

Anti-D following early pregnancy loss

Introduction

There are four main blood groups: A, B, AB and O. People are also either Rhesus D (Rh D) positive or Rhesus D (Rh D) negative.

If you are Rh D negative, your red blood cells do not have the Rh D antigen. Antigens are markers that your body may see as foreign and react to.

Blood type is passed down from your parents. This means that if you are Rh D negative, you could be pregnant with a baby who is Rh D positive. During some events in pregnancy, a small amount of the baby's blood can mix with yours, which may cause your body to react.

Why have I been offered an Anti-D injection?

Your blood group is Rh D negative. If you have unfortunately experienced a pregnancy loss and needed surgical treatment, you will be given an anti-D injection as part of your care.

What is Anti-D?

Anti-D immunoglobulin is a medicine given as an injection to protect future pregnancies. Anti-D immunoglobulin helps prevent your body from reacting to Rh D positive blood. Without this injection, some Rh D negative women can become sensitised and produce an anti-D antibody, which may cause problems in a future pregnancy. This is why anti-D immunoglobulin is an important part of your treatment.

Is Anti-D safe?

While it is a blood product, there have been no known cases of viral transmission (transmission of viruses like hepatitis and HIV) using anti-D immunoglobulin. Anti-D immunoglobulin is carefully screened, processed, and monitored to meet strict safety standards. The benefits of preventing problems in future pregnancies far outweigh the small risk of side effects.

Are there any side effects to Anti-D?

Anti-D immunoglobulin injections may cause local reactions at the injection site, including swelling, soreness, and bruising, which may last for a few days.

Sometimes, people may experience a mild fever, headache, or flu-like symptoms.

Very occasionally, people may experience an allergic reaction to the injection, including low blood pressure, wheezing and a rash.

After your injection, you will be asked to remain for observation for 20 to 30 minutes.

Contact information

Early Pregnancy Assessment Unit

Tel: 0300 422 5549

Monday to Sunday, 8:00am to 4:00pm

Gloucestershire Royal Hospital

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Shared Decision Making

If you are asked to make a choice, you may have lots of questions that you want to ask. You may also want to talk over your options with your family or friends. It can help to write a list of the questions you want answered and take it to your appointment.

Ask 3 Questions

To begin with, try to make sure you get the answers to three key questions if you asked to make a choice about your healthcare.

1. What are my options?
2. What are the pros and cons of each option for me?
3. How do I get support to help me make a decision that is right for me?



These resources have been adapted with kind permission from the MAGIC Programme, supported by the Health Foundation.

***Ask 3 Questions** is based on Shepherd HL, et al. Three questions that patients can ask to improve the quality of information physicians give about treatment options: A cross-over trial.

Patient Education and Counselling, 2011;84: 379-85



<https://aqua.nhs.uk/resources/shared-decision-making-case-studies/>



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