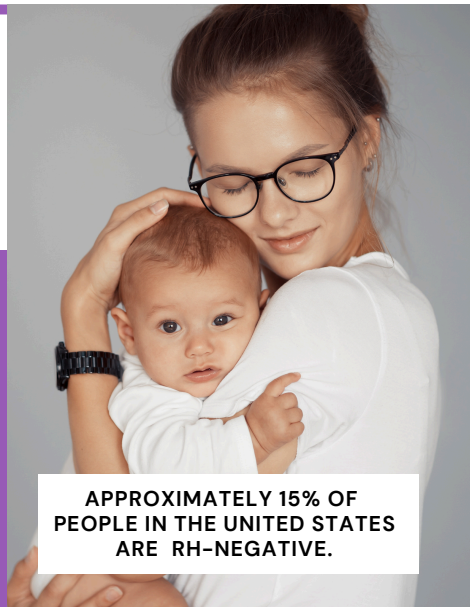
ALLO HOPE FOUNDATION

RH NEGATIVE PREGNANCY

WHY YOUR BLOOD TYPE MATTERS IN PREGNANCY

Understanding Rh factor, Rh immunoglobulin (RhIG), and how modern medicine helps protect babies from Rh disease (HDFN).



APPROXIMATELY 15% OF PEOPLE IN THE UNITED STATES ARE RH-NEGATIVE.

WHAT IS RH FACTOR?

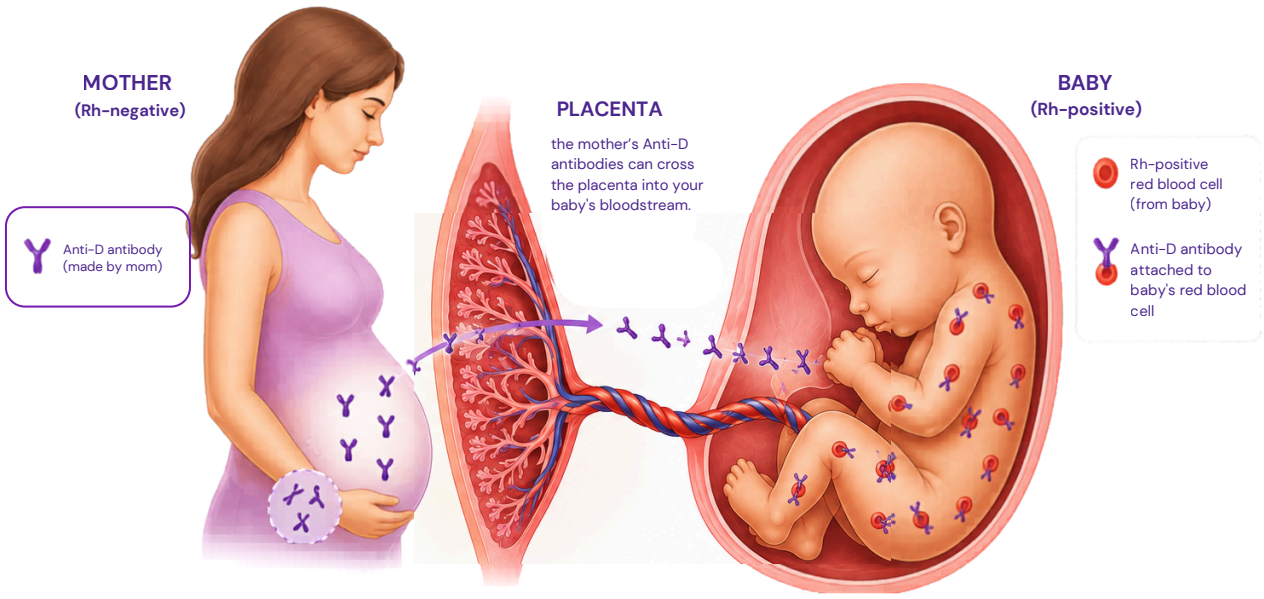
Rh factor is a protein found on the surface of red blood cells. If you have the protein, you are Rh-positive. If you do not have the protein, you are Rh-negative. The "+" or "–" after your blood type tells you whether you are Rh-positive or Rh-negative. For example: A+, O-, AB-.

WHY DOES RH FACTOR MATTER IN PREGNANCY?

If you are Rh-negative and your baby is Rh-positive, your immune system may recognize your baby's blood cells as different and create antibodies against them. **These antibodies are called anti-D antibodies.**

WHAT HAPPENS IF ANTIBODIES FORM?

Once antibodies form, you have them for the rest of your life. During pregnancy your antibodies can go through the placenta and attack the baby's red blood cells. This is called hemolytic disease of the fetus and newborn (HDFN).



Rh immunoglobulin (Rhlg) is given to Rh-negative mothers to **prevent** the formation of Anti-D antibodies and protect their baby from harm.

WHAT IS RH IMMUNOGLOBULIN (RHIG)?

RhIG is a medication used to help prevent the formation of Anti-D antibodies in Rh-negative mothers who are pregnant with Rh-positive babies. It has been used for decades to help reduce the risk of HDFN. Before RhIG, many mothers lost children to "Rh Disease", which is now rare due to the invention of RhIG.

WHEN IS RHIG GIVEN?

DURING PREGNANCY

Around 28 weeks

POSTPARTUM

Within 72 hours after delivery

ADDITIONAL SENSITIZING EVENTS

Consider RhIG after:

- VAGINAL BLEEDING
- ABDOMINAL TRAUMA
- INVASIVE PROCEDURES
- ECTOPIC PREGNANCY
- PREGNANCY LOSS
- EXTERNAL CEPHALIC VERSION

HDFN can cause

- fetal anemia
- fluid buildup (hydrops)
- intrauterine fetal blood transfusions
- early delivery
- severe jaundice
- NICU management
- multiple newborn blood transfusions
- stillbirth or neonatal death

CAN MY BABY'S RH TYPE BE TESTED?

Yes, a blood test called Cell-Free Fetal DNA Testing (also called non-invasive prenatal testing, or NIPT) can determine your baby's Rh type during pregnancy.

If your baby is Rh negative like you, RhIG is not needed during this pregnancy. Your doctor may offer this testing, or you can ask if it is available to you.

BABIES AFFECTED BY HDFN MAY REQUIRE...

Without RhIG, your likelihood of developing anti-D antibodies changes from 0.1% to 16%. These antibodies can cause HDFN in future pregnancies, and rarely, in the current pregnancy.

- Frequent pregnancy blood draws and ultrasound monitoring
- Treatment for fetal anemia in utero with specialized intrauterine blood transfusions by a fetal surgeon
- NICU admission
- Blood transfusions and phototherapy
- Intravenous immune globulin
- Prolonged laboratory monitoring for baby after discharge

REMEMBER, RHIG IS:

- Given around 28 weeks gestation, within 72 hours of birth and after any pregnancy bleeding event
- A medication, not a vaccine
- Made from screened and highly purified human plasma donations, not whole blood
- Undetectable in your body within 6 months
- Used to prevent anti-D antibody formation before it starts (once anti-D antibodies are formed, they are permanent)

WHAT IF I AM UNSURE ABOUT RHIG?

Making informed decisions during pregnancy matters. You can ask your provider about benefits and risks, how Rh disease and HDFN happens, and what it means for future pregnancies. Use the QR code below to access more information provided by a nonprofit who supports families through HDFN.

SCAN FOR:

- ✓ RESOURCES
- ✓ REFERENCES
- ✓ SUPPORT

ALLO HOPE FOUNDATION

www.allohopefoundation.org/rh-immune-globulin/