

Patient information

Low Platelets in Pregnancy

Haematology Liverpool

What are platelets?

Platelets are the small particles in the blood that are important in forming clots and therefore stopping bleeding. The normal range for platelet count is 150-400 x 10⁹/L. When platelet numbers are reduced, this is called thrombocytopenia.

What are the symptoms of low platelet levels (thrombocytopenia) in pregnancy?

Many women have no symptoms but are found to have a low platelet count on routine blood tests in pregnancy. Some women may have problems with bruising or small red or purple marks on the skin (purpura or petechiae). Occasionally some women may experience bleeding such as nose bleeds.

Why do we need to monitor your platelet count?

Platelets are important for your blood to be able to clot. A low platelet count can sometimes cause bleeding problems which can be prevented with the right management. Usually bleeding problems do not occur unless platelets fall below 30-50. It is important to monitor platelets regularly in order to reduce any risks.

What causes low platelets in pregnancy?

This can happen due to:

- Increased platelet destruction in the blood stream. This is the most common cause in pregnancy.
- Decreased platelet production in bone marrow.

6% of women have a low platelet count in pregnancy. **This is sometimes known as “gestational thrombocytopenia” and is not usually a cause for concern as platelets do not usually fall below 80 x 10⁹/L.**

However, some women develop a condition called “Immune thrombocytopenia purpura (ITP)”. This is when antibodies produced by your own immune system attack the body’s own tissue instead of fighting infections. This ‘autoimmunity’ means antibodies can sometimes target the body’s own tissue such as the platelets, resulting in a low platelet count. This condition may need steroid therapy and / or other treatment to maintain a satisfactory platelet count. If this becomes necessary, your doctor will discuss the treatment options in detail with you.

Can I have an epidural for pain relief during labour?

Epidural is a method of pain relief which introduces a needle and anaesthetic into the lining of the spine. This may not be possible if the platelet count is less than $80 \times 10^9/L$. There are many other options of pain relief available which can be discussed with your doctor.

Usually during your pregnancy if your platelets are approaching less than $80 \times 10^9/L$ your obstetric team will arrange an appointment with an anaesthetist. She/he will then be able to explain in detail other options available should you require very strong pain relief.

How are low platelets treated in pregnancy?

Most women with low platelets in pregnancy will not require treatment. However you may need to attend for a blood test every month to ensure that your platelet count does not fall too low. All treatments for low platelets can have side effects and your doctor will not recommend a treatment unless you have bleeding symptoms or your platelet count is very low.

If you have concerns about any side effects of the treatments you are offered, your doctor will be happy to discuss them further with you.

Prednisolone

The drug most commonly used to treat low platelets is prednisolone, which is a type of steroid. This comes as a tablet. Steroids work by stopping your immune system from making the antibodies that reduce your platelet count.

Steroids are a good treatment for low platelets and short courses are usually taken without any problems. However, steroids can have side effects, especially if you have repeated courses or take them for a long time.

However steroids have been used for decades in pregnancy and are considered safe; they do not cause the baby any harm. However if you are on long term steroids we will arrange some extra growth scans for your baby.

Once you start taking steroids, it is very important that you do not stop them suddenly, as this may cause side effects. If you are worried about possible side effects, discuss your treatment with your doctor before making any changes to your medication.

Intravenous immunoglobulin

The other treatment offered to pregnant women with very low platelets is intravenous immunoglobulin (IVIG). This is a medicine containing antibodies which is given into a vein, usually in your arm, through a drip (intravenously). Antibodies are produced by white blood cells, to fight infections. It is a human blood product, which means that the antibodies have been collected from numerous blood donors.

This means that **if you receive IVIG you will never be able to donate blood** in the UK, even when your low platelets have recovered.

It is not known exactly how IVIG works to treat low platelets, but it is thought that the extra antibodies stop your own white blood cells from destroying your platelets.

IVIG is given as an infusion (liquid mixture) through a drip over a few hours.

Handy Tips

- These infusions can often take several hours. Make sure you are prepared with snacks and drinks.
- There is often limited space within the area you will receive these infusions. Childcare will need to be organized prior to your visit.
- It is common for these infusions to cause headaches. We would recommend taking 1g of oral paracetamol prior to receiving your infusion.

What are the advantages of IVIG?

IVIG works quite quickly, usually within a few days. Unfortunately, the effect doesn't last long (a few weeks at most) so it will not cure your low platelets. In pregnancy it is generally given as you approach your delivery date, so that your platelet count is high enough for you to have a normal vaginal delivery or caesarean section, if needed.

What are the risks of IVIG?

There is a small risk of a reaction (such as fast heart rate or breathlessness) while the IVIG is being given. You will be therefore closely monitored by the nurse administering your infusion. There is also a small risk of developing a rare complication called aseptic meningitis. This causes a headache, neck stiffness and dislike of bright lights. This usually gets better on its own, but if you develop any of these symptoms after your treatment with IVIG you must seek medical attention immediately.

IVIG can rarely cause kidney damage and there is also an extremely small risk (far less than one in many millions) of infections such as hepatitis and HIV (as it is made from donated blood).

Antibodies and your baby

If you have immune thrombocytopenic purpura (ITP), some antibodies can cross the placenta from mother to the baby and attach to the baby's platelets. This can result in low platelets in the baby. This is unusual and rarely causes any bleeding problems in the baby. However steps may be taken to reduce trauma to the baby at birth e.g. avoidance of a forceps or suction delivery (ventouse). A blood count from the umbilical cord can be taken at delivery to check the platelet count. Occasionally babies may need a platelet transfusion or IVIG if the count is very low.

Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

Further information

For further information please contact

Haematology Liverpool

Hospital Tel: 0151 706 3397

Text phone number: 18001 0151 706 3397

Email: Francesca.murphy@liverpoolft.nhs.uk

Author: Haematology Liverpool

Review date: May 2027

All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

يمكن توفير جميع المعلومات المتعلقة بالمرضى الموافق عليهم من قبل انتمان المستشفى عند الطلب بصيغ أخرى، بما في ذلك لغات أخرى وبطرق تسهل قراءتها وبالحروف الطباعية الكبيرة وبالصوت وبطريقة برايل للمكفوفين وبطريقة مون والكترونياً.

所有經信托基金批准的患者資訊均可以其它格式提供，包括其它語言、易讀閱讀軟件、大字体、音頻、盲文、穆恩體 (Moon) 盲文和電子格式，敬請索取。

در صورت تمایل میتوانید کلیه اطلاعات تصویب شده توسط اتحادیه در رابطه با بیماران را به اشکال مختلف در دسترس داشته باشید، از جمله به زبانهای دیگر، به زبان ساده، چاپ درشت، صوت، خط مخصوص کوران، مون و بصورت روی خطی موجود است.

زانباریی پیوهنیدار بهو نهخوشانهی له لایهن تراستهوه پهسهند کراون، نهگهر داوا بکریت له فورماتهکانی تردا بریتی له زمانهکانی تر، نیزی رید (هاسان خویندنهوه)، چاپی گهوره، شریتی دهنگ، هیلی موون و نهلیکترونیکی همیه.

所有经信托基金批准的患者信息均可以其它格式提供，包括其它语言、易读阅读软件、大字体、音頻、盲文、穆恩体 (Moon) 盲文和电子格式，敬请索取。

Dhammaan warbixinta bukaanleyda ee Ururka ee la oggol yahay waxaa marka la codsado lagu heli karaa nuskhado kale, sida luqado kale, akhris fudud, far waaweyn, dhegeysi, farta braille ee dadka indhaha la', Moon iyo nidaam eletaroonig ah.