Abstract

In a retrospective study we assessed pregnancy outcome in relation to sickle haemoglobin (HbS) and anaemia at Kenyatta National Hospital, Nairobi (KNH) from 1981-1986. There were 36% maternal and 45% foetal losses in sickle cell disease (SCD) pregnancies and 7% foetal losses in sickle cell trait (HbAS) from 26 HbS-related pregnancies. 11 had homozygous sickle cell (SS) disease and 15 had HbAS. Age ranges for both groups were comparable. Mean haemoglobin-level for SS disease patients was 7.8 gm/dl (SD +/- 1.68), for AS patients 7.8 gm/dl (SD +/- 2.1). These maternal and foetal losses are quite high. Anaemia alone does not satisfactorily account for the higher losses in SS pregnancies. Other contributory factors need elucidation and intervention.