



## **Aspirin in Pregnancy**

# Patient information Leaflet

**March 2020**

## **Taking aspirin in pregnancy can help reduce the risk of pre-eclampsia and help your baby grow to its full potential**

### **Why have I been given this information sheet?**

You have been given this leaflet as you have been advised to take 150 mg of Aspirin during your pregnancy. You are advised to take it at night with food.

### **When should I start taking aspirin?**

You should start taking aspirin from 8 weeks pregnant until 36 weeks. If you go into labour before 36 weeks, stop taking the Aspirin immediately and advise your midwife. If you are already over 8 weeks pregnant, just start taking the Aspirin as soon as possible.

### **Why should I take aspirin?**

Research has shown that aspirin can help to reduce the risk of pre-eclampsia developing in women who are at risk, and it can also reduce the risk of having a small baby if you have had a small baby before.

Aspirin helps to improve the blood flow to the baby during the early stages of pregnancy and this can help the baby grow to its full potential.

### **What is pre-eclampsia?**

Pre-eclampsia occurs if you develop high blood pressure in the presence of additional factors – including increased protein levels in your urine and /or abnormal blood tests. It may make you feel unwell with:

- Headaches
- Changes in your vision
- Pain in your upper abdomen
- Vomiting
- Excessive swelling.

Not all of these symptoms need to be present to develop preeclampsia.

**If you have any of these symptoms please contact The Maternity Triage Unit on 0161 922 6175.**

### **Why does it matter if my baby is small?**

Small babies are more at risk being born premature and are more likely to be admitted to the special care baby unit. Small babies also have an increased risk of still birth and neonatal death.

### **Who should take Aspirin?**

When the midwife completed your pregnancy booking questionnaire, it was identified that you are at risk of pre-eclampsia or of having a small baby. The reason for prescribing aspirin to you is documented on the table below:

### **What are the side effects of Aspirin?**

Aspirin in rare circumstances can cause bleeding from the stomach lining. However, Studies on the effects of low-dose aspirin on fetal and maternal health and development are reassuring, and low doses of aspirin administered during the first 12 weeks of pregnancy do not seem to constitute risk for the fetus, (Atallah, 2017)

### **Contraindication for use**

If you have any of the conditions below we would not recommend taking aspirin during your pregnancy:

Active peptic ulceration; bleeding disorders (antiplatelet dose); children under 16 years (risk of Reye's syndrome); haemophilia; previous peptic ulceration, severe cardiac failure. If you develop any side effects, then please contact your midwife or Doctor.

### **Aspirin is not licence for use in pregnancy.**

Aspirin is not normally taken in pregnancy and its use during pregnancy is what we call 'un-licensed'. This means that the manufacturers have not gained a licence to use it in this way. However, experts in maternity have looked at the benefits of taking aspirin when certain risk factors as described above, are present and recommend that it is prescribed by the doctor or midwife looking after you. For more information about any of the issues raised in this leaflet, please talk to the midwives or Doctors caring for you. The contact details are on the front of your Maternity Notes.

### **Further Information**

Atallah A, e. a. (2017). Aspirin for prevention of pre-eclampsia. *Drugs*, 77:1819-1831

Saving babies Lives Care Bundle. NHS England 2019  
<https://www.england.nhs.uk/publication/saving-babies-lives-version-two-a-care-bundle-for-reducing-perinatal-mortality/>

As TGICO is using the Regional GM guidance please visit MFT'S website for more information on Aspirin in pregnancy.

<https://mft.nhs.uk/saint-marys/services/maternity-servicesobstetrics/information-for-gps/>

Research Article supporting use of Aspirin in Pregnancy:  
<http://www.nejm.org/doi/10.1056/NEJMdo005183/full/>

If you have any questions you want to ask, you can use this space below to remind you

If you have a visual impairment this leaflet can be made available in bigger print or on audiotape. If you require either of these options please contact the Patient Information Centre on 0161 922 5332

If you require an interpreter, please ask an appropriate person to contact our central booking office between Monday to Friday 8am to 5pm on 0161 922 6991 to arrange this for you.

**語言翻譯及病者支持服務 (LIPS):**

如果閣下需要翻譯員在您的預約當日幫助您的話 請找一名合適的家庭成員 **0161 922 6991** 聯絡本中央預約辦事處來您您安排 我們的辦公時間是星期一至星期五 上午 8 時至下午 5 時

**Językowo Tłumaczeniowa Usługa Pomocy dla Pacjenta (Language, Interpretation and Patient Support Service LIPS):**

Jeśli potrzebujesz pomocy tłumacza w trakcie swojej wizyty, proszę poprosić odpowiedniego członka rodziny o skontaktowanie się z Centralnym Biurem Zamówień (*Central Booking Office*), w celu zorganizowania tłumacza pomiędzy poniedziałkiem a piątkiem w godzinach od 08:00 - 17:00 pod numerem 0161 922 6991.

لینگویج، انٹرنیشنل اینڈپیشنٹ سپورٹ سروس (Lips)

اگر آپ کو اپنی اپائنمنٹ کے لئے مترجم کی مدد کی ضرورت ہو تو براہ مہربانی اپنے خاندان کے کسی موزوں فرد سے کہیں کہ وہ ہمارے سنٹرل بنگ آفس سے پیر سے جمعہ 8.00 بجے صبح سے 5.00 بجے شام کے دوران 0161 922 6991 پر فون کر کے اس کا بندوبست کریں۔

Document control information

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