

Total:

- **part** of the placenta covering the internal opening of the cervix

Partial:

- **extending** to the internal opening of the cervix but not covering it

Marginal:

- **close to** the cervix (opening of the womb) but not closer than 2cm

With a ***total and partial placenta praevia an elective caesarean section*** will be necessary.

What pregnancy care can I expect if I have a marginal or low-lying placenta?

This depends on how low your placenta is and on how much bleeding you have had. Once the diagnosis has been made, you will be reviewed by an obstetrician (specialist doctor). A plan will be made with you, the obstetrician and your midwife.

When you have a bleed it is usual to spend some time in hospital while we check that the bleeding has stopped and that your baby is coping. Sometimes it is safest for you to remain in hospital for the rest of your pregnancy.

This may depend on the type of placenta praevia you have, on how far away you live from the hospital and what transport you have available at all times.

What will happen at birth?

You may need to have your baby early if we are concerned about either you or baby.

Usually your baby will need to be delivered by caesarean section (through a cut in your abdomen) and this is sometimes planned earlier than your expected date as these last few weeks have a higher risk for a large bleed. This is because the cervix starts to stretch and sometimes starts to open as your body gets ready for labour.

With a caesarean section there is sometimes a lot of bleeding and you may need blood transfusion. The bleeding may be severe and you may require a hysterectomy (removal of the womb) to stop the bleeding.

You can talk to your Lead Maternity Carer/ midwife about any of this further and also ask the obstetrician any questions you may have.



Placenta Praevia

Information for Pregnant Women and Whanau

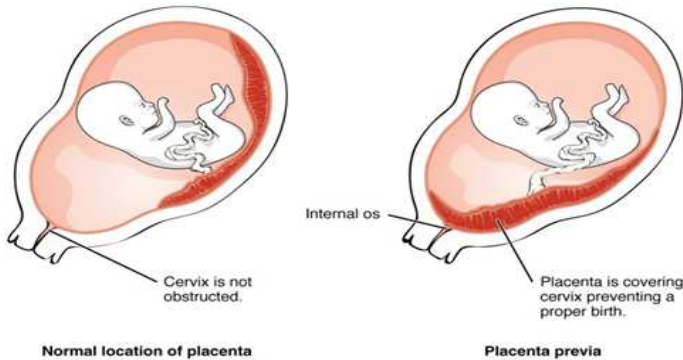
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What is placenta praevia?

Normally the placenta (afterbirth or whenua) grows in the upper part of your uterus (womb), well away from the opening (cervix).

Placenta praevia is when the placenta grows in the lower part of the uterus.



The placenta cannot stretch and the lower part of the uterus grows to many times its normal size during pregnancy with most of the growth in the last 8-10 weeks of pregnancy. This means that the placenta can separate from the uterus wall and you might have some bleeding.

The first sign of having placenta praevia could be bleeding, or it may be seen on ultrasound scan.

The bleeding is usually bright red and the first time is often a small amount as growth of the uterus happens slowly. The bleed does not usually come with pain but some women will

have some feelings like contractions after a bleed or period like discomfort.

The amount of vaginal bleeding can vary; sometimes heavy; sometimes light. It is important that you seek help whenever you have a bleed.

A **small bleed**, needs to be acknowledged and a **call to your midwife or hospital** will advise you of what action to take. A **very large bleed** may need you to come in by **ambulance** and the best course of action may be a 111 call.

What causes it?

The following are known to increase the risk of your placenta being low;

- A previous low lying placenta
- A large placenta e.g. twins
- Having had a high number of pregnancies
- An abnormal uterus e.g. fibroids
- Scar on the uterus e.g. previous caesarean section
- Smoking
- Older mums
- IVF (In vitro fertilisation)

Will the bleeding damage my baby?

The bleeding is from your circulation, not the baby's.

However, because the placenta supplies the baby with oxygen, a placental separation can affect the baby, but this is most likely to

happen when there is a large bleed.

Can anything be done to move the placenta?

The placenta does not actually move. As the uterus grows the space between the placenta and the cervix will also grow. This will make it look like it has moved away from the cervix (opening of the womb). If it is sufficiently far enough away may mean you are no longer at risk.

If the placenta is low on a scan in the first half of your pregnancy, you will be offered a later scan to check this - usually about 32 weeks.

Will I be able to have a normal birth?

Not all low placentas prevent a vaginal birth. Placentas are classed as one of the following;

