



Vasa praevia – what does this mean?

You have been given this leaflet as you have been diagnosed with vasa praevia. If you have any further questions after reading this then please talk to your midwife or doctor.

What is vasa praevia?

Vasa praevia is a rare complication of pregnancy. It happens when baby's blood vessels, unprotected by the umbilical cord or placenta, cross or run very close to the cervix (neck of the womb). This condition can be dangerous because these vessels are at risk of tearing or rupturing, which can lead to severe bleeding and potentially endanger the life of the baby.

What causes vasa praevia?

The exact cause of vasa praevia is not known, but there are a few factors that may increase the risk of developing this condition. These include:

- Low-lying placenta/placenta praevia: When the placenta is implanted in the lower part of the womb, it may increase the likelihood of Vasa Praevia.
- Velamentous cord insertion: This occurs when the umbilical cord attaches to the side of the placenta rather than in the centre, leaving the blood vessels vulnerable.
- Succenturiate placental lobe: This is a smaller accessory placental lobe that is separate to the main part of the placenta. It can be connected to the main part of the placenta by a blood vessel.
- Multiple gestations: Vasa praevia is more common in pregnancies involving twins, triplets, or other multiples.
- In vitro fertilization (IVF): Women who conceive through assisted reproductive techniques, such as IVF, may have a slightly higher risk of vasa praevia.

What are the signs and symptoms when there is vasa praevia?

Vasa Praevia may not cause any symptoms on its own, but it can be identified through certain risk factors and antenatal tests. During a routine ultrasound examination, the condition can sometimes be detected. However, if Vasa Praevia is present, there is a risk of vaginal bleeding without any pain during the third trimester. Once suspected, you will be referred to the fetal medicine team for confirmation.

What are the dangers of vasa praevia?

If Vasa Praevia is not diagnosed and managed promptly, it can lead to serious complications, including:

- **Fetal bleeding:** If the baby's blood vessels tear or rupture before or during labour or the rupture of membranes (breaking of water), it can result in rapid baby's blood loss.
- **Hypoxia (lack of oxygen):** Severe bleeding can cause oxygen deprivation to the baby, potentially leading to brain damage or stillbirth.

How can vasa praevia be managed?

If vasa praevia is diagnosed during pregnancy, your Obstetric specialist team will develop a management plan to ensure the safety of both you and your baby. The treatment options may include:

- **Resting from activities:** Your doctor may advise you to restrict your activities and avoid sexual intercourse to minimise the risk of bleeding.
- **Hospitalisation:** In some cases, you may need to be admitted to the hospital for close monitoring and to be prepared for an emergency Caesarean birth.
- **Scheduled Caesarean birth (C-section):** Most women with Vasa Praevia will require a planned C-section to avoid the risk of baby's bleeding during vaginal delivery. This will usually be between 34 weeks and 36 weeks of pregnancy, but may be earlier if there are other concerns.
- **Steroids:** If an early delivery is necessary, steroid medications may be given to help mature the baby's lungs.
- **Timely medical intervention:** If vasa praevia is suspected during labour, an emergency Caesarean birth may be performed to ensure the safety of the baby.
- **Blood transfusion:** In some instances, baby's blood loss may require a blood transfusion after birth.

Can vasa praevia be prevented?

Unfortunately, there are no known ways to prevent vasa praevia. However, early antenatal care and regular check-ups can increase the chances of detecting the condition early on. If you have any risk factors or concerns, be sure to discuss them with your Obstetric team.

If vasa praevia is diagnosed, work with your Obstetric team to develop a birth plan that ensures the safest delivery for you and your baby.

Remember, this information is not a substitute for professional medical advice. If you suspect you may have Vasa Praevia or have any concerns during your pregnancy, consult your Obstetric team immediately for proper evaluation and guidance.

Conclusion

Vasa praevia is a condition with associated significant fetal loss. Therefore, early diagnosis and appropriate management plan is important in ensuring good outcomes.

Further information can be found on the Royal College of Obstetrician and Gynaecologists website through the link <https://www.rcog.org.uk/for-the-public/browse-our-patient-information/placenta-praevia-placenta-accreta-and-vasa-praevia/>

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

C Okoror, Senior Clinical Fellow, May 2024

Next review due: May 2026

Our Maternity Strategy and Vision

'Working together with women, birthing people and families to offer compassionate, supportive care and informed choice; striving for equity and excellence in our maternity service.'

You can read our maternity strategy here

