

Appendix 3 – Information Leaflet



Low Dose Aspirin in Pregnancy to prevent Pre-Eclampsia Information Leaflet

You have been asked to take 150mg of Aspirin during your pregnancy to reduce the risk of Pre-Eclampsia. This leaflet explains why we have asked you to take Aspirin during your pregnancy.

What is Pre-Eclampsia?

Pre-Eclampsia is a condition found only in pregnancy that causes:

- Raised blood pressure (Hypertension)
- Protein in the urine (Proteinuria)

It affects around 2 to 10 of every 100 pregnant women and birthing people. Most women/birthing people will have a mild form, with some having more severe cases. Women/birthing people will often have no symptoms and it is diagnosed at routine antenatal appointments with your midwife. Some women/birthing people will experience headaches, blurred vision and swelling of the hands, feet and face. These symptoms can be managed with medications that bring your blood pressure down, however the only cure for pre-eclampsia is for your baby to be born.

What is the risk of Pre-Eclampsia?

If pre-eclampsia is not treated then there is a risk that it may affect the growth of your baby inside the womb, as well as a risk to the health of the mother/ parent. In these cases, the baby may need to be induced or born earlier.

Who gets Pre-Eclampsia?

Any woman/ birthing person can develop pre-eclampsia during pregnancy. However, some women /birthing people are at increased risk for a variety of reasons.

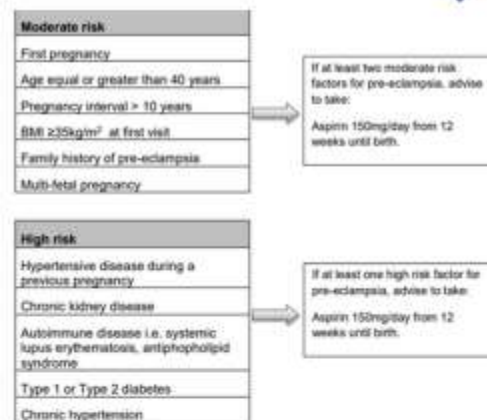


The risk factors are divided into Moderate Risk Factors and High Risk Factors.



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board



You have been asked to take Aspirin because your care provider feels that you are at risk of developing pre-eclampsia based on the above risk factors. Research suggests that taking Aspirin during pregnancy reduces your risk of developing preeclampsia before 37 weeks by two thirds.

Is Aspirin safe to take during pregnancy? Yes it is!

Research has shown that Aspirin does not cause harm to the development of the baby during pregnancy. There is also no increased risk of bleeding when taking Aspirin during pregnancy, either to you or the baby. Although it is advised for you to take Aspirin, it is an unlicensed use of the medication.

What happens next?

We recommend you take 150mg (two 75mg tablets) of Aspirin every night from the 12th week of pregnancy until the birth of your baby. Antenatal clinic will provide your first 3-month supply of Aspirin, we will then ask your GP to provide a prescription for Aspirin for the rest of your pregnancy. Your midwife will continue to monitor you for symptoms of pre-eclampsia throughout your pregnancy.

Any further questions about taking Aspirin during pregnancy, or about pre-eclampsia?

Please speak to your community midwife, GP or contact the Antenatal Clinic at the hospital where you have booked to have your baby.



Taflen Wybodaeth Asbirin Dos Isel yn ystod Beichiogrwydd i Atal Cyneclampsia



Gofynnwyd i chi gymryd 150mg o Asbirin yn ystod eich beichiogrwydd i leihau'r risg o Gyneclampsia. Mae'r daflen hon yn esbonio pam rydym wedi gofyn i chi gymryd Asbirin yn ystod eich beichiogrwydd.

Beth yw Cyneclampsia?

