be crochet, you just don't know it yet*); some write, (*and some, like you, never stop*) it gives you the space and clarity to process your feelings, emotions, experiences. Some day it may even help someone else, too.

**You are not alone.**

You may not feel it right now, but you are not alone. For one, your partner has lost a baby too. And whilst he's picking up the pieces of your broken heart, his heart has shattered in all the same places.

If neither of you have the strength to raise each other out of the pit of grief, then understand at least that you are both there together. Talk to each other, and listen. Listen to the emotions that fill the space between words. That's where the truth resides.

And when you're able to look up from the depths of darkness, you'll see your loved ones, ready and waiting. They may not fully understand, and they may not even say the right things a lot of the time, but they are there. Sometimes that's enough. They may even feel a loss too; a grandchild, niece or nephew, cousin.

And if it's a blanket of comfort and understanding you need, get online. There is a whole community of baby loss warriors just like you. They will make you feel heard, connected, safe.

**And finally, forgive.**

You're angry: at the alternate life you should be living, at the lady with the bump you should be flaunting, at the body that "failed" you, at the partner who grieves differently to you, at the people who can't comprehend your invisible loss.

Anger, though undoubtedly necessary as part of the process, becomes exhausting if carried for too long and can turn destructive. No body failed you and no-one stole from you. There is no alternate life existing without you and no right or wrong way to grieve. Learn to recognise when a feeling stops serving a purpose. Learn to forgive. Forgiveness releases the heavy clouds of anger.

\*

Of course you think the real cure for grief is the arrival of the longed-for "rainbow baby". That's a lot of pressure to put on yourself, and grief doesn't step aside for a new arrival. Besides, I should probably tell you now that your story gets a little more complicated.

That's not to say give up hope. Quite the opposite. Hope fills your lungs with air. Hope places one foot in front of the other. Hope disperses the clouds and splashes the sky with colour.

Have hope, always.  
With love,  
Jade

x

41. <https://www.miscarriageassociation.org.uk/story/amys-story-2/>

1 out of 100 women in the UK experience recurrent miscarriages (3 or more). Sadly I've suffered 3 in 14 months.

I was 6 weeks pregnant when I first miscarried. We'd known for 2 weeks and that Sunday evening as I prepared for bed I saw blood. I had a gut feeling and I told my husband that I thought I was miscarrying. There was more in the morning when I went to the loo, like I had come on. I knew it had gone, I was sad but pragmatic. My two sisters, my mum and my sister in law suffered miscarriages. I knew it was very common. I went to the EPU and after a scan they confirmed the loss. To be completely honest I felt ok after the first, almost like I had gone through it and all would be fine.

The next miscarriage in April was harder. No bleeding and I had all the signs of pregnancy which was comforting. I booked an early scan at our local hospital and at 8 weeks we were told there was nothing there. On the screen all we could see was an empty sac. The sonographer confirmed an anembryonic pregnancy or 'missed miscarriage' where the embryo doesn't form but your body still thinks it's pregnant. I waited and when I didn't miscarry I took misoprostol which sadly also didn't work. In the end I booked in for an ERPC.

*This time was a lot more difficult to deal with emotionally. I felt like that there was a constant layer of sadness fog, a kind of dull ache. I also suffered my first bout of shingles after the surgery, I guess due to the stress of the whole experience.* Annoyingly I'm still suffering with repeated outbreaks of shingles and other stress related skin conditions.

The third and last miscarriage was the worst. Again there was no bleeding and we were silently hopeful. I felt physically sick travelling to our 8 week scan but sadly we had the all familiar blank screen again. Another missed miscarriage. It was

horrendous and I cried a lot more, the more you have the worse it is. This time I opted for natural management to avoid surgery and three weeks later I started to bleed. No one talks about the physical process of miscarriage. My sister-in-law told me she had suffered labour pain and that it was a huge shock to her. She didn't want me to be surprised and unprepared but I still was.

The bleeding was so severe and I was passing a lot of blood clots. I was hoping to catch any tissue so I could pass it to the hospital for testing but that was impossible. After 24 hours I couldn't sit up without feeling faint and I passed out whilst I was on the toilet. I woke up on the floor and had hallucinated that Chris was with me when in reality he had left for work half an hour earlier. Luckily my sister-in-law was coming over to visit me and she called an ambulance. I managed to open the door to the paramedics and I went to A&E. In the end I had two blood transfusions and emergency surgery. My haemoglobin count was 66 on admission, a healthy level for an adult woman is roughly 120.

It took me about 2 weeks to recover physically, I'm still recovering emotionally. Still struggling with shingles! We are very lucky to be blessed with a beautiful and lively 3 year old daughter but 2 children were always part of our plan. I am trying to deal with the idea of this not happening as I'm running out of hope now. We are having tests soon on our wonderful NHS to determine whether it is possible. I feel terribly guilty that I may not be able to give our daughter a sibling, I feel close to tears when I see her engage so wonderfully with other babies. Still so much to be grateful for but the longing is always present. Any pregnancy news twists in my gut and my enthusiasm and positivity are dwindling.

Infertility and baby loss are unfortunately a very real part of life but it doesn't make it any easier to deal with. I think about our three lost babies often. I will always be a mother of 4 no matter what happens in the future. I send my love, support and strength to everyone suffering like me. The more we talk openly about this, the better.

42. <https://www.miscarriageassociation.org.uk/story/my-story-of-miscarriage-beauty-from-imperfections/>

How do you describe 2019?

Many years ago I came across the Japanese philosophy of wabi-sabi – a concept of finding beauty within the imperfections of life. I did not resonate with it then because I always believed things could be better. Maybe one cannot be perfect but one could ALWAYS be better. This endless pursuit of perfection (or betterment) has been the driving force for my personal growth. However, little did I know that this seemingly GOOD motive has gradually become a source of enormous stress to me. It made me focus only on what was not enough about myself and what was missing in my life.

This summer I had my first miscarriage. The pain of losing a baby was indescribable. It is not only about the loss but the whole process of passing through days carrying the lifeless soul inside you up til the surgery and the anxious time waiting to fully recover so you could try again. ***Nonetheless, it was the shame from the failure of being a mother that devastated me the most. I felt utterly defeated and "imperfect". This shame kept me silent about the painful experience.*** In our society, it is almost like a taboo amongst friends and family.

Every time when this topic was unintentionally brought up, we had this mutual unspoken understanding that perhaps it was better not to talk about sad things? Life goes on.

On my 36th birthday, I had my 2nd silent miscarriage. It is called a silent one because there is no symptom nor trace of miscarriage. You only find out the news during the ultrasound scan. Yes, when most people are looking forward to hearing the first heartbeat of the baby, you'd hear the opposite. And yes, life can really hit you the hardest when you are in your most unprepared state. Even though I had my first experience a few months ago, it did not make the second less painful. This time sadness and shame has quickly turned into a deep disappointment, both at myself and at life – as if hope has silently slipped away, no matter how tightly I hold on it. Despair made me want to escape from reality. Why do we have to suffer? What are we trying so hard for?

