

Placenta Previa

The placenta is an organ that develops on the lining of the uterus around the third month of pregnancy. The placenta is connected to the baby's umbilical cord. It supplies the baby with nutrients and oxygen and carries away waste products.

In one out of 200 pregnancies a condition called placenta previa develops. This occurs when the fertilized egg attaches to the lower part of the uterus instead of to the top. The placenta forms around the implanted embryo, resulting in a placenta positioned in the lower part of the uterus, instead of in the normal position at the top. A placenta previa completely blocks the opening of the cervix. Variations of this condition are *partial previa*, which partially covers the cervical opening, and *marginal previa*, which extends just to the edge of the opening.

The first sign of placenta previa is often bright red bleeding. There is usually no pain or cramping. If bleeding occurs, the doctor will perform tests to confirm placenta previa. If placenta previa is diagnosed, bed rest is usually necessary, sometimes in the hospital. Steroid shots may be given to help speed the maturation of the baby's lungs, in case an early delivery becomes necessary. If bleeding is severe, a blood transfusion may be ordered for the mother. A Cesarean delivery may be necessary. In cases of marginal or partial previa, a vaginal birth may still be possible.

The risk of placenta previa is increased for women who:

- Are pregnant with twins
- · Are more than 35 years old
- Have had more than one previous delivery
- Have had a C-section
- · Have had a placenta previa in the past
- Have had several abortions

There is no way to prevent placenta previa. Once it is diagnosed, the best strategy is to follow your doctor's instructions and to spend most of your time lying down.

Tell your doctor about any bleeding, cramping, or problems. Support groups are available for moms-to-be on bedrest or with placenta previa. Ask your doctor or your MedCost Prenatal Nurse to help you find one.

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