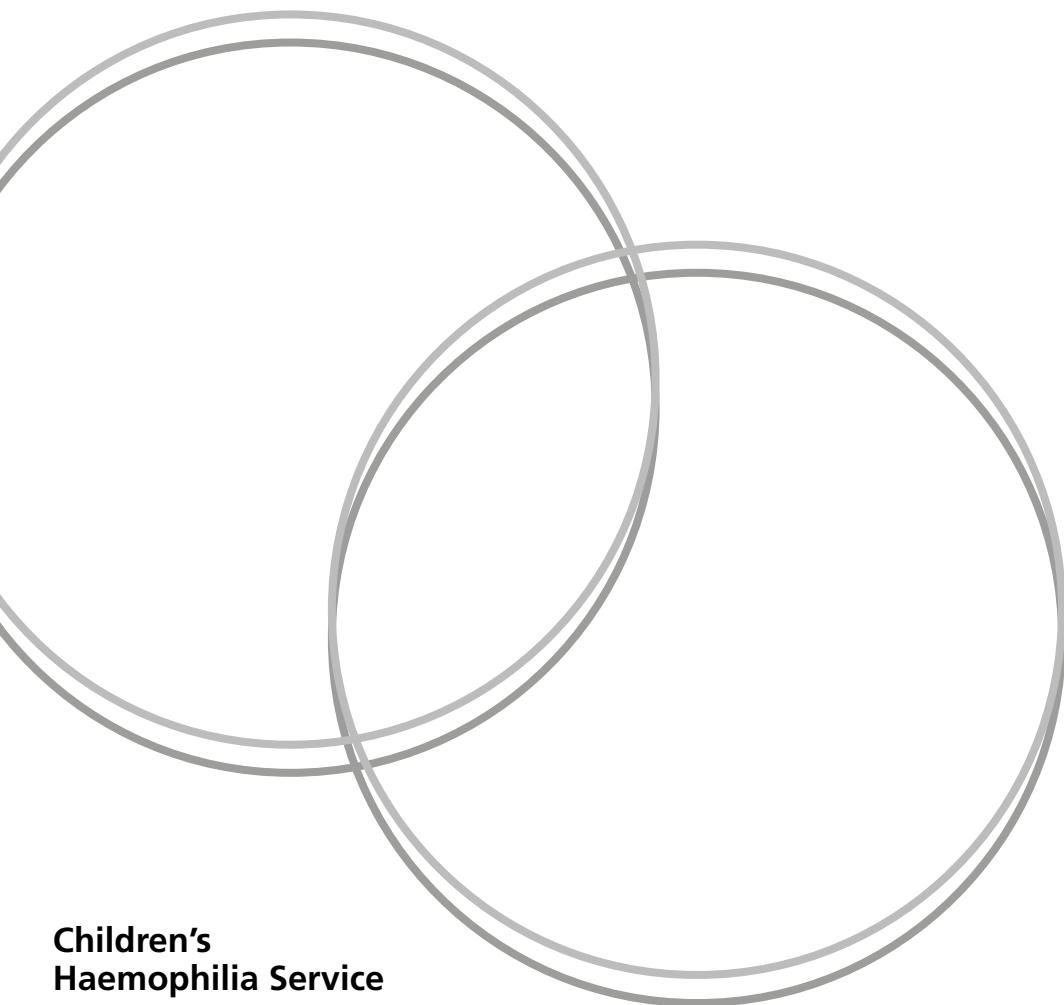




Oxford University Hospitals
NHS Foundation Trust

Delivering a Baby with Haemophilia



Children's
Haemophilia Service

If your baby is affected with haemophilia, they will need to be delivered at the Oxford University Hospitals Women's Centre, under the care of the Silver Star team (the high risk pregnancy service). This will mean we can make sure specific safety measures are in place.

Delivering your baby

Caesarean section is not usually needed because a baby may have or is known to have haemophilia. You will be offered an appointment with the maternity doctors to discuss the risks and benefits of both a caesarean section and vaginal delivery for you and your baby.

Planning ahead means we can ensure specific safety measures are in place, such as making sure foetal scalp electrodes aren't used (for monitoring the baby's heartbeat) and an instrumental delivery is avoided (where forceps or a vacuum extraction are used to help your baby to be delivered). These all have a risk of causing your baby bruising and bleeding.

The risk of an intra-cranial haemorrhage (bleed on the brain) for a baby affected with haemophilia after vaginal delivery is a rare, but possible.

A delivery plan will be made with you by your adult haemophilia consultant, which will be kept in your maternity notes.