At my weakest moment, I saw a reflection of light in a shape of heart on my ceiling. That moment I recalled wabi-sabi and the book “Love for Imperfect Things” that my husband got me after hearing me blabber on and on about this ancient philosophy. I realised sorrow and pain made me overlook the joy, both the physical and mental joy of celebrating life when we learnt about the pregnancy. Without these experiences, I would not realise how ready we are for parenthood and how grateful we are to be there supporting each other unconditionally.

Wabi-sabi teaches me that the true meaning of life is not about accepting imperfections but to seek beauty from imperfections and wholeheartedly embrace these imperfections. When you are vulnerable, you become the most beautiful version of yourself.

I still feel defeated and broken yet I know I am on the journey to be a more loving and caring person. Instead of forcing myself to forget the grief, I choose to move forward with it and embrace my flaws proudly and no more in silence.

2019 is surely an imperfect year!

To welcome the new decade, I'd gift myself, my dear family, friends and all women having similar experiences a quote by the author Haemin Sumin\*:

“It's okay that you have flaws. How could our lives be as clean and white as a blank sheet of paper? Life naturally takes its toll on our bodies, our minds, and our relationships. rather than choosing a life in which you do nothing for fear of making a mistake, choose a life that improves through failure and pain. And shout out loud to your struggling self, I love you so much.”

Nanette Lam

31.12.19

43. <https://www.miscarriageassociation.org.uk/story/miscarriage-workplace-victorias-story/>

I'm a civil servant at the Department for Business, Energy and Industrial Strategy; I take pride in my work and take my career seriously, and it's important to me that I feel valued for the contribution I make.

When I had two miscarriages at work I was confused and afraid, and my usual professional persona disintegrated rapidly. In the space of a few moments I went from planning what I wanted to say to my team in the next big meeting to feeling completely out of control of every aspect of my life. *I just sat shaking at my*

*desk, desperately thinking about what I needed to do but not being able to do anything but cry.*

*When, some weeks later, the haze of despair and grief started to lift a little, a thought struck me:* what if the managers who had supported me through two of the most difficult times of my life, and who had played such a huge part in me returning to work as a productive and respected member of staff, were one-offs? There could be many people out there who, understandably, simply wouldn't know what to do if someone in their team – male or female – loses a baby. That meant that the compassionate approach which had been shown to me, and which helped to motivate me when I came back to work, was not something which everyone could rely on.

So with the support of others in the Department, I wrote some guidance which offers advice to people who want to support team members who are experiencing the loss of a baby. It includes basic principles, such as what to do if a team member starts to lose their baby at work, what you should (and shouldn't) say to them, and some practical advice on taking leave, in line with advice from the miscarriage Association, Sands and my department's HR policy.

The first time I miscarried, I was physically in the office. It's a very busy open plan building and at the time I led a large team – my hysteria was therefore very visible. My manager was fantastic in moving me to a quiet room where I could tell her what had happened, which gave me space to call my husband and for her to gather my things, switch off my computer and put out a bland message to my team, telling them that I had left to deal with an emergency. She also offered to call me a taxi so that I could get to hospital quickly.

The second time I lost a baby I was working from home and no-one could see my devastation. I called my manager to tell him what had happened; he asked me what I wanted other people to know, and made sure that I was either represented at the meetings I had scheduled or postponed them on my behalf.

Both times I was given the space I needed to start to recover, and was reminded of the emotional support services that I could access. Nothing will ever replace the babies I lost, but I will always be grateful to my employers for helping me at two of the darkest periods of my life.

I want to urge employers to put guidance in place to help people like me and to provide proper support to people who have lost a baby, so that helping people and making them feel valued becomes the norm rather than remaining an aspiration.

44. <https://www.miscarriageassociation.org.uk/story/my-baby/>

These are two examples of the things a nurse and my mother in law said to me after the worst thing happened to me. The worst thing doesn't even cut it. I have never known pain like it.

A woman I respect a great deal said to me afterwards that this isn't just grief. This is the loss of 5 years planning. This is the loss of future planning, of happiness so short-lived. This is the loss of everything I have lived for. This is the loss of being a mother. This is the loss of my baby. The loss of hope.

I didn't know how I was meant to feel after the 10<sup>th</sup> February 2017. Have I been a mother? Do I have a right to grieve for a child I didn't hold in my arms? And what about the other parents in the world, even that day, who lost a child they were able to see, kiss, hold, feed. And those whose scans showed more than what

my 13 weeks did? Can I rightfully cry for my loss when theirs seem so much more painful?

The 17<sup>th</sup> December 2016 was the happiest day of my life. The birth of my nieces and nephew filled me with euphoria I didn't think would ever be matched. But...my positive pregnancy test after 18 months of IVF processes, medications, injections, mood swings and debilitating anxiety and uncertainty, completed me.

In 2001 I was pregnant with twins. I made a strangely easy decision not to go through with this. I often think of them though and wonder how my life would be today with two 16-year-old children.

In July 2011 I married Adrian. In December 2011 I miscarried. I didn't know I was pregnant at the time. It was an unexpected but planned pregnancy as I was not on birth control.

And now this. It's as if my body decided that it didn't want to get pregnant naturally. We tried and tried. The injections sent me more loopy than I already am. My mood swings were unbearable for my husband. The hormones were driving me mad. But it was so bloody worth it. That feeling when I wee'd on the stick is one I cannot even imagine putting in to words. Elation, relief, joy are three words which come a bit close.

I spent the next 7 weeks planning for August 23<sup>rd</sup> when my baby was going to make his appearance. I am convinced he was a boy. His grandparents were already planning on who would babysit and when. My mother in law almost bought a Victorian rocking cot. I almost went to the Mothercare closing-down sale to buy everything he would need. We had quotes done to have a nursery made to house all those items. So many dreams, so much planning, so much anticipation and an itch I couldn't wait to scratch: to hold this dream in my own hands. My miracle.

Then the 10<sup>th</sup> February happened. Those dreams were shattered & the planning came to an abrupt end as if brakes were applied to a moving car but not in time and I flew off the cliff. My miracle didn't have a heartbeat, she said. He was gone. The room went dark, I took deep breaths and then ***I wailed an animalistic pain My heart audibly broke*** in that room in front of my mum, my mother in law and the nurses and doctors. There will not be ***a light at the end of this tunnel of grief.*** There will never be a time when I'll get over this. I wish people would stop telling me that I will.

Having an IVF embryo successfully implanted was an achievement for which my consultant was extremely proud. I had lost the weight I needed to, I had responded so well to the meds and the eggs I produced were of extremely good quality.

Why then did this happen? To me? I'm angry. I want answers. I need to know why. What could I have done differently? Did I do something?

I don't know anyone who can fully and completely know what I feel. I appreciate support and I know people love and care for me. However, no one knows how it feels to be so desperate to be a mother, who has undergone medical treatment in order to achieve that, who has been the most doting aunt but who remains, again, childless and at 38, has almost given up all hope.

Hope – a word I firmly believe in. Religion is something I associate with peace. However, hope is real and hope is all I have. I hope that there's a God. I hope that he or she will one day stop punishing me or testing me. I hope that I can show the

world the same thing that my friends and family are – that I can be a mum. I would be a perfect mum. I don't need hope for that because I just know I would be.

