



CLINICAL GUIDELINE

Aspirin, Antenatal use of Aspirin for Prevention of Pre-Eclampsia

A guideline is intended to assist healthcare professionals in the choice of disease-specific treatments.

Clinical judgement should be exercised on the applicability of any guideline, influenced by individual patient characteristics. Clinicians should be mindful of the potential for harmful polypharmacy and increased susceptibility to adverse drug reactions in patients with multiple morbidities or frailty.

If, after discussion with the patient or carer, there are good reasons for not following a guideline, it is good practice to record these and communicate them to others involved in the care of the patient.

Version Number:	7
Does this version include changes to clinical advice:	Yes
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Lead Author:	Ann Duncan
Approval Group:	Obstetrics Clinical Governance Group

Important Note:

The Intranet version of this document is the only version that is maintained. Any printed copies should therefore be viewed as 'Uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

Greater Glasgow & Clyde

Obstetric Guidelines

Aspirin - Antenatal use of Aspirin for the prevention of Pre-eclampsia

The NICE Guideline for Hypertension in pregnancy recommends the use of aspirin for the prevention of Pre-Eclampsia. A recent meta-analysis has suggested a dose of 150mg daily, taken at night, to be most beneficial. (<https://www.ncbi.nlm.nih.gov/pubmed/29138036>).

RISK FACTORS FOR PRE-ECLAMPSIA

HIGH

- Hypertensive disease during a previous pregnancy
- Chronic hypertension
- Chronic renal disease
- Autoimmune disease such as SLE or antiphospholipid syndrome
- Diabetes – type 1 or type 2
- Placental histology confirming placental dysfunction in a previous pregnancy**

MODERATE

- First pregnancy
- Age \geq 40 years
- Pregnancy interval $>$ 10 years
- BMI \geq 35 at first visit
- Family history of Pre-Eclampsia
- Multiple pregnancy

IF AT LEAST ONE HIGH OR TWO MODERATE RISK FACTORS THEN ADVISE ASPIRIN (150mg) orally once daily **at night** FROM 12+0 WEEKS UNTIL DELIVERY

**previous pregnancy complicated with one of the following: Birthweight $<$ 3rd centile/Birthweight $<$ 10th centile with abnormal umbilical Artery Doppler or uterine Artery Doppler/Stillbirth

Contraindications: previous or active peptic ulceration, haemophilia, severe cardiac failure

Hypersensitivity: Aspirin and other NSAIDs are contra-indicated in patients with a history of hypersensitivity to aspirin or any other NSAID – which includes those in whom asthma, angioedema, urticarial or rhinitis have been precipitated by aspirin or any NSAID.

(GP notification letter attached to this guideline)

References

Hypertension in pregnancy: diagnosis and management: NICE guideline 25 June 2019

Saving babies' lives Version 2: NHS England March 2019

The Investigation and management of the Small for Gestational Age fetus: RCOG Green-Top Guideline No31

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Title Aspirin Antenatal use of aspirin for the prevention of pre-eclampsia V3

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Obstetrics Governance Group GGC:

Women & Children Directorate

GP Antenatal use of low dose aspirin – notification letter

Dear Doctor,

This patient was seen today.....and is..... (Gestation)
 By Greater Glasgow & Clyde Maternity services at..... (Clinic)
 And is in the care of.....(hospital).....(Consultant)

This patient has the following risk factors and fulfills the criteria for **150mg** Aspirin daily, at night, from **12 weeks** until delivery.

I would be grateful if this could be prescribed.

RISK FACTORS FOR PRE-ECLAMPSIA

HIGH	
*Hypertensive disease during a previous pregnancy	
*Chronic hypertension	
*Chronic renal disease	
*Autoimmune disease such as SLE or antiphospholipid syndrome	
*Diabetes – type 1 or type 2	
*Placental histology confirming placental dysfunction in a previous pregnancy	
MODERATE	
*First pregnancy	
*Age >40 years	
*Pregnancy interval >10 years	
*BMI >35 at first visit	
*Family history of pre-eclampsia	
*Multiple pregnancy	
REQUIRES LOW DOSE ASPIRIN?	YES
	NO

If at least **one High** or **two Moderate** risk factors, then advise low dose Aspirin (150mg) daily, at night, from 12 weeks until delivery unless contraindicated.

Yours sincerely,

.....Contact Number.....

