

Low lying placenta

What is a low-lying placenta?

When you are pregnant you have a new organ that develops and is inside your uterus (womb) called a placenta. This is attached to your baby's navel (belly button) via the umbilical cord and gives your baby its blood and oxygen. When your baby is born the placenta also comes out and then it is often called the afterbirth.

When your placenta is inside you, in most cases it will not be near your birth canal. But for one woman in every 200 it is placed low down in the uterus (womb) and in some cases may be blocking the entrance to the birth canal. We usually find this out at your 20-week scan.

The technical term for a low-lying placenta is *placenta praevia*.

What do we do about it?

First, we usually wait to see if the placenta will move out of the way by itself as your pregnancy progresses and the uterus grows. We will check its position at your 34-week scan.

If the scan shows that the placenta has moved no further action is needed.

However, in about 1 case out of 10, the placenta is still low down and does not move. This means you will need to have an operation known as a caesarean section to deliver your baby.

How will this affect you and your baby?

Some women with a low-lying placenta get sudden painless bleeding from their vagina. If you have any vaginal bleeding, any contractions or pain, please call Labour Ward Triage at Stoke Mandeville Hospital and you will be asked to attend immediately (01296 316103 – 24 hours).

You may be advised to stay in hospital if you have any bleeding in the second half of your pregnancy. This may be necessary until the birth of your baby. We suggest you think about what you would do if this happens—for example; make necessary arrangements if you have other children who need to be cared for.

If you do not get any bleeding or other symptoms from your low-lying placenta additional care will be assessed based on your individual circumstances but be aware this could include a recommendation for hospital care and will depend on the type of placenta praevia you have.

Serious complications are rare, however, there is a small risk of sudden onset of heavy bleeding which can cause serious complications including endangering the life of you and/or your baby. You must come into hospital straight away if you have any bleeding so that we can begin immediate treatment. If there is a lot of bleeding you may be offered a blood transfusion or a discussion with you about the possibility of delivering your baby early, in which case steroid injections may be recommended to you to reduce the risk of complications in the baby of being born early (for example breathing problems).

Please remember that any bleeding you get is **not** from your baby.

Your care

If you have a placenta praevia we will talk to you about how to manage the rest of your pregnancy and about giving birth. You will see your Obstetrician who will discuss your individual circumstances, outline a plan of care and explain any options which may be available for you.

Typically, a planned caesarean section is recommended from 37 weeks.

How can you help yourself?

You cannot do anything to help the placenta move to a better position. But you can do a lot to stay healthy in pregnancy.

Because of the risk of bleeding, it is good to eat foods high in iron to try and avoid anaemia. You may also be offered iron supplements and we recommend you eat foods like:

- Dried fruits (apricots, prunes, raisins)
- Beans
- Egg (yolk)
- Red meat (but not liver)
- Dark leafy greens (spinach, kale)

Useful Contact Numbers

Stoke Mandeville Hospital	01296 315000
Labour Ward Triage	01296 316103 – 24 hours

Please remember that this leaflet is intended as general information only. We aim to make the information as up to date and accurate as possible, but please note that it is subject to change. Please therefore always check specific advice on any concerns you may have with your doctor.

How can you help reduce healthcare associated infections?

Infection prevention and control is important to the well-being of our patients and for that reason we have infection prevention and control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. Please follow our infection prevention and control guidelines when visiting our healthcare sites. Further information is available on our website.

Patient Advice Sheet

If you would like a copy of this information on audiotape, in large print or translated, please call the Patient Advice Liaison Service on 01296 831120 or email bht.pals@nhs.net

Division of Women, Children & Sexual Health Services

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