When I was 4, I hoped that the touching would stop. When I was 11, I hoped and begged that the touching would stop. When I was 16, I hoped that I wouldn't have another breakdown. One day when I was 18, I hoped that he would stop and a few days later, I hoped that my parents would never find out that I was raped. When I was 21, I hoped that my past wouldn't make my future. When I was 22, I hoped that moving to London would bring me closure from my childhood. Now I am 38 and I hope that before I die, I am able to give my baby the love that is trapped inside me and waiting to explode in a million, billion beautiful glittery hearts all around them. I want my baby back but he's now gone. I hope that he'll have a brother or sister who I may one day meet in person instead of in my dreams, who I can hold in my arms instead of briefly in my womb, who I can kiss instead of watch as they bleed away from me leaving me right back to where I started – nowhere.

45. <https://www.miscarriageassociation.org.uk/story/kathryns-story/>

I knew. I knew the second I stood up. I just knew it had gone wrong again.

Eighteen weeks into my second pregnancy. A mere six months since I had miscarried our first baby. We thought we were okay. We'd made it nearly halfway. We had just two weeks to go before the anomaly scan, where we would find out if all was okay and if the baby was a boy or girl. This pregnancy had already been tinged with sadness: A small bleed. An ultrasound. The news I was pregnant with twins but only one was alive in my womb. I had to keep positive for the baby that was continuing to grow inside me.

Then the day of my brother's 40<sup>th</sup> birthday dawned. It was a lovely, warm August day. A normal day. I went to work as usual, but while I was dealing with a complaint, I felt cramps. Only slight, but I worried of course. It's what you do when you've miscarried previously. The cramps got worse through the morning but I shrugged them off as normal pregnancy pains. Then at lunchtime I stood up to leave the office and I knew something wasn't right. I half ran to the toilet. Blood. A lot. Cramps. A lot. Terrified, I ran back to the office and told my boss, in between hysterical sobs. I went to hospital and waited for an ultrasound. I didn't want to go in as I just knew it wouldn't be the news I was desperately hoping for. I wanted the sonographer to prove me wrong. But she couldn't. My baby was still. There was no heartbeat.

And I shut down.

The next day I laboured. I delivered two perfect little boys in hospital.

And I shut down further.

Lying in the hospital bed. My babies gone. I refused to eat. I ached to be with my boys.

*"Why me?"*

*"It's not fair"*

*"Why is this happening?"*

*"What did I do wrong AGAIN?"*

*At night I would sleep. Then I'd wake up and for a blissful moment, all seemed right with the world. Until I remembered. Then the pain would wash over me once more. Day in day out.*

Physically, I healed. I thought I had mentally too. I went back to work after six weeks away. A gradual introduction back into the mundane working day. However, mentally, things were not healed at all. A darkness was creeping in. Slowly. So very slowly, I barely noticed it. Others couldn't help but notice my moodiness. My paranoia. My anger.

Two months after we lost the twins, my father-in-law died after a relatively long illness. At his funeral, I looked at his coffin and said goodbye as the curtains closed. At that moment, I realised I hadn't said goodbye to my babies. Guilt washed over me. I had to do something. Anything. I thought it would help me heal. We went to the coast and released three balloons – one white for our first baby, then two blue, joined together as twins should be. But it didn't help.

Christmas came. My anger and disdain for all celebrations grew. New Year. Maybe this one will be better. Maybe this one will give us a baby. Maybe. Just maybe. But the blackness was creeping further and further in. I could get up in the morning, go to work, come home and cook dinner, go to bed. But I was hurting. And angry. Oh so very angry at the whole world. I would scowl at pregnant women. Turn my head from happy mums pushing THEIR babies. I felt they were gloating. Taunting me.

*"Look at me. I can carry a baby. I can give birth. You can't. You can't. You can't"*

And the anger and pain came to the surface and I made life hell for those closest to me. My poor husband. He was also grieving the loss of his children. Then his father. But I thought he didn't know what the pain was like for me. As a mother. As a mother without her children. My pain was all I could focus on.

Then one day, I was making lunch. A cheese sandwich. Nothing out of the ordinary. As I cut the sandwich in half, my hand stopped. I looked at the large knife for a few minutes. Then the thought in my head...

*"If I push this knife into my stomach now, I can go and be with my babies"*

I began to cry and put the knife down. I immediately rang the surgery for an emergency GP appointment. That thought of ending my life frightened me. It was a calm thought. Not one fuelled by an emotional outburst. Just calm and collected. Like it was the right thing to do. But I knew it wasn't the right thing to do. How could I leave my husband? My parents? My mother would lose her child. What right did I have to do that to her?

And so the next morning I spent 20 minutes sitting in front of my GP, sobbing. I was truthful and honest. I told him I wanted to take my own life. I filled in a questionnaire which advised I was in the grip of depression. I walked away with a prescription for anti-depressants and a telephone number for pregnancy-loss counselling.

The medication helped. The counselling was incredible. Every feeling and thought of anger, hate, fear, worry and pain poured out of me while this woman listened. Just listened. To this day I know I said some really awful things to her. But they were my thoughts and my feelings and they had to have a voice. I couldn't keep them buried. They were part of me. Part of my grief. I told her I was wrong to say those things, but she told me: *"Grief is personal. There is no right way. There is no wrong way."*

Dealing with grief after miscarriage is one of the hardest things I've had to do. And I've had to do it four times. Four pregnancies. Five babies. All loved from the moment the test turned positive. However, the grief and depression after the late second trimester miscarriage was the worst. It took a long time to recover. To feel ready to try for a baby once again. Support, sympathy and understanding helped me through it.

It was a road I never chose to travel, but the journey led me to my rainbow. A wonderful, amazing and incredible little girl whose mother never gave up.

46. <https://www.miscarriageassociation.org.uk/story/uzmas-story/>

There's no point waiting to take it, I thought.

I was on the train back from Switzerland to my home in France from the gynaecologist. She'd said it was fetal demise. I felt nauseous. I looked around me at the other passengers buried in the morning broadsheets, on their way to work or protected in their own world, skulls muzzled in large earphones. I looked out of the window at the grey sleet.

I glanced with shame at my husband sitting opposite me. We exchanged pained looks. I wanted to avoid another fresh set of tears, so I said what I thought: "there's no point waiting to take it." In a gruff voice I demanded the drugs and the water.

In a jerky move of self-disgust, I jabbed out four tablets from the silver blister pack. I noted the ivory hexagonal pattern and was momentarily fascinated by this snowflake-looking poison for my 8 week old baby. I threw them back down my throat and swallowed.

I didn't know what to expect. While waiting for whatever I was meant to experience, I felt like a killer. Should I have waited to think about it? She did say I could wait until Wednesday. Was my pragmatism ill-judged? I knew I'd done the right thing, there was nothing in my power to hold onto my dead child. My mind needed to tow my body to catch up with it, and my body to acknowledge cold reality.

During the journey, I contemplated the rainbow of emotions I'd secretly fostered. Hope, determination, positivity, neutrality, disappointment, bitterness and depression. This time would be different.