Mae Cyneclampsia yn gyflwr a geir yn ystod beichiogrwydd yn unig sy'n achosi:

- Pwysedd gwaed uwch (Gorbwysedd)
- Protein yn yr wrin (Proteinwria)

Mae'n effeithio ar tua 2 i 10 o bob 100 o fenywod beichiog a phobl sy'n geni. Bydd ffurf ysgafn ar y rhan fwyaf o fenywod/pobl geni, gyda rhai yn cael achosion mwy difrifol. Yn aml ni fydd gan fenywod/pobl sy'n geni unrhyw symptomau a chaiff ei ddiagnosio mewn apwyntiadau cynenedigol arferol gyda'ch bydwaig. Bydd rhai menywod/pobl geni yn profi cur pen, golwg aneglur a chwyddo yn y dwylo, y traed a'r wyneb. Gellir rheoli'r symptomau hyn gyda meddyginiaethau sy'n dod â'ch pwysedd gwaed i lawr, fodd bynnag yr unig iachâd ar gyfer cyneclampsia yw i'ch babi gael ei eni.

Beth yw'r risg o Gyneclampsia?

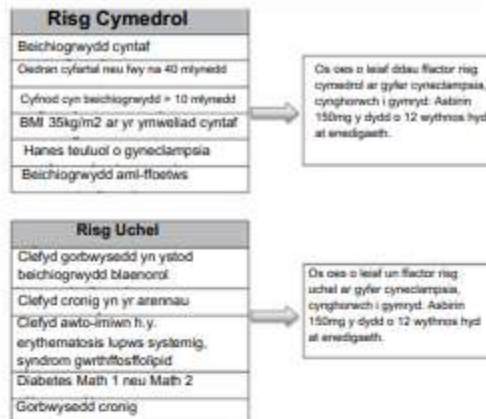
Os na chaiff cyneclampsia ei drin, yna mae perygl y gallai effeithio ar dyfiant eich babi y tu mewn i'r groth, yn ogystal â risg i iechyd y fam/rhiant. Yn yr achosion hyn, efallai y bydd angen prysuro neu eni'r babi yn gynharach.

Pwy sy'n cael Cyneclampsia?

Gall unrhyw fenyw/person geni ddatblygu cyneclampsia yn ystod beichiogrwydd. Fodd bynnag, mae rhai menywod/pobl geni mewn mwy o berygl am amrywiaeth o resymau.



Rhennir y ffactorau risg yn Ffactorau Risg Cymedrol a Ffactorau Risg Uchel.



Gofynnwyd i chi gymryd Asbirin oherwydd bod eich darparwr gofal yn teimlo eich bod mewn perygl o ddatblygu cyneclampsia yn seiliedig ar y ffactorau risg uchod. Mae ymchwil yn awgrymu bod cymryd Asbirin yn ystod beichiogrwydd yn lleihau eich risg o ddatblygu cyneclampsia cyn 37 wythnos o ddwy ran o dair.

A ydy Asbirin yn ddiogel i'w gymryd yn ystod beichiogrwydd? Ydy!

Mae ymchwil wedi dangos nad yw Asbirin yn achosi niwed i ddatblygiad y babi yn ystod beichiogrwydd. Nid oes ychwaith risg uwch o waedu wrth gymryd Aspirin yn ystod beichiogrwydd, naill ai i chi neu'r babi. Er y cynghorir i chi gymryd Asbirin, mae'n ddefnydd didrwydded o'r feddyginiaeth.

Beth sy'n digwydd nesaf?

Rydym yn argymhell eich bod yn cymryd 150mg (dwy dabled 75mg) o Asbirin bob nos o 12fed wythnos y beichiogrwydd hyd at enedigaeth eich babi. Bydd clinig cynenedigol yn darparu eich cyflenwad 3 mis cyntaf o Asbirin, yna byddwn yn gofyn i'ch meddyg teulu ddarparu presgripsiwn ar gyfer Asbirin am weddiill eich beichiogrwydd. Bydd eich bydwraig yn parhau i'ch monitro am symptomau cyneclampsia drwy gydol eich beichiogrwydd.

Unrhyw gwestiynau pellach am gymryd Asbirin yn ystod beichiogrwydd, neu am gyneclampsia?

Siaradwch â'ch bydwraig gymunedol, eich meddyg teulu neu cysylltwch â'r Clinig Cyn Geni yn yr ysbyty lle rydych wedi trefnu i gael eich babi.