

**This is all very overwhelming and confusing,  
Where can I find someone to talk to?**

Admittedly there is very little information regarding NAIT available. However a group of parents who have had to deal with the issues of NAIT decided to do something to try and raise awareness of this under diagnosed and often misdiagnosed condition, so have created Naitbabies.org and can put parents in contact with others, from many different countries, in our active support groups.

Log on to our website [www.naitbabies.org](http://www.naitbabies.org) for more information

Or email [info@naitbabies.org](mailto:info@naitbabies.org)

Your local contact is.....

*[www.naitbabies.org](http://www.naitbabies.org) is a non-profit organisation that has been created to raise knowledge and awareness of a disease most people have never heard of Neonatal Alloimmune Thrombocytopenia or NAIT for short, (also known as FMAIT, AIT NAT, NATP)*

**Neonatal Alloimmune Thrombocytopenia  
(NAIT)**

*(Also known as FNAIT (fetal and neonatal alloimmune thrombocytopenia), AIT (alloimmune thrombocytopenia) FMAIT (fetal maternal thrombocytopenia), NAT or NATP.)*



**[www.naitbabies.org](http://www.naitbabies.org)**

### **What is NAIT?**

NAIT stands for Neonatal AlloImmune Thrombocytopenia. In short, NAIT is a severe blood platelet deficiency in fetuses and newborns. Humans need a platelet count of 150,000-450,000 to be healthy. The platelet counts of NAIT babies are alarmingly low!

### **Why are blood platelets important to my baby?**

Blood platelets are the body's way of healing when severe trauma is caused. Platelets allow blood to clot, rather than bleeding endlessly and causing permanent damage in the form of a haemorrhage.

### **What causes NAIT?**

NAIT is caused by a mismatch between mother and babies platelet types. The mother's body recognizes the fetus as "not self" and forms antibodies against the baby's blood platelets, destroying as many as possible.

### **What are the risks to my baby?**

Without treatment during your pregnancy there is a risk that your unborn child will develop extremely low platelets. It is possible that the fetus will haemorrhage (most commonly in the brain, spinal cord, or abdomen). This can occur during pregnancy, delivery, and in the weeks following birth.

### **Is there treatment for NAIT effected Pregnancies?**

There is treatment, which is successful about 95% of the time. Treatment plans vary, but generally consist of a combination of weekly IVIG (intravenous immunoglobulin) infusions, prednisone, and possible fetal blood sampling (FBS/PUBS) your doctor may also recommend a caesarean delivery for your baby, usually around 34-36 weeks gestation. Babies with **known** high platelet counts are often delivered vaginally. Cases should be managed in Fetal Medicine units.

### **Will there be complications with future Pregnancies?**

Your doctor will order blood tests for yourself and your child's father, which will determine the likelihood of having subsequent NAIT affected pregnancies. You will either have a 100% or 50% chance of subsequent pregnancies being affected. The test is called Platelet Antigen Genotyping.

### **How rare is NAIT? Why was it not caught sooner?**

Currently there is no prenatal testing for NAIT, which is why it has not been diagnosed in first pregnancies. NAIT is estimated to occur in 1 in every 800 live births; however experts say this estimate is an understatement.