Everyone told me one miscarriage is usual but with two under my belt, I was getting competitive about losing kids. Two in eight months. The abruptness of it. The all or nothing. The binary: zero or one. The go. The no-go gates. The get-out-of-jail-free card was denied. I felt like a big zero walking. A hole in the middle. Fast-forward to 1600mg of snowflakes, Tens and thousands of miligrams of pain killers. Pain-killers. If this is expectant management then I demand the emotional pain to be killed along with the severe contractions. I am numb. I feel nothing.

I crave sympathy messages, cards, robust bouquets and fancy chocolates. But second time round, none arrive. I have told everyone that I'm unwell. And that I'm going underground. What do I want?

***My grief is a private bubble.*** It's shiny and I share it with my dearest soulmate. We are bound in love and shackled by sickness. We know we will pull through. We share our news in concentric circles starting with people who know. I am touched by the depth of feeling from people who love me and reach out in all their wisdom. Those that don't understand will only know if it happens to them.

I will emerge from this cocoon. I will unfold my hopes. Dust off my motivation. Unfurl my determination. The vibrancy and energy will return. I'm practicing patience and learning resilience.

You are always stronger than you think you are.

47. <https://www.miscarriageassociation.org.uk/story/beas-story/>

Firstly, we never talk of miscarriage and pregnancy abortion hand in hand, but I had an early abortion several years ago. I had felt ashamed but not regretful, and yet when I experienced miscarriage I was plagued by this past decision, like the three losses were a punishment. With the estimated statistics at 25% of pregnancies ending with miscarriage, there must be other women in my boat. If you are like me, you may feel like you deserve pain as a result of choosing to take one life you didn't want, only to mourn the life you did. Trying to accept that I made the right decision at the time has been a separate battle.

I am so very sorry if you are reading this and are going through a miscarriage.

I found out that I was pregnant shortly after I got back from my honeymoon. We were thrilled, began imagining our future as parents and told a handful close friends and family. At 8 weeks I impatiently organised a scan to see the baby. I thought that miscarriages were tragedies that happened to other people and when they told me that I had a blighted ovum or 'missed' miscarriage I assumed, staring blankly at an empty sac on the screen, that my dates must be off.

The next day I started to miscarry naturally (perhaps a swift connection of mind and body). I cannot articulate the aching grief in that moment and the days that followed, but I put the baby books away, tried to be pragmatic and repeatedly told myself that it was just bad luck.

Unfortunately the miscarriage took over three months to complete and this broke my resolve. I bled constantly and became anaemic. Regular scans showed that some of the pregnancy tissue had clotted in my cervix and wasn't budging, but determined not to have surgery, I sat it out. The relentlessness of the bleeding, the desperation to try again and the knowledge that it would take a while for my body to get back to normal made me unnecessarily frustrated. The bleeding abruptly came to an end coinciding with familiar pregnancy signs and I did a test; it was positive, but after a few days of tempered excitement I started bleeding again. I had what resembled a heavy period and passed the sac within 48 hours.

I felt like my body was reset and the next regular cycle a couple of months later, I got pregnant again. ***I was completely heartbroken*** when I started bleeding the day after a positive test. I went home and buried my head into a pillow, punching the bed and sobbing. My husband and I had just moved home and I felt sad that ***our new house was tainted already with the pain and stress of another loss***. This time I booked in with a miscarriage specialist.

Over the seven months since the first pregnancy I had become more and more isolated. I found no joy in anything. I stopped seeing friends and the weight of feeling like I might not be a mother burdened me continuously. I become completely self involved and angry at the world. My husband was a saint. It was hard to shake the feeling of resentment towards others who were pregnant. I hated that I could only be truly happy for friends who had had a 'struggle', a thwarted journey to parenthood; those who had found it easy were somehow less deserved – what a horrible thing to think.

After light bleeding and pain for a week, I went to the Early Pregnancy Unit to check that the pregnancy wasn't ectopic. And then everything changed. To my surprise there was a heartbeat and the baby was measuring 6 weeks. I went back every two weeks to check that the pregnancy was progressing and every week I became more confident. Before every scan I would convince myself that it would be bad news and then the tears would stream down my cheeks when I saw him kick and wave. I eventually stopped bleeding at 10 weeks.

After a very nervous pregnancy, my little boy was born this year and I am so thankful to have him. I was blown away by the endless support of colleagues, friends and family during the harder times. I have to be honest, I wish I was braver. I wish that I could have been a better person. I think that I have learnt a lot about myself (both good and bad) and maybe I'll be a better wife, a better friend and a better mother now...

I know full well that I have only had a taster of the pain that infertility can bring and my heart goes out to all who are struggling or have struggled. You are the unsung heroes of this world.

48. <https://www.miscarriageassociation.org.uk/story/colettes-story/>

Friday 14th July 2017. I will never forget that day. It was the day that we went for our 12 week scan, only to be told that there was no heartbeat and our baby had not made it past 6-8 weeks. ***I can still hear the sonographer's words, 'I'm so sorry...' I remember the feeling of utter devastation, yet the tears didn't come straight away. I felt winded, like I'd been punched in the stomach.***

We'd had no reason to suspect that anything was wrong. We had decided to try for another baby and within a month we had a 'positive' test result. I had the usual pregnancy symptoms, including nausea, and even developed a 'bump' which people had started to notice. I had done my best to avoid the awkward questions but through sheer excitement and possible complacency, due to a previously uncomplicated pregnancy and birth, I'd confirmed to a good number of people that we were expecting our second child. Looking back, I do remember the nausea subsiding at about 8 weeks and I had started to wonder whether I was feeling 'as pregnant' as I had the last time but they were fleeting thoughts.

We had decided to take our two year old with us to the scan as we thought it would be lovely for him to see his baby brother or sister on the screen. That was a mistake. Once we'd been given the news that there was no heartbeat, we were taken into a room to discuss our options. I remember walking through the waiting room, trying not to make eye contact with the other women who were waiting excitedly to catch a glimpse of their babies. I felt a pang of jealousy towards those who would receive better news than I had that day. As we waited, we tried desperately to distract our little boy with books and toys but all I could do was cry. The tears came and they wouldn't stop.

We decided on 'medical management'. I returned to the hospital two days later to take a tablet and was then admitted two days after that to have a pessary administered and deliver the baby. It may only have been the size of a grape but it was my baby. That was the single worst experience of my life.

It was two weeks later when I received a call from the hospital to say that the tests had revealed that I'd had a partial molar pregnancy. I was on holiday at the time and was told to use a recommended website to read up on molar pregnancies. It

was such a lot to take in. When you look up molar pregnancies you will almost always encounter the words ‘cancer’ and ‘chemotherapy’. The chances of needing chemotherapy to get rid of the remaining molar cells were very small, however, I found myself focusing on those words and going into a complete panic. My thoughts were that I would never have another baby and I would get cancer. I kept thinking, ‘Why couldn’t I just have a normal miscarriage?’ ‘Why did it have to be complicated?’

I spent the next three months sending blood and urine tests off every two weeks and making the anxious phone calls to Charing Cross to find out whether my HcG levels were falling. Every time someone announced a pregnancy I felt jealousy, bitterness and resentment. I didn’t want to but I couldn’t help it.

