

RH Factor Treatment in Pregnancy

What is Rh factor?

Rh factor is an inherited protein (passed down from parent to child) that can be attached to your red blood cells. If your blood cells have this protein (like most people), you are **Rh-positive.** If they do not, you are **Rh-negative.** Your healthcare provider will do a blood test to find out if you are Rh-positive or Rh-negative.

Being Rh-negative is not an illness and usually does not affect your health. It can, however, affect your pregnancy.

How does being Rh-negative affect my pregnancy?

If you are Rh-negative and your baby's father is Rh-positive (or the father's type is unknown), you have an **Rh factor mismatch**. If your baby is Rh-positive like the father, your immune system may treat the baby's blood cells as harmful invaders and make **antibodies** [AN-ti-bod-ees] against the baby's cells. If these antibodies pass back to your baby through the placenta, they begin to destroy the baby's blood cells.

The antibodies can also have these effects:

- In your baby, this can cause a condition called Rh-induced hemolytic [hee-muh-LIT-ik] disease. The effects of this disease can range from mild anemia [uh-NEE-mee-uh] and jaundice [JAWN-dis] to intellectual disability or even death.
- In you, the antibodies will usually remain present for the rest of your life. They could affect any baby you conceive in the future. They could also cause serious problems for you if you ever need an emergency blood transfusion.

What do I need to do next?

- 1 Make a decision with your doctor about whether you should have a Rho(D) immune globulin injection.
- 2 If you have a Rho(D) immune globulin injection, have the baby's blood tested after your baby is born. If your baby has Rh-positive blood, you will need a second injection.
- **3** Discuss any questions and concerns with your doctor.

How is an Rh factor mismatch treated?

If you and your baby's father have an Rh factor mismatch, your healthcare provider may recommend an injection (shot) of a medicine called **Rho(D) immune globulin** [GLOB-yuh-lin].

Having an injection at the right time during or after pregnancy can lower your baby's risk of having a hemolytic disease. It is best to have a Rho(D) immune globulin injection during pregnancy before your body has begun to make antibodies against your baby's blood cells. It is usually given about 26 to 28 weeks into the pregnancy.

An injection of this medicine:

- Stops your body from making antibodies against your baby's blood cells.
- Protects your baby against Rh-induced hemolytic disease.
- Helps protect you during any future pregnancy from making antibodies against your baby's blood cells.

Talking with your healthcare provider about Rh factor treatment in pregnancy

The table below lists some possible benefits and risks of, and alternatives for, Rh factor treatment during pregnancy. Discuss these with your healthcare provider, and ask any questions you have.

Possible benefits Risks and possible complications **Alternatives** A Rho(D) immune When a woman receives a Rho(D) immune A Rho(D) immune globulin globulin injection can globulin injection, there are no known injection may not be prevent Rh-induced risks for her baby. Risks and possible recommended if you have complications for the woman include: certain allergies or conditions. hemolytic disease in your baby and can You can choose not to have • Pain or tenderness at the injection site. protect against these the injection, but that choice • Side effects from the medicine, such possible disease effects: isn't recommended due to the as muscle aches or pains; a headache; possible risks to your baby and Anemia feeling tired or light-headed; and nausea any future pregnancies. Jaundice or vomiting. • Understand that you cannot · Heart failure • Allergic reaction to the medicine. postpone your decision very Neurological problems • Infection with a virus or bacteria. (The long. For the medicine to work, such as an intellectual medicine is made from human blood, so it must be given at the right disability, hearing loss, even though it is screened and treated for time. safety, there is still a very small risk of a speech and movement • If you are pregnant and choose disorders, and seizures bloodborne infection.) not to receive a Rho(D) immune • Stillbirth or globulin injection, your baby will infant death need to be closely monitored for any health problems.

My follow-up appointment
Date/Time:
Place:
Doctor:

Notes			

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