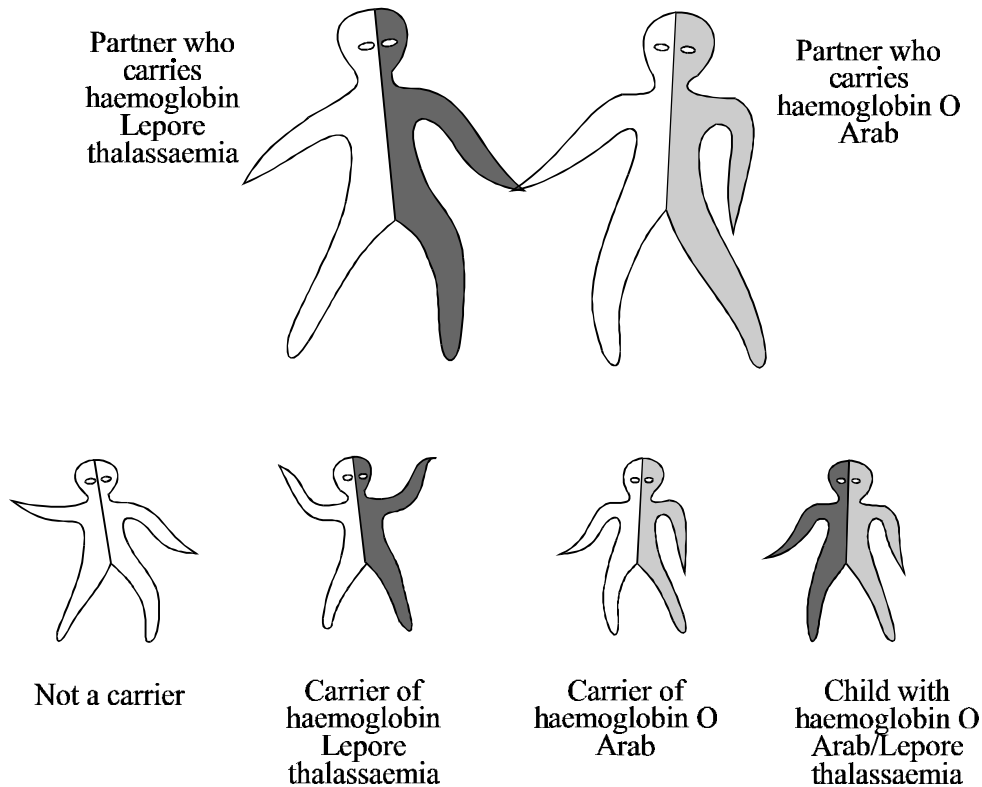


# Implications for a Child when One Partner carries Haemoglobin Lepore thalassaemia and the Other carries Haemoglobin O Arab

*This is an unusual combination that has not been reported in the literature. The following information is based on general experience with these types of thalassaemia, and available scientific knowledge.*

***This couple could have a child with haemoglobin O Arab/Lepore thalassaemia.***



***In each pregnancy,*** there are four possibilities.

- The child may not carry any haemoglobin disorder.
- The child may carry haemoglobin Lepore thalassaemia. This is harmless.
- The child may carry haemoglobin O Arab. This is harmless.
- The child may inherit haemoglobin O Arab from one parent, and haemoglobin Lepore thalassaemia from the other. This child would have an inherited anaemia called ***haemoglobin O Arab/Lepore thalassaemia***.

In each pregnancy there is a 3 out of 4 chance of a healthy child, and a 1 out of 4 chance of child with haemoglobin O Arab/Lepore thalassaemia.

***Haemoglobin O Arab/Lepore thalassaemia*** is a form of haemoglobin O Arab/beta thalassaemia. This is a type of inherited anaemia. Many people with haemoglobin O Arab/beta thalassaemia are healthy all their life, but some are anaemic and need extra care. Current scientific knowledge suggests that a child with ***haemoglobin O Arab/ Lepore thalassaemia*** will have a mild form of haemoglobin O Arab/beta thalassaemia. However, we cannot reliably predict whether any given couple could have children with mild or more severe haemoglobin O Arab/Lepore thalassaemia.

It is possible to test a baby for Haemoglobin O Arab/Lepore thalassaemia early in pregnancy. This couple should see an expert counsellor in haemoglobin disorders to discuss their options. They should do this before starting a pregnancy, or as early in pregnancy as possible.

*Counselling for haemoglobin disorders is provided in your area by:*