It was Monday 30th October 2017 when I was given the ‘all clear’ to try again for another baby and only two months later, on Christmas Day, we found out that we were expecting another baby. We couldn’t believe it!

The first three months of that pregnancy I was a bag of nerves. We had two early scans for reassurance yet I still could not begin to get excited until after our fourth scan at 20 weeks.

Friday 7th September 2018. I will never forget that day. The day I gave birth to our beautiful rainbow baby.

Don’t ever give up hope!

49. <https://www.miscarriageassociation.org.uk/story/hs-story/>

I miscarried at 15 weeks. We were on a UK holiday in August 2018. I lost approximately two litres of blood and was airlifted to the local hospital where I delivered my baby. Later I discovered that I had only delivered my placenta and that I had lost the baby at some point in the four hours leading up to this moment (either in the holiday home, ambulance or air ambulance). I will never know where my baby lies. Devastated doesn’t begin to describe it.

Over the following 12 months, the aftermath of the trauma and the ongoing mental and physical effects dominated my life and derailed me entirely.

I considered myself to be a strong and confident woman with the tools to cope with anything. I was fiery, passionate and would wear my heart on my sleeve. I thought I knew exactly who I was. All of this changed overnight.

A lifetime of control came crashing down around me. I lost confidence in everything and was scared to do the most basic routines: go to work, do the school run, even teach a lesson. I was frightened, but I didn’t really know why. I began to suffer huge anxiety attacks in crowds and enclosed spaces. I retreated into myself, avoiding social contact as much as possible. ***I desperately tried to fight the feelings, to fight the loss of control, believing that I could push it away.*** I refused to believe that someone grounded in rational thought would be capable of such a reaction, or that it was related to the trauma I had been through.

***After two months of struggling and fighting, therapy helped me to accept the pain and loss of control.*** I was signed off work. ‘Nothing can feel any worse,’ I repeated to myself as I spent pretty much a straight 72 hours in bed.

It’s my reaction after this point that has really thrown me. I wasn’t prepared for the response of my nervous system to what I had suffered. Whilst I felt my mind was determined to ‘get over’ and ‘deal’ with the grief, I felt my body had other

plans. I know it's not that simple and that the two are intrinsically linked, but it's really not how it felt and continues to feel.

Going into town, rooms with lots of people, or enclosed spaces like shopping centres or supermarkets would trigger a weird kind of shaking. A cloud would descend over me. I couldn't think straight and a voice in my head started telling me that no one loved me and I was making it all up. Over the year, this kind of 'episode' became more frequent. There's no obvious trigger. Each time is horrible, frightening, mentally exhausting and draining.

Alongside the anxiety has been the lack of sleep. In the first few months, I would clock in approximately 3-4 broken hours per night and would rely on a sleeping pill at the weekend to try and 'reset'. Now the broken nights come about 4-5 times per week. Getting to sleep is easy (I'm always mentally drained from the day) but staying asleep is hard. Again, there seems to be no trigger and my mind is not necessarily 'racing' with anything in particular.

There has also been a drastic change in my outlook on life and, essentially, my personality. I take a lot longer to process information and respond to last-minute changes in routines or social plans. I am much more introspective, less fiery and dare I admit, much less judgemental of people and situations. I don't think I have a problem with this significant change in me but it has taken some getting used to. I don't need/desire to be in the 'thick' of things and am happy to sit and observe quietly in conversations, rather than making the significant contributions I used to. I'm trying to embrace my feelings (both good and bad) more instead of pushing them away. I've learnt that I have to accept how I feel.

*As the year anniversary approaches, the weight of grief bears down on me more than I could ever have imagined.* All the same places and situations still trigger an episode but it looks a bit different. My chest tightens and I just want to cry. I'm suddenly reminded that I should have a six-month-old baby. But I don't and what's more, I will never know whether this baby was a boy or a girl, and I can't even visit his/her place of rest, because essentially, there isn't really one.

*This heartache is something I will have to learn to live with because I have no choice.* I'm certain I will always feel incomplete, whether I go on to have any more children or not. Despite having the overwhelming support of my husband, 6-year old son, my best friend and other truly close friends, this has been the loneliest experience of my life. To those in the same position, I currently have no words of wisdom but I hope that this reassures you that you are not the only one.

50. <https://www.miscarriageassociation.org.uk/story/nilufas-story/>

How do I grieve the death of someone I never met, but someone I have seen grow up in my hopes, dreams and memories? This is a hidden grief. A torturous, uncontrollable sadness that is all consuming.

When a baby dies in the womb there is no death certificate, no burial, no outcry of mourning. There was no bump, people never knew of the miracle developing, growing and thriving inside me. Then gone.

Sadly, the response from loved ones and health professionals can be callous and even cruel, because this life that existed in my body, that I mothered, hasn't existed for others. And in a rush to find a positive, and in some way fix a broken heart, what is said can be dismissive of the intense hurt that is felt. Can there ever be an 'at least' when a loved one has died? Can there ever be a 'fix' or

‘alternative’ for my babies’ death? You, me, everyone reading this, we all started out that size once.

Our babies were all very much wanted and each of their deaths brought shame towards my body; anger and intense jealousy at having to cruelly be a spectator watching others have their own family; and the deepest darkest emotional pain.

After battling years of infertility, I never thought our story would take us here. I never thought my baby would die every single time. I feel helpless not ever knowing if this will happen for us. I have lost friends, grappled with my faith, and let go of career goals in the process. Loss and more loss. This world becomes a very lonely place.

If it wasn’t for the baby loss charity Petals and their amazing counsellors, the Miscarriage Association and their volunteers, always on the end of a phone call, and the small group of people, who have helped us by listening and by holding our hearts deeply in theirs; giving no advice and making no judgments, I know I would have been lost long ago. But the one, my only, my husband, is my rock. He saves me every single day. There is an intense pressure this puts on a relationship and I know that I am lucky to have him by my side.

It is terrifying putting our story out there because I can’t control what comes back. ***But if my story helps someone struggling alone or if it helps shed some light on this very dark path of loss and infertility***, then it helps stop people like me, feel invisible.

I want people to know that I am a mother, a mother of babies that never knew the heartache of this world, they only ever knew their mother’s love. We will always wonder who they would have become. May they play in the gardens of jannah until we can be with them again one day InshaAllah.

51. <https://www.miscarriageassociation.org.uk/story/grey-skies/>

### Grey skies

I look up at a grey expanse  
a thick consuming  
emptiness of sky.  
Can I mourn something that never  
was?  
Can I mourn an emptiness?  
A lack?  
A nothing?

***I look up at empty skies  
I feel empty too I feel numb  
Like all feelings have been drawn out  
Have been lost somewhere along  
the way.***

I know I’ll find my way back to them  
But for now I’m living in this patch of grey,  
this empty sky

devoid of birdsong  
or life.

By Floriana

52. <https://www.miscarriageassociation.org.uk/story/when-my-heart-hurts/>

When my heart hurts

Thinking of the past with nothing to gain,  
People ask how I am feeling  
How do I explain?  
So complicated,  
With no memories to grieve,  
just the wonder of what could have been.  
The 'what ifs'

*That's when my heart hurts.*

How old would you be now?  
Were you a boy or a girl?  
Would you have been like me, your mum  
Or your dad?

