



Rhophylac[®]

Human anti-D immunoglobulin

Solution for injection in pre-filled syringe 1500 IU

Information about Rhesus prophylaxis

Why you are being treated with Rhophylac[®]

(Human anti-D immunoglobulin)

Background

There are important differences in our blood systems which mean that our blood group must be established on certain occasions. One of these occasions is pregnancy.

Blood grouping

Our blood is divided into different groups according to the ABO system.

Blood group A is the most common. Apart from belonging to one of these blood groups, we can also be Rh-positive (D-positive) or Rh-negative (D-negative).

What is the Rhesus factor (Rh-factor)?

People who are Rh-positive have a factor known as D-antigen on the surface of their red blood cells.

Rh-negative people lack this factor. Approx. 85% of the Swedish population is Rh-positive and approx. 15% is Rh-negative. Blood groups and rhesus factors are inherited from a parent.

How does this affect you?

If you are Rh-negative and pregnant, and the father is Rh-positive, it is highly likely that the child you are carrying is also Rh-positive.

During pregnancy, primarily at birth or shortly before birth, some of the baby's red blood cells can get into your blood. This can also happen during a miscarriage or abortion. As you do not have the D-antigen on your blood cells your immune system may then form so-called antibodies against the baby's D-antigen.

These antibodies can cause problems during the next pregnancy, as they may cross into the baby's blood and attack the blood cells, which in severe cases can cause jaundice, brain damage or even the death of the child.

The anti-D immunoglobulin given in Rhophylac[®] takes care of the D-antigen in the blood that can have passed from the baby to you.

What will happen during subsequent pregnancies?

Treatment with Rhophylac[®] prevents you from producing antibodies against the D-antigen.

The protective effect of anti-D immunoglobulin only lasts a few months, which means the treatment must be repeated during and after each pregnancy with an Rh-positive baby.

Who is given Rhophylac[®]?

[1] Pregnant women and mothers who are Rh-negative and not Rh-immunised, directly after childbirth, if the new-born baby is Rh-positive or if the baby's Rh-group is unknown.

[2] In connection with abortion or impending miscarriage and amniocentesis.

How is Rhophylac[®] given?

Rhophylac[®] is given as an injection as soon as possible and no later than 72 hours after the birth or abortion.

Remember!

During your pregnancy you must stay in contact with your doctor and antenatal clinic, where, amongst other things, your blood will be checked and your Rh group established. This information will be entered into your journal which you leave at the maternity ward.

It is very important, if you become pregnant again, that you inform your doctor or antenatal clinic that you have previously been given anti-D immunoglobulin.

If you have further questions, please ask your doctor or your antenatal clinic.

Make a note below of when you received an injection of Rhophylac[®] and show this at your medical examinations during the first six months after treatment, as well as at examinations in connection with a new pregnancy.

Name.....

Social Security no.....

Treatment with Rhophylac[®] (Human anti-D immunoglobulin)

Date.....

Hospital.....

Doctor.....

Date.....

Hospital.....

Doctor.....

This information leaflet can be ordered from CSL Behring AB.

CSL Behring AB

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For further information (in Swedish), see www.fass.se