Meeting the Children's Haemophilia team

If you would like to meet the Children's Haemophilia team before your baby is born they may be able to come to one of your appointments at the Adult Haemophilia Centre. Please let the Adult Haematology team know if you would like to meet them, so they can organise this.

It may also be possible for you to visit 'Prickles Club' at the Children's Hospital before or soon after your baby is born. This is a coffee morning for parents and preschool aged children with haemophilia and bleeding disorders. It is hosted every 3-4 months by the Children's Haemophilia team.

You may find this group helpful for meeting or sharing experiences with other parents.

Your care after delivery

During and after any delivery there is a risk of bleeding. If your factor levels are below 50% at the time of delivery, you will be offered treatment to help prevent any increased bleeding. Treatment options will be discussed with you at your adult haemophilia appointments during your pregnancy.

If you are a carrier for haemophilia A, you are likely to have normal factor VIII (8) levels at the time of delivery. Within 3-5 days of delivery your factor VIII level will drop to your pre-pregnancy baseline, which for approximately half of carriers is below the normal range.

5-14 days after delivery is the highest risk time for increased bleeding related to giving birth. If you are known to have low baseline factor VIII or factor IX (9) levels you will be given tranexamic acid to reduce the risk of bleeding.

The Adult Haemophilia team who have supported you through your pregnancy will work with the maternity team after your baby has been born, to make sure your bleeding is managed appropriately. They will also telephone you 10 days after the birth, to make sure your bleeding is settling and manageable.

If you are concerned about your blood loss, please contact the Adult Haemophilia team straight away (see contact details on page 7).

Your baby's care after delivery

After your baby has been born, a blood sample will be taken from the umbilical cord (which connected your baby to you before birth). This blood sample can be tested to check the factor VIII or factor IX levels in your baby and to confirm if they have the family gene that results in haemophilia A or B (if it is known).

Your adult haematologist will discuss this test with you before your baby is born. If you are happy for this to be carried out, your consent for it to be done will be recorded in your maternity notes.

Sometimes the blood sample can clot or be mixed with your blood, which will give incorrect results. If this happens we may then have to take a small blood sample from your baby. We will discuss this with you if it is needed.

It should not be necessary to give your baby coagulation factor concentrate after a normal vaginal delivery or caesarean section. If there have been any concerns about bleeding during the delivery this may be necessary, but this will be discussed with you at the time by the Neonatal and Children's Haemophilia teams.

The Children's Haemophilia team will come to meet you after your baby has been born. They will make sure you have their contact details and will arrange a follow-up appointment in 6 weeks. They will be able to discuss any specific queries or concerns you might have and explain the risks your baby may have of bleeding or bruising. You can contact them before the appointment, if you need to.

Vaccines and vitamin K

All babies, including those with haemophilia, should be given vitamin K at birth. This is routinely given as an injection into a muscle (usually into the thigh muscle), but if your baby is known to be (or possibly may be) affected with haemophilia the **vitamin K should be given by mouth**. It should not be given by injection into the muscle, as this could cause bleeding. **This should be clearly stated in your birth plan.**

Your baby will need 3 doses of oral vitamin K; at birth, when they are 5 days old and at 4 weeks old.

All future childhood vaccinations for children with haemophilia should be given under the skin (subcutaneously) and not into the muscle. This will be discussed with you by the Children's Haemophilia team at your baby's follow-up appointment.

Blood tests for your baby

All babies have a heel-prick test (the Guthrie test) around 5 days after birth, which is routine screening used to check for certain conditions. If your baby is known to be (or possibly may be) affected with haemophilia, then pressure should be applied where the heel has been pricked straight after the test has been done. Gentle pressure for a full 5 minutes should be all that is needed to stop any bleeding. This also applies to any other blood tests your baby may have.

How to contact us

If you have questions about how haemophilia may affect your baby, or about any of the information in this leaflet, please contact either the Children's or Adult Haemophilia teams.

Adult Haemophilia and Thrombosis Centre

Tel: **01865 225 316**

(9.00am to 5.00pm, Monday to Friday)

Children's Haemophilia and Thrombosis Centre

Tel: **01865 226 562**

(9.00am to 5.00pm, Monday to Friday)

For emergency advice or treatment outside office hours, at weekends and on Bank holidays, please telephone the Oxford University Hospitals switchboard.

Tel: **0300 304 7777**

Ask to speak to the 'on-call Specialist Registrar for Haematology'.

If you need an interpreter or would like this information leaflet in another format, such as Easy Read, large print, Braille, audio, electronically or another language, please speak to the department where you are being seen. You will find their contact details on your appointment letter.

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