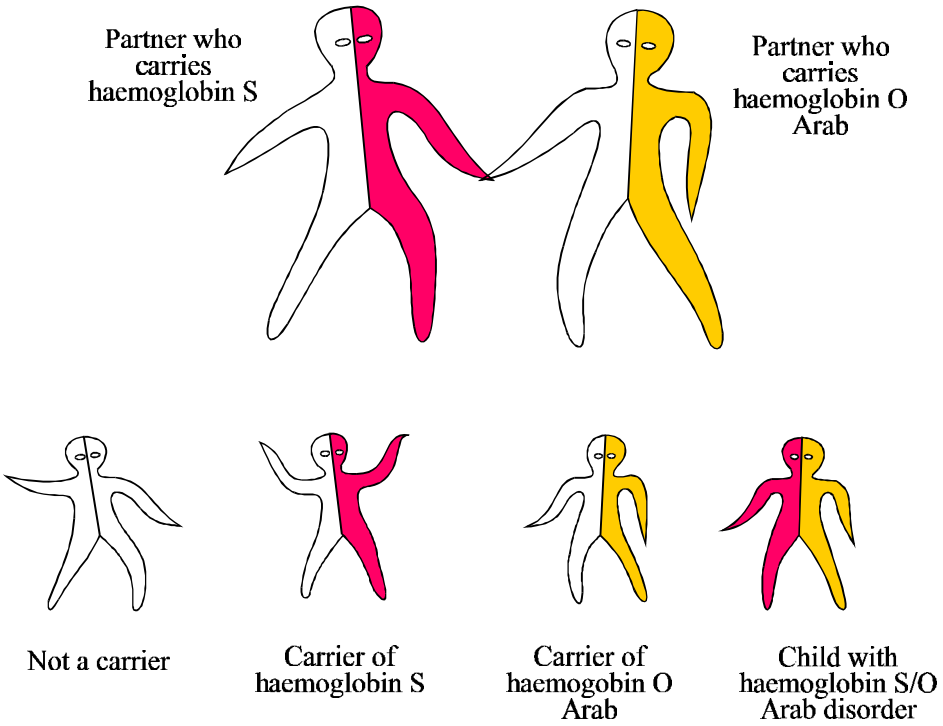
Implications for a Child when One Partner carries Haemoglobin S (Sickle Cell) and the Other carries Haemoglobin O Arab

This couple could have a child with haemoglobin S/O Arab disorder.



In each pregnancy, there are four possibilities:

- The child may not carry any haemoglobin disorder.
- The child may carry haemoglobin O Arab. This is harmless.
- The child may carry haemoglobin S (sickle cell). This is harmless.
- The child may inherit haemoglobin O Arab from one parent and haemoglobin S from the other. This child would have ***haemoglobin S/O Arab disorder***.

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 S/O Arab disorder.

Haemoglobin S/O Arab disorder is a *sickle cell disorder*. It is rare, and we are not able to describe it with complete confidence. It is generally thought to be a mild type of sickle cell disorder. Children with a sickle cell disorder have an increased risk of serious infections, and need to take antibiotics daily. Some people with haemoglobin S/O Arab disorder are completely healthy all their life. Some are anaemic, and have attacks of severe pain in joints or other parts of the body from time to time. A few have severe health problems and need frequent admissions to hospital. People with haemoglobin S/O Arab disorder should attend a *sickle cell clinic* regularly for a check-up and advice.

At present, it is not possible to predict whether a particular couple could have children with mild, moderate or severe haemoglobin S/O Arab disorder.

It is possible to test a baby for Haemoglobin S/O Arab disorder 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