

## Rhesus Haemolytic Disease is entirely preventable – BUT many babies *still* die (or suffer disabilities) because of it!



## DO NOT LET THIS HAPPEN!

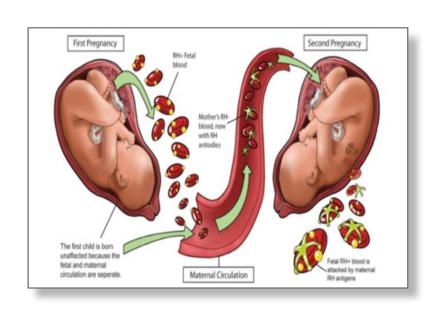
**FACT:** Rhesus Haemolytic Disease is a condition caused by the incompatibility between the blood of the mother and that of her fetus. If the mother is Rh-negative and the fetus is Rh-positive, when the baby is born some of the fetus' Rh-positive red blood cells may enter the mother's blood stream.

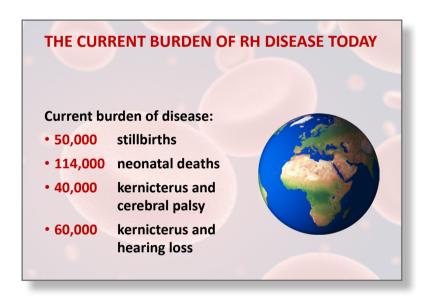
When this happens they sensitise the Rh(D)-negative mother and in subsequent Rh(D)-positive pregnancies, this may evoke a secondary immunological response with a rapid and important production of antibodies against the D antigen.

Rh incompatibility usually does not cause problems during the first pregnancy, since the baby is born before antibodies develop. The condition is, therefore, more likely to cause problems in the second and subsequent pregnancies.

**RISK:** When it occurs there is a substantial risk to the fetus of still birth or disabilities, including kerniterus (which causes deafness or cerebral palsy), fetal hydrops, fetal anemia and jaundice.

50 years ago the solution was found —and yet today it is still common because approximately *half* of all at-risk women around the world still do not receive basic protective therapy often because the required infusion is not available or simply because the need to provide this essential protection has been forgotten!





PREVENTION: Prevention of this condition can be reliably provided by providing an intramuscular injection of anti-D immunoglobulin immediately after delivery – and also as a prophylactic during 28 – 32 week period of pregnancy. This prophylactic action should also be provided after abortion, ectopic pregnancy, amniocentesis, external version, abdominal trauma or substantial bleeding.



For further more detailed practical guidance and information visit: www.glowm.com/RH-Disease

