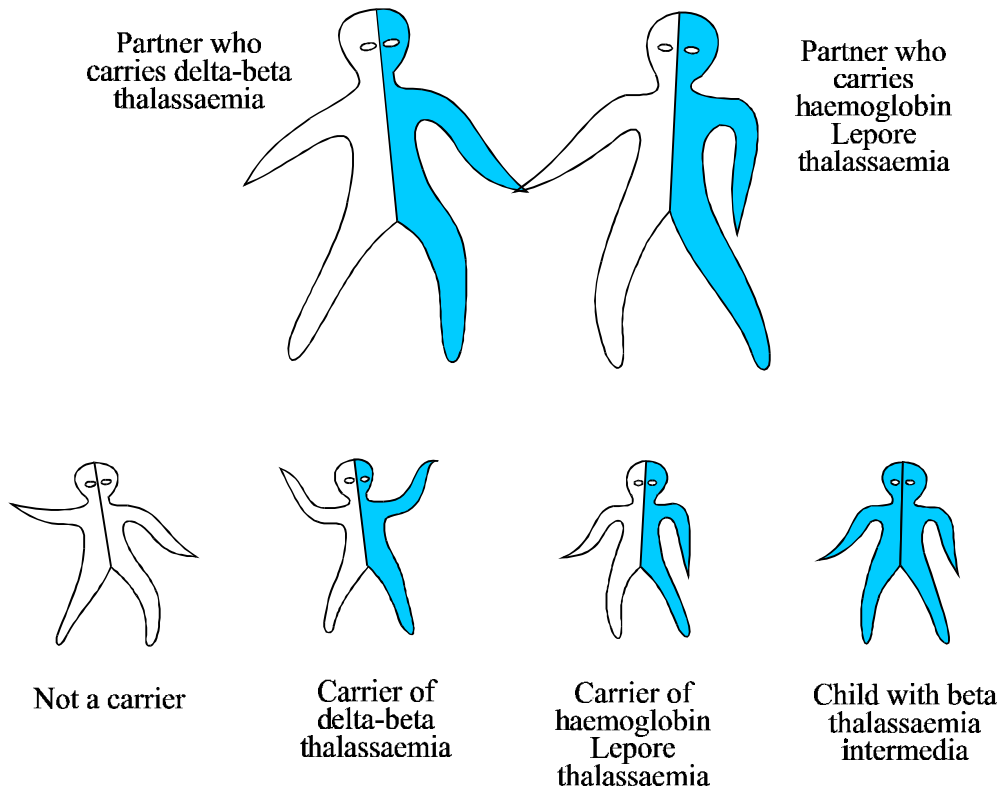


Implications for a Child when One Partner carries Delta-beta Thalassaemia and the Other carries Haemoglobin Lepore thalassaemia

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 **beta thalassaemia major or intermedia**



In each pregnancy, there are four possibilities.

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

In each pregnancy there is a 3 out of 4 chance of a healthy child, and a 1 out of 4 risk of child with beta thalassaemia intermedia.

Beta thalassaemia intermedia is an inherited anaemia that starts in childhood. Some people with thalassaemia intermedia are healthy all their life. Most are anaemic and need extra care. Some need regular blood transfusions. Current scientific knowledge suggests that a child who inherits both delta-beta thalassaemia and haemoglobin Lepore thalassaemia would have a mild type of thalassaemia intermedia. However, we cannot reliably predict whether any given couple could have children with mild or more severe beta thalassaemia intermedia.

It is possible to test a baby for beta thalassaemia intermedia early in pregnancy. This couple should see an expert counsellor in haemoglobin disorders to discuss their options, before starting a pregnancy, or as early in pregnancy as possible.

Counselling for haemoglobin disorders is provided in your area by: