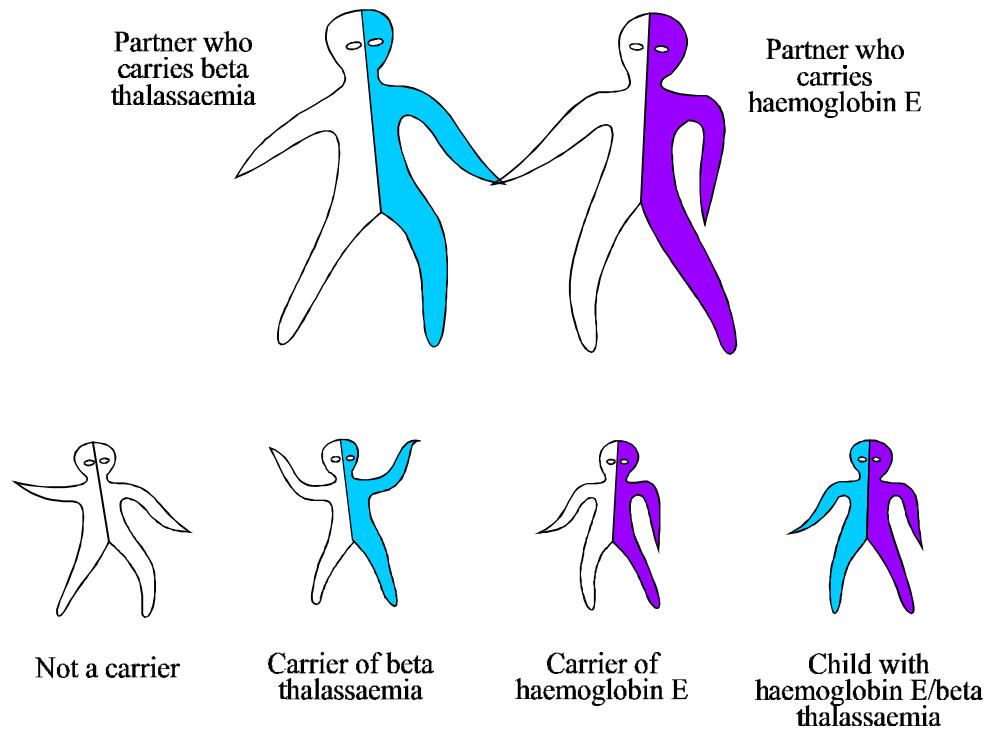


# Implications for a Child when One Partner carries Beta thalassaemia and the Other carries Haemoglobin E

*This couple could have a child with haemoglobin E/beta thalassaemia.*



*In each pregnancy*, there are four possibilities.

- The child may not carry any haemoglobin disorder.
- The child may carry beta thalassaemia. This is harmless.
- The child may carry haemoglobin E. This is harmless.
- The child may inherit beta thalassaemia from one parent, and haemoglobin E from the other. This child would have a serious inherited anaemia called **haemoglobin E/beta thalassaemia**.

In each pregnancy there is a 3 out of 4 chance of a healthy child, and a 1 in 4 chance of child with haemoglobin E/beta thalassaemia.

**Haemoglobin E/beta thalassaemia** is a serious anaemia. A few people with haemoglobin E/beta thalassaemia are healthy all their life. Most are anaemic, are not as strong as others, and need extra care. Some need a blood transfusion every month, for life, and other treatments.

We cannot reliably predict which children will have mild, moderate or severe haemoglobin E/beta thalassaemia.

It is possible to test a baby for Haemoglobin E/beta 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:*