

# Intrahepatic Cholestasis of Pregnancy

Maternity

## Introduction

Within this leaflet, the terms “woman” and “women” are used. However, it is not only people who identify as women who may want to access this leaflet. Your care should be personalized, inclusive and sensitive to your needs, whatever your gender identity.

## Who is this leaflet for?

This leaflet is for women and pregnant people who were diagnosed with Intrahepatic cholestasis of pregnancy (ICP), also known as Obstetric cholestasis.

## What is Intrahepatic cholestasis of pregnancy?

ICP is a condition that affects your liver during pregnancy. ICP causes a build-up of bile acids in your body. Bile acids are made in your liver and they help you to digest fat and fat soluble vitamins. The main symptom of ICP is itching of your skin without any rash. ICP usually starts towards the end of the pregnancy (the third trimester) but can happen earlier. It should get better when your baby has been born.

## How common is ICP and why did it happen to me?

ICP is uncommon. In the UK, it affects about 7 in 1000 women (less than 1%). It is more common among women of Indian-Asian or Pakistani-Asian origin, with up to 15 in 1000 women (1.5%) affected.

It is often not clear why it develops in one pregnancy and not another.

## What does ICP mean for me?

ICP can be a very uncomfortable condition. It does not have any serious consequences for your health during pregnancy but can be very distressing.

Itching is the main symptom and it can start at any time during pregnancy, but usually begins after 28 weeks. It can vary from mild to intense and persistent and can sometimes be very distressing. It may include the palms of your hands or soles of your feet. The itching tends to be worse at night and can disturb your sleep. There is no rash with ICP. The itching will get better soon after birth and causes you no long-term health problems.

**The prevention of infection is a major priority in all healthcare and everyone has a part to play.**

- Please decontaminate your hands frequently for 20 seconds using soap and water or alcohol gel if available
- If you have symptoms of diarrhoea and/or vomiting, cough or other respiratory symptoms, a temperature or any loss of taste or smell please do not visit the hospital or any other care facility and seek advice from 111
- Keep the environment clean and tidy
- Let's work together to keep infections out of our hospitals and care homes.

## How is ICP diagnosed?

### Symptoms:

Itching is very common in pregnancy, affecting 25 in 100 women (25%). Most women who have itching in pregnancy will not have ICP. However, itching can be the first sign of ICP and if you experience this, you should tell your health care professional.

### Examination of your skin:

Your skin will be examined to check whether your itching is related to a skin condition, such as eczema. It is possible that you may have more than one condition.

### Blood tests:

- Liver function tests (LFTs). These are blood tests that look at how well your liver is working. Some of these can be raised in ICP
- Bile Acids is a blood test that measures the level of bile acids in your blood. Bile acids are raised in ICP. Your bile acid levels can be abnormal even if your liver function tests are normal. Bile acid levels can also be raised in other conditions apart from ICP
- Abnormal Liver function tests alone are not indicative of ICP
- Some women may have itching for days or weeks before their blood tests become abnormal. If your itching persists and no other cause is found, your liver function tests and bile acids should be repeated

## What does ICP mean for my baby?

**There is an increased chance that your baby may pass meconium (open their bowels) before they are born.**

This makes the water around your baby a green or brown colour. Your baby can become unwell if meconium gets into their lungs during labour.

**There is an increased chance of you having an early birth.**

The chance of having your baby pre-term (less than 37 weeks) is higher if you have ICP. This may be because you go into labour naturally or because your healthcare team advises you to give birth early.

**There are no known long term health risks to your baby.**

However there is a small increased chance that your baby will need to go to the neonatal when they are born, especially if they have been born early.

## What are the chances of stillbirth?

Your chance of having a stillbirth depends on the level of bile acids found in your blood as well as any other pregnancy complications you may be experiencing.

Liver function tests are not predictive of the risk of stillbirth.

If your bile acid levels are between 19 and 39 micromol/L (Mild ICP) and you do not have any other risk factors, the chance of you having a stillbirth is no different to someone who doesn't have ICP.

If your bile acid levels are between 40 and 99 micromol/L (Moderate ICP), and you do not have any other risk factors, then the chance of you having a stillbirth is similar to someone who doesn't have ICP until you are 38-39 weeks pregnant.

If your bile acid levels are 100 micromol/L or more (Severe ICP), your chance of having a stillbirth is higher than someone who doesn't have ICP and is around 3%. Most of these stillbirths happen after 36 weeks of pregnancy.

If you have other factors (such as gestational diabetes and/ or pre-eclampsia) or are having a multiple pregnancy (twins or triplets) you may have a higher chance of stillbirth and this may affect when your healthcare team recommend that you give birth.

## What extra care will I need?

Once you have been diagnosed with ICP, you should be under the care of an Obstetrician. An individualised plan of care will be made for you depending on your circumstances.

Regular follow up appointments and blood testing will be arranged for you in the fetal assessment unit until the time of your delivery.

You should keep a close eye on your baby's movements and if you are worried, you should go to your local maternity unit for a check-up straight away.

You do not need any additional scans of the baby because you have ICP.

## Can ICP be treated?

There is no treatment available that helps your baby or that will make your bile acid levels better. Your ICP will get better only after your baby is born.

Treatments to improve your itching are of limited benefit but might include skin creams and antihistamines (which may help you sleep at night). Some women have found that having cool baths and wearing loose-fitting cotton clothing helps to reduce the itching.

A medication called ursodeoxycholic acid, may slightly reduce itching in a small number of women. Ursodeoxycholic acid may reduce your chance of giving birth prematurely but it does not prevent stillbirth.

## What is the best time for my baby to be born?

The recommended timing of your baby's birth will depend on the level of bile acids in your blood and also whether you have any additional risk factors such as multiple pregnancy, gestational diabetes or pre-eclampsia.

To reduce your chance of having a stillbirth, you might be asked to consider a planned birth rather than waiting to go into labour naturally.

If you are having one baby and your pregnancy has had no other complications, the following recommendations apply to you:

- Planned birth by the time of your due date (40 weeks) may be considered if your bile acids are raised between 19 and 39 micromol/L. If you have no other risk factors you may also consider waiting to go into labour as your risk of stillbirth is no different to someone without ICP
- Planned birth at 38-39 weeks' gestation may be recommended if your bile acid levels are 40-99 micromol/L and if you have no other risk factors
- Planned birth at 35-36 weeks' gestation may be recommended if your bile acid levels are 100 micromol/L or more

Your health care professional will discuss your options with you depending on your individual situation, so that you can make an informed choice about how you give birth. Your options will be to choose an induction of labour, to choose a planned caesarean birth or to wait until you go into labour naturally.

## What follow-up after pregnancy should I have?

ICP symptoms get better after birth. It can take several weeks for your blood tests to return to normal. At your 6-week postnatal check your GP should make sure that your itching has gone away and arrange blood tests to make sure that your liver blood tests and bile acids have returned to normal. If you still have symptoms or if your blood tests have not returned to normal by this time, you may be referred to a specialist for further investigations.

## Is there anything else I should know?

- There is an increased chance