

Pregnancy and childbirth

Stephen Matthews

Pregnancy, childbirth and newborns

Chair ~ *Dr Jane Mason*

Nursing perspective – pregnancy and delivery management ~ *Robyn Shoemark*

Delivery and birth ~ *Dr Iniyaval Thevathasan*

Best practice management of Previously Untreated Patients ~ *Dr Simon Brown*

Personal Story ~ *Rebecca*

PREGNANCY AND DELIVERY MANAGEMENT

In her presentation on the nursing management of pregnancy and delivery, Robyn Shoemark highlighted the importance in keeping in touch with your Haemophilia Treatment Centre (HTC). Through discussions with the HTC, family planning can hopefully be streamlined to maximise the best outcomes with the pregnancy.

Optimally discussions should start prior to becoming pregnant as this will give the opportunity to establish baseline factor levels and refer to genetic counselling. This will also give your partner information on the bleeding disorder, how it is passed on, the chance of a child being affected and what to expect regarding treatment. Genetic counselling can also provide information on options such as natural conception and pre-implantation genetic diagnosis.

Once the pregnancy is confirmed, discussions can be had around:

- monitoring the mother's factor levels during pregnancy
- testing of the baby (whether to test for the condition or not)
- ultrasound to determine the sex of the baby to help with the birthing plan
- where to have the baby, referrals to obstetrics, type of hospital
- birthing plan for the mother (depending on levels) and baby (depending on what information is known).

The earlier plans can start to be formulated and put in place the better the process should be.

You are pregnant

- Congratulations
- Notify your haematologist and HTC
- Pre pregnancy factor levels
- Do you want the pregnancy tested
- Birthing plan
 - When
 - Where
 - Precautions



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