That's when my heart hurts.

The 'what ifs' are the worst  
*That empty ache in your heart,*  
The lump in your throat that hurts.  
When thoughts run wild,  
You can't help but think of who they would have been.

That's when my heart hurts.

First little one, imagining you now being 15,  
Second little one, imaging you now being 4,  
Third little one, I should have been giving birth to you any day now,  
Fourth little one – wishing you were still growing inside me, you would have  
been 24 weeks now.

Oh how I wish with all my heart these were real ages.

Due dates,  
Birthdays,

Christmases,  
Family parties,  
Mothers day,  
Fathers day.

Every day hurts.

Imagining your faces, the bonds we'd have,  
Imagining the slides in the garden and the little shoes by the front door,  
Imagining my 15 year old chilling with me and listening to music.

That's when my heart hurts.

How do I separate this sadness?  
How does one sad time not roll into the other?

When you know you are so surrounded with love that you can feel it to your  
core,  
But you still feel empty inside.

When the tears roll and they don't stop for days,  
When the tears have been for so many years.  
There is just a numbness.  
A very specific sadness.  
The hurt that I will never know those 4 little ones that would have shaped my life

I know I would have been the best mum.

That's when my heart hurts.

The 4 little ones I've not been able to keep,  
What I would give for it to have been different.

This is what makes my heart hurt.

By Jodie

53. <https://www.miscarriageassociation.org.uk/story/they-had-a-baby-too/>

Pregnancy starts the same  
The excitement and the expectation  
The dreams of a newborn in one's arms  
A future full of hope, right before one's eyes

Pregnancy doesn't always end the same  
A life taken so soon, before it sees the world  
A life taken after it took its first breath  
Joy turned to tears and pain

There is such hope for the life that was so new  
It grows up peacefully beyond the blue  
No tear or pain touches them  
Surrounded by angels they dance and smile

It's a different story for the mum and dad  
They had a baby they didn't get to keep  
The struggle and pain to birth the little one  
Was no different to anyone else

There's no joy, no smile  
***There's hurt, and pain and loss  
No one or thing can fix it.  
It's a heartbreak like no other.***

You may not see her baby in her arms  
But she had a baby too.  
It changed her body and person  
It almost killed her too

Pregnancy, it doesn't end the same always  
But it always creates a mum, a dad  
They were pregnant without a happy ending  
It only created wounds beyond repair

By Chrisma

54. <https://www.miscarriageassociation.org.uk/story/ttc/>

Let's try for a baby

TTC

Checking the dates and the BBT

Every month BD BD

Always looking for that BFP

One month

Two months

Three months

Four

Friends getting pregnant

More and more

Hospitals and blood tests and sperm in a pot

Speculums and rubber gloves can never be forgot

Results and results and great there's nothing wrong!

So how can this really be taking so long?

Relax and relax and do some yogic breathing

Maybe next month we finally won't be grieving

Five months

Six months

Seven months

Eight

Is my period *really* one day late?

False alarm, false alarm, open up the gin

Throw the 15th Clear Blue test straight into the bin

Nine months

Ten months

Eleven months

More

And then all of a sudden

My chest is really sore

Nipples to hang your hat on

False alarm once more?

Test and test and test once more for luck

There are two little lines. Fuck, fuck, fuck!  
Is it finally really happening to me?  
Do I really have my BFP?  
Tears and sobbing and gasping for breath  
Yes and yes and yes and yes  
Quitting all the caffeine  
Quitting all the booze  
Fantasies of tiny feet running in tiny shoes  
Organic shower gel  
Natural toothpaste  
All the things to keep it strong bought such a great haste  
One week  
Two weeks  
Three weeks  
Four  
Sickness strikes and I want more  
Five weeks  
Six weeks  
Seven weeks  
Eight  
Early scan we can't be late  
Teeny tiny baby  
Strong heartbeat  
Wonderful beautiful little webbed feet  
Nine weeks  
Stop  
Blood

It's ok

No

Back to the waiting room

Dirty leather seats

Keep holding tight to those tiny webbed feet

*Screen turns away and the lady shakes her head*

*I'm sorry to tell you it's bad news, she said*

*Shaking and sobbing on a plastic bed*

*Feeling so numb I may as well be dead*

Then hospitals and speculums and more rubber gloves

And watching the toilet take something I love

Back on our own again

Having another try

The only thing I ask myself... is why?

Your Facebook photos hurt me

Cut like a knife

Happy faces

Small round cheeks

Making me weak

No escape

Baby on board

Give up your seat! She needs it more!

Out of the club and straight back to square one

I wonder if I'll ever get to be called Mum

By Holly

55. <https://www.miscarriageassociation.org.uk/story/together/>

Sat at the computer, staring at the blank white screen,

Having so much to say, but feeling stuck in a dream,

It all feels a blur, misty and hazy,

The confusion and pain has left you feeling so crazy,

Above all else, questioning is at the fore,  
Was it my fault? Is the blame at my door?  
Then you're pulled back to reality by the voices of others,  
Wanting to shout at them, 'BUT WE WERE STILL THEIR MOTHERS!'  
Through no fault of their own, they don't know what to say,  
Or the words that they choose, stay on replay,  
'You've not lost it have you?' 'At least you can have another try',  
Somehow you muster the strength to lie,  
Nodding and appeasing, just to get some space  
Feeling as though healing is some kind of race,  
'Isn't it about time that you moved on?'  
***'Think of the time that has been and gone',***  
***But it will never leave me, that feeling of loss,***  
***Fully aware that I must bear that cross,***  
***A conflict of emotions, sad, guilty and raw,***  
What right do I have to feel so unsure,  
I have a child, the light of my life,  
So grateful for her, so then why all the strife?  
Surrounded by people, feeling so very alone,  
Trying to move forward, into the unknown,  
But it's ok to feel, whatever you do,  
For as long as you need, because you will get through,  
We're in it together, those of us that know,  
And from this day on I wish to bestow,  
My pledge to you ladies, that I'll always be an ear,  
To listen to all that you feel, I'm here.  
So let's remember that no matter how hard it is now,  
Let's come together and make each other a vow,

That none of us are alone, it's ok to feel,  
We will never forget, but together we'll heal,  
Never think you must keep your thoughts at bay,  
Find another of us and just SIMPLY SAY.

By Alexandra

56. <https://www.miscarriageassociation.org.uk/story/95-safe-100-perfect/>

You were there after all our waiting.  
You are gone and I'm left suffocating.  
You were there, a hope, a dream, my fascination.  
You are gone and my dreams have become a bloody devastation.  
You were there, your little heart beating.  
You are gone and all my hope is depleting.  
  
You are gone but they say there is hope for another.  
You are gone and I'm not ready to be someone else's mother.

***You were there in our future plan.***

***You are gone, nothing left but your perfect figure on a scan.***

***You were there bundled up inside me.***

***You are gone and I feel alone, numb and empty.***

You were there 95% safe, they said don't worry.

You are gone but I will always be your mummy.

57. <https://www.miscarriageassociation.org.uk/story/lost/>

Your life was over before you were born

All that light that never shone

All those smiles we didn't see

All those years now lost to me.

