

# Protecting you and your baby

Blood tests at your first  
antenatal visit



**This leaflet tells you about the blood tests that are normally offered and recommended at your first antenatal visit. These tests look for possible health problems that could affect your health and the health of your baby. Having the tests will help you make decisions about care, both before and after birth, to protect the health of you and your baby.**

Only one sampling of blood is needed to do all six tests. Before a blood sample is taken, you will be asked if you consent to the tests. You can decline consent to any of them. If a test is declined, it is standard practice to offer it again later in your pregnancy.

If you have any questions about these tests, please discuss them with one of the doctors or midwives at the antenatal clinic.



## **What are the blood tests offered?**

### **Full blood count/haemoglobin level**

The main purpose of this blood test is to check that you are not anaemic (have a low blood count). Anaemia makes you tired and less able to cope with potentially losing blood when your baby is delivered. If you do have anaemia, this may be treated easily and safely with iron tablets or other treatments.

### **Blood group**

This test tells you which blood group you are. This is important if you need a blood transfusion. It also shows whether your blood is rhesus negative or positive.

- Around one in six mothers are rhesus negative. Rhesus negative mothers will need an injection called anti-D if they have a threatened miscarriage or an injury to their tummy during pregnancy.

- Rhesus negative mothers will be offered anti-D at around 29 weeks of pregnancy.
- Rhesus negative mothers will also need anti-D after the birth if the baby is rhesus positive. This protects their next baby from anaemia and jaundice.



## Rubella

This test checks if you are immune to the rubella virus (German measles). Most adults in Northern Ireland are immune, but if you are not, you should try to avoid contact with anyone who has rubella. If you do come into contact with someone who has the virus, you should discuss this with your doctor urgently. Blood tests will show whether or not you have been infected.

- Getting rubella in early pregnancy can seriously damage your unborn baby.
- If you become infected with rubella during early pregnancy, your doctor will discuss this with you.
- If you are not immune to rubella, you will be offered two doses of MMR (measles, mumps and rubella vaccine) at least four weeks apart after your baby is born, unless you can provide proof from your GP that you have had two doses of MMR. It will protect you from infection in future pregnancies. It is important that you do not get pregnant for a month after receiving the vaccine.

## Syphilis

This test detects if you have been infected with syphilis, which is mainly caught by having unprotected sex with someone who has the infection.

- It is possible to have syphilis without knowing it as most people are ill for a very short time.

- Syphilis will eventually lead to serious health problems such as brain damage.
- Left untreated, syphilis can increase the risk of miscarriage, stillbirth and premature birth. It also increases the risk of serious, life-long illness in the baby (congenital syphilis).
- If this test is positive, safe and effective treatment with antibiotics is available. This will not harm the baby.

## Hepatitis B

This test detects hepatitis B, a virus that can cause liver disease.

- If you are a carrier of the virus or are infected during pregnancy, your baby is at risk of infection.
- If your baby becomes infected with hepatitis B, they have a high chance of developing long-term infection and liver disease.
- All babies are vaccinated against hepatitis B, but if your test is positive, your baby can have a special vaccination course to reduce the risk of infection.
- You will also be given an appointment with a liver specialist during pregnancy to check your health, as this can impact on the health of your baby.



Hepatitis B is not common in Northern Ireland, but it is much more common outside Europe, particularly in southeast Asia and the Far East. People who have lived in these areas are more likely to carry the disease, which they may have contracted at any stage, including at birth. It can also be transmitted sexually and through injecting drug use.

## HIV

This test detects the virus that causes AIDS.

- Many women do not know they are infected until they have a test.
- If you are infected with HIV, you can pass the infection to your baby during pregnancy, childbirth or through breastfeeding.
- If you are HIV positive, both you and your baby can have treatment and care, including special drugs, to greatly reduce the risk of your baby becoming infected.
- This treatment helps protect your own health, as well as the health of your baby.

## Could I be at risk of having any of these infections?

Many people have been at risk of acquiring infections such as HIV, syphilis or hepatitis B without ever knowing it. The risk of having one or more of these infections is increased if you or any sexual partner in your lifetime has:

- had unprotected sex;
- had a number of sexual partners;
- had homosexual sex;
- been a victim of rape;
- been an injecting drug user;
- had sex with someone from a country in which HIV or hepatitis B is much more common than in the United Kingdom or Ireland;



- had medical treatment involving blood products in a country with high rates of HIV or hepatitis B infection;
- had dental treatment abroad.

If you are concerned about a particular risk, please discuss this with your doctor or midwife. They can advise you about any other tests that may be required.

The fact that you accept tests for hepatitis B and HIV as part of your antenatal care does not affect your ability to obtain insurance. A positive test for either of these may affect future health or life insurance.

### **What about confidentiality?**

These tests and their results are all confidential. The professionals providing your maternity care will normally give you these results at your next antenatal visit. If not, feel free to ask. The results are recorded in your hand held maternity notes and your maternity IT record, which has limited access and is password protected.

If any of your tests are positive, you will be offered further advice and counselling along with appropriate follow-up and treatment. Any treatment you are offered will be designed to safeguard your health and the health of your baby.

## **What happens to my blood sample once it has been tested?**

*The NHS Infectious Diseases in Pregnancy Screening Programme Laboratory Handbook 2016 to 2017* states that all blood samples must be stored at  $-20^{\circ}\text{C}$  for a minimum of two years for quality assurance purposes. After this, samples are safely disposed of.

## **Can my stored sample be used for anything else?**

During pregnancy, a woman can come into contact with other infections, some of which can cause problems for her or her baby. In those instances, the antenatal screening blood sample can be retrieved from storage and checked to find out if the woman is at risk of that infection. If she is, action can be taken to reduce the possibility of any serious effects from the infection. Chicken pox and parvovirus (slapped cheek syndrome) are two such infections. The woman's consent must be given before further testing can happen.



If you need this leaflet in another language, visit:  
[www.pha.site/antenatal-blood-tests](http://www.pha.site/antenatal-blood-tests)



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