Pregnancy in Thalassemia

Through better management of iron overload, more and more women with thalassemia are able to become pregnant and give birth to healthy babies. If you are pregnant and have thalassemia, your pregnancy should be managed by a multidisciplinary healthcare team. Women with heart disease or significant cardiac iron are at increased risk during pregnancy because of added stress on the heart and circulatory system.



Maintaining an appropriate transfusion schedule and iron management before pregnancy is important. Blood transfusion requirements typically increase and iron chelation therapy is usually discontinued during pregnancy. Work closely with your hematologist to determine the best chelation plan for you if you are pregnant or planning on becoming pregnant.

The healthier you are before you become pregnant, the better things will be for both you and your baby!



www.thalassemia.org

See the 2012 Standards of Care Guidelines for Thalassemia published by Children's Hospital and Research Center Oakland, Section 18.1, for further recommendations on Pregnancy in Thalassemia.