No nappy rash to soothe with cream

No little twitches as you dream

No shining eyes that fill with tears

No mother's hugs to ease your fears.

No rosy chubby cheeks to pinch

No little squeals when you're made to flinch

No tiny little finger tips

To brush against my waiting lips.

No perfect toes to wrap in socks

No memories for my baby box

No nursery rhymes we might have read

No lock of hair from your precious head.

*All these little missing things*

*The hot and stinging tears they bring*

*The loss we feel. The heartfelt pain*

*At the sad, soft whispering of your name.*

Although you never came to be

You're still a special part of me

I loved you then, I love you now

I'll never stop. I don't know how.

58. <https://www.miscarriageassociation.org.uk/story/i-thought-it-would-be-okay/>

First time...

It's common

Years ago people wouldn't have known

Late period

Early tests now

Second time....

I'm sorry, your baby seems to be a little small

Surgical, medical or natural?

Just bad luck

More common than you think

Third...

A tiny heart beat, then the next week a new sonographer 'how sure are you of your dates?'

Phew some help and testing now

No cause found

More likely to have a baby than not

Fourth...

Fleeting

Brief thoughts of a pram and a cot

Next day no line

Bam, all done

Fifth...

Here we go again

Don't worry, brown blood is old blood

Try to relax

All gone within two weeks, no traces it ever happened on the screen

Sixth...

Groundhog Day,  
methotrexate this time  
Crushing despair, I've failed again  
Hope fading fast and feeling ashamed  
Our hearts ache to be Mum and dad

*Seventh....*

*Two joyful scans and then silence and a gentle voice at the third  
I can't do this again  
We're not doing this again  
Exhilarating relief and gut wrenching grief all at once  
Adoption assessment...*

*Daring to hope*

Intrusive questions week in week out  
Cautiously looking at baby things online  
We might be parents soon

59. <https://www.miscarriageassociation.org.uk/story/the-stolen-i/>

*There's an immense sadness that I just can't shake.  
Gripping and dragging me through cracks of its quake.  
If I think of how I was before this had been;  
I'm not sure I could show you ever again.*

From it, I know, I am no longer me.  
A mere shadow, an image; of what I used to be.  
Please look, really *look* into my eyes.  
Please don't smile. You know it's no surprise.  
And what you do know is you're not quite sure what to do.  
This has never been nor could even be a reality for you.

You stop and you think in awe how heart wrenching it had to be.  
Then you wince and look away. You don't want to think of this; of me.  
So I stand still while you smile right in my face.  
I stand still and let you live in your happy place.  
Just once though, please look. Acknowledge me in here.  
And know that if you stopped loving me; that is my biggest fear.  
  
And how could you? And how could I?  
When all I do in here is plead and cry.  
I don't recognize what I've become or where I will go.  
And what's it all mean if we reap what we sow?  
Perhaps am I deserving? Did I cause such distress?  
Am I paying in this hell? An eternal karma mess?  
And do you then see when you take a brief glance,  
I may not be worth giving that umpteenth chance.  
When I say "I", I don't recognize who "I" was.  
So, sorry you've lost her; but don't let me pause:  
I have to say this with affirmation so thick  
That you know that you don't need to ponder or pick.  
There's no choice. No options. No waiting for her back.  
I'm fairly certain that this "I" will always lack.  
What I was, what I thought, what you thought I could be.  
So don't watch and stare; don't wait for 'old me'.  
She's gone. She's passed on too. You can only wish her so.  
But if you're looking here, you'll have to let it go.

That sadness has taken every nuance of her that was real.

All hope. All Joy. All the expectations, did it steal.

Elizabeth Yarbrough

60. <https://www.miscarriageassociation.org.uk/story/finding-our-way/>

*Twinkle, twinkle, little star...how I wonder what you are,*

The wretched time I've mourned for you.

How big you are, how little you are. If your hair is dark or fair.

Your eyes, green, hazel, brown or blue?

I felt life flow into you. And I felt it rip away.

*The unfairness, the unjustness, the emptiness.*

Why, why, why, you couldn't stay?

So many unanswered questions.

So many heart-twisting cries.

So much pain. No fast solutions.

*Twinkle, twinkle little star...up above the world so high,*

Your fate was never up to me, or the nurses it would seem.

I tried and tried with all my might!

A happy ending was just a dream.

A 40-day heartbeat and a black and white scan.

A rhythm stopped, a blank page. No plan.

Too little to be recorded as life,

to even ask was causing strife.

Never even given a name,

just thrown away as 'hospital waste'.

*Twinkle, twinkle, little star...like a diamond in the night*

I'd imagine you fearful, lost in a vast dark room.

Sitting like a Buddha, chubby legs crossed tight

Eyes wide open, your two needy arms would move,

reaching out for me, but never finding my hand.

Never feeling the love I had for you, or knowing what I had planned.

I had to block that image dead,

my sanity hung on a thread.

I had to try to not see just pain, loss, loneliness and dark,

*Depths of grief and hopelessness I had to part.*

*Twinkle, twinkle, little star, how I wonder what you are.*

I felt so guilty moving on, and leaving you behind.

A need to find myself again, I'd fallen down a hole so far.  
I couldn't stay stuck in that place searching for answers I'd never find.  
So I searched for you in glimmers of light,  
saw you as a guide to find my path.  
We'd be reunited if faith and solace in each other we could have.  
Just like me, you learned to walk, to place your best foot forward,  
together we built up strength, believed in us and our hopes soared.  
We leapt out of the darkness and to the stars we learned to run.  
You danced on my wishes and then.  
You found me! Through the gift of my sons.

*Twinkle, twinkle, little star,  
how I wonder what you are.  
Up above the world so high,  
like a diamond in the sky.*

When the blazing sun is gone,  
when he nothing shines upon.  
Then you show your little light,  
twinkle, twinkle, all the night.

*Then the traveller in the dark,  
thanks you for your tiny spark.  
She could not see which way to go,  
if you did not twinkle so.*

Liz

61. <https://www.miscarriageassociation.org.uk/story/personal-reflection-miscarriage/>

Lost makes it sound misplaced like we left it on the bus  
On in the shops or up the street but really this is us.

***Lost sounds so trivial but there are no better words, it was here one day and gone the next not destined for this world.***

***Lost is really all we are,  
as we now feel empty inside.  
As we fill our day with meaningless things which can help us hide.***

Lost our baby, our baby is gone, our baby that never came.  
Lost to this world but still in our hearts and we still we feel the shame.

Lost one once now lost again the pain feels never ending. I'd already cried so many tears for previous years, I thought our hearts had mended.

But when we lost you. We lost again. And I constantly feel so mad, cause when We lost you, we lost again so many unmade plans.

I felt you leave which I will never forget  
and I know I need to grieve,  
My body aches, though it let you go – it weeps. It yearns,  
but it lost you,  
let you go.  
Literally down the drain.

The questions I keep asking Why, when, where.  
Could we have not gotten lost, maybe changed this course?  
Was there a map to avoid this pain?

Everyone says it's nothing you've done, but it had to have been my fault  
the guilt grows strong  
More than you. You've stopped growing. You've gone.

We Lost our baby, our baby is gone, our baby that will never be. Lost to this world but still in our hearts. I hope I can loose this feeling.

Our Lost Baby, Brother or Sister at 10 weeks we lost you. You were a baby. Not just a baby. But our Baby, baby number 3.

Lost baby, we hope you found your way to Neverland.

Alyson

62. <https://www.miscarriageassociation.org.uk/story/i-know-you-are-up-there/>

I know you are up there  
Looking down on us  
You are the angels in the sky  
That take away my heart

I know one day we will meet again  
Until that day I will always hold you very close to my heart  
***I take each day as comes with a big hole in my heart***

A special place that belongs to those I never met  
You are my angels and always will be and my thought n love is with you each day x

Helen White

63. <https://www.miscarriageassociation.org.uk/story/handprint/>

Though I only saw you as an image on a screen  
I still love you, with every inch of my being

Today is the day you were meant to be here  
And I have shed many, painful, tears

Dad and I miss you, every day  
We wish we could have been with you as you journeyed on your way

We wish we could hold you,  
And kiss you,  
And say:  
“We love you, our child, every day”

***Our hearts have been broken, but it left not a scar  
Just the sweet little handprint you left on our heart***

64. <https://www.miscarriageassociation.org.uk/story/all-the-questions/>

How can I miss you?  
I never knew you.  
***How can I feel empty?***  
You'd barely begun.

How can my life change  
When nothing is different?  
Except that you were, then you weren't  
Now you're gone.

How can my tears outweigh  
What you had measured?  
And also outnumber  
The days that you were?  
Why do I lie awake  
Wishing things different?  
When I know this is common  
And life isn't fair.

Why can't I forget?  
With nothing to remember  
Just let go of your thought  
When that's all that I'd got?

When will I ‘move on’  
And ‘get back to normal’?  
And how do I start  
Without you, little dot?

Steph Warren

65. <https://www.miscarriageassociation.org.uk/story/11%2bd-weeks/>

We were surprised, but delighted at the news we were expecting you.

Much quicker than we thought – given my age.

We watched with excitement as your bump grew, and I tried to eat well and keep fit, took my supplements to help nurture you.

We had our first midwife appointment, all seemed well, and we waited to meet you at 12 weeks.

We tried not to get too excited, but could not help dreaming of your cot, searching for your pram and nursery.

The first sign something was wrong was on the Sunday, sharp pains, some blood.

GP appointment followed, and then an early scan. We hoped, but inside I felt that all was not well.

Scan showed that you were only a tiny dot, not really developed at all, although cruelly your egg sack was large and working well.

We went home, devastated and were told to “let nature take its course”.

I had no idea what was to follow – the most terrifying, sad 24 hours of my life, with an emergency trip to hospital, signing your cremation form, and surgery.

***Exhaustion and total numbness followed.***

All our hopes and dreams for you were undone.

Now we have cried for you, said goodbye to you, lit candles and prayed for you – we are trying to move on.

You were not meant to be, but we will never forget you – now you are gone.

© Helen Gane 26/11/2012

66. <https://www.miscarriageassociation.org.uk/story/our-little-angels/>

Joy is a wonderful thing were pregnant

The moment we found out, We were over joyed with happiness

***This soon turned to grief, We lost our first little angel at 5-6 weeks Dec 2010,***

***We were told you will find your pain will ease in time***

***Our due date came and went Jul 2011, it broke our hearts***

***We felt cheated, no baby and broken hearted***

The anniversary of the miscarriage approached Dec 2011

We were sad for our lose but elated we were pregnant again

We were terrified too, what if it happened again

Our new dates almost mirror imaged our first little angels

We thought it's our little miracle, but soon we were troubled

Our second little angel was struggling, first scan was needed early

Our second little angel was not as big as hoped only 5.5 weeks ( not 8 )

***We were called back, 10 days later, to find out you had no heart beat and died at 6.5 weeks old Dec 2011***

***Dismayed, I could hardly walk, we both were speechless, our hearts broken, not again , why us?***

You both were wanted so much, it hurts us both,

We hope you will look after each other, and one day we will see you both

Daddy and I hope to have a little one here with us one day, our love for you brings us closer

Love you little ones always our little angels, Mummy and Daddy Jan 2011 x x x  
x

67. <https://www.miscarriageassociation.org.uk/story/hope-renewed/>

So two years later

And too much turmoil

Has been unable to spoil  
The wonder of you  
Our line of blue  
As we walk blind  
Into the future unwound  
Our fears born out  
And the rollercoaster starts out  
Towards the dreaded  
Date embedded  
First scan  
A 40 week plan  
Impossible to ignore  
Ripping at our core  
So we pray  
And delay  
To be absolutely certain  
That any final curtain  
Will be for real  
But the little blip reveals  
A thousand tears  
Un-realised fears  
And options for weekly appointments  
Weekly disappointments  
That we could not survive  
If he did not stay alive  
So we move on into the New Year  
And keep our hope near

That this time it is just routine  
That this time it will be pristine  
And we opt for the safest route  
Our worries put on mute  
C-section is chosen  
The date is frozen  
In time  
Eight long weeks slip by  
The inescapable date  
Our unavoidable fate  
Comes around  
Our hearts pound  
Time accelerates  
Anticipates  
Slips by  
Hears our cries  
And then  
And then....  
Out he comes  
Our past undone  
A piercing scream  
His smile, a dream  
***My chest caves in***  
***Four years of pain***  
Released  
Ceased  
And fate stands corrected  
Three months later

Happiness sublime  
A small taster, sublime  
But my little boys  
Our unrealised joys  
Are not left unknown  
Are not left alone  
And I am still...  
So sorry (and will never forget you)

68. <https://www.miscarriageassociation.org.uk/story/dark-hours-will-come-joy/>

*I've wandered aimless as a dandelion scattered to the wind,  
Watched helpless as the tides of emotion sweep across your Mother's brow,  
Seen rivers bathe her tired cheeks,*

And wished I could have known you as she has,  
I've listened to the platitudes and oh wells until I want to scream,  
I've heard the stories of someone, someone else has known,  
I've looked deep into their eyes  
And cannot find you,  
I see our child and see what might have been,  
And hope,  
I hope that we can find cheer in the good fortune we have,  
I've felt like driving long and hard and fast,  
I've felt like walking in the rain for days until I am sodden,  
If I was a drinker I'd chain-smoke and sip whisky from a paper bag,  
If only to lift this cloud of nothing that weighs so hard upon us both,  
I look at time and see a long expanse, where just a few days ago were seconds  
not months,  
I've seen the fear of close ones' eyes  
And felt the hugs of their thoughts and prayers,  
I've dreamt of futures yet to come,  
But know not when, or how or if they will,  
I've seen this time before I think,  
And know as I sit upon the brink of all these tears that struggle to run free,  
That if you could you'd cry for me,  
And so despite the numbness and the pain,  
I look upon our one brief interlude together,

A time of joy and hopes to carry,  
And know that in that better place we'll meet  
And hear you say how great it was to share our life,  
If only for a day,  
And now I hope you will watch close,  
Hold our dreams and with the glue of time and love,  
Bind this family once again, to laugh and smile and live in peace,  
For from these dark hours will come joy.

Rich