

HDFN Discussion Questions:

1. How does Rhogam help to prevent the mother from making the anti-D antibody?
2. Why does Rh HDFN not usually affect the first pregnancy?
3. What does *Erythroblastosis fetalis* refer to?
4. What does *Hydrops fetalis* (or *fetal hydrops*) refer to?
5. Describe the pathogenesis of hemolytic disease of the newborn from attachment of maternal antibody to fetal red cells to *Hydrops fetalis*.
6. How long will destruction of infant red cells continue after birth?
7. What is kernicterus and why does it occur?
8. What factors affect the immunization and severity of HDFN?
9. What are some situations during which a mother may be exposed to fetal red cells?

**10. Which subclasses of IgG are most efficient at hemolysis and therefore most likely to cause HDFN?**

**11. Which antibody is most clinically significant in HDFN after the D antibody? Why?**

**12. Why is a mother who has an ABO incompatible fetus less likely to experience D immunization?**

**13. What blood type of the mother is the most likely to cause ABO HDFN? Why?**

**14. What antibody is the most common cause of HDFN since Rhogam?**

**15. What are the common symptoms of ABO HDFN in the newborn?**

**16. Describe how Rh HDFN differs from ABO HDFN.**

**17. What testing is performed on a pregnant mother?**

**18. What is the purpose of an antibody titer and when is it performed?**

**19. How often should titers be performed?**

**20. At what point is a titer considered critical?**

**21. What additional information can be gained by phenotyping the father for the antigens the mother has an antibody to?**

**22. What does the MCA-PSV test determine and when would it be performed?**

**23. What additional information is gained by performing a cordocentesis?**

**24. What additional information is gained by performing an amniocentesis?**

**25. What are the indications that it is necessary to perform an intrauterine transfusion?**

**26. How often are intrauterine transfusions performed?**

**27. What type of red cells are transfused during intrauterine transfusions?**

**28. What information will performing a DAT and eluate on the cord blood give you about the newborn?**

**29. What different treatment options exist for newborns suffering from HDFN?**

**30. How does phototherapy help treat HDFN?**

**31. How does IVIG work to treat HDFN?**

**32. What are the benefits to the newborn of performing an exchange transfusion?**

**33. At what point of fetal life is the mother first given Rhogam?**

**34. When is the second dose of Rhogam given (assuming the mother does not experience any trauma after the first dose)?**

**35. What Rh type are mothers that receive Rhogam?**

**36. Is there any benefit in giving a mother Rhogam that has already made an anti-D?**

**37. How much anti-D is one dose of Rhogam?**

**38. One dose of Rhogam will protect against what amount packed red cells and whole blood?**

**39. What information is obtained from the Rosette test?**

**40. What information is obtained from performing a Kleihauer-Betke test?**