

## Further Information

### Lupus UK

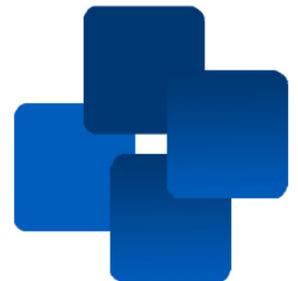
<https://www.lupusuk.org.uk/lupus-and-pregnancy/>

### Versus Arthritis

<https://www.versusarthritis.org/about-arthritis/conditions/lupus-sle/>

## Patient Information

# Positive Anti-Ro and Pregnancy



**Anti-Ro antibodies can be found in patients with a variety of autoimmune conditions including Lupus, Sjögren's syndrome and rheumatoid arthritis. It can also be found in a small number of asymptomatic women who don't have an associated medical disorder.**

Antibodies are proteins made by the immune system to counteract foreign substances, such as bacteria and viruses, and usually play an important part in the body's defence against infection. During pregnancy, antibodies from the mother are transported across the placenta to the developing fetus as the fetus is unable to produce its own. The movement of these antibodies begins from 12-14 weeks of pregnancy.

If anti-Ro antibodies are detected in pregnancy, there is a very small chance (1 in 50) they could affect your baby and cause a rare condition known as **neonatal lupus syndrome**.

In neonatal lupus syndrome, anti-Ro antibodies can mistakenly damage healthy organs in the baby. These organs include:

- **Skin - Cutaneous neonatal lupus** (1 in 50 of cases affected). This rash, which can be worsened by sunlight, typically disappears within 3–6 months without scarring.
- **Heart - Congenital heart block** (1 in 100 cases), causing a permanent slowing of the baby's heartbeat which may continue after birth and can lead to blackouts, shortness of breath, irregular heartbeat and occasionally more serious outcomes. Although permanent, the long-term outcome for infants with congenital heart block is good and, if necessary, can be managed with a pacemaker device.
- **The baby's liver** (1 in 10 cases), causing non-infective liver inflammation.
- **The baby's blood** (1 in 10 cases), causing a low platelet count.

It is important to know that these problems do not mean that your baby will develop Lupus in adulthood.

If you have had one baby with neonatal lupus syndrome then your chances of future pregnancies being affected are increased by 1 in 4. Therefore, it is important to discuss future pregnancy plans with your rheumatologist and obstetrician.

Other potential risks to pregnancy with anti-Ro antibodies include miscarriage, reduction in fetal growth and premature labour. If you carry the anti-Ro antibody, your rheumatology and obstetric consultants will closely monitor your pregnancy. You must inform your midwife who will arrange referral to an obstetric consultant with a special interest in fetal medicine. This could mean more frequent antenatal visits and tests, such as fetal heart monitoring (where the baby's heart rate is monitored using external, non-invasive equipment), which will allow treatment to be considered if any abnormalities are detected.

**Although there is a risk of potential complications during your pregnancy, with careful planning most women who are positive for anti-Ro antibodies will have a successful and uneventful pregnancy.**