

The World Health Organization (WHO) has published its first-ever global guideline on managing sickle cell disease (SCD) during pregnancy, in a major step to improve outcomes for women and babies facing this life-threatening condition.

Sickle cell disease, a group of inherited blood disorders, poses severe health risks during pregnancy. Women with SCD are up to 11 times more likely to die from pregnancy-related complications than those without the condition. Their babies also face higher risks of stillbirth, premature birth, or low birth weight.

“With quality health care, women with inherited blood disorders like sickle cell disease can have safe and healthy pregnancies,” said Dr Pascale Allotey, Director for Sexual and Reproductive Health and Research at WHO. “This guideline aims to improve outcomes and increase access to evidence-based care.”

The new guideline includes more than 20 recommendations for care during pregnancy, including:

- Folic acid and iron supplementation (adapted for malaria-endemic areas);

- Management of pain and sickle cell crises;

- Prevention of infections and blood clots;

- Use of prophylactic blood transfusions;

- Continuous monitoring of both mother and baby.

The guidance emphasizes respectful, personalized care, and highlights the need to address stigma and discrimination in healthcare settings.

There are an estimated 7.7 million people living with SCD globally, with over 375,000 deaths annually. The majority of cases occur in sub-Saharan Africa, but prevalence is rising globally due to population movements and improved life expectancy.

Until now, most clinical approaches were based on high-income settings. WHO’s guideline is designed to be relevant for lower-resource environments where SCD is most prevalent.

“This supports informed decisions about treatment and how to manage

complications,” said Dr Doris Chou, WHO Medical Officer and lead author of the guideline. “It’s essential that women with SCD are supported by knowledgeable care teams.”

The guideline also calls for greater research into SCD treatments during pregnancy and breastfeeding, as these groups are often excluded from clinical trials.

This release marks the first in a new WHO series on managing noncommunicable diseases in pregnancy, with upcoming guidelines on diabetes, cardiovascular disease, respiratory illnesses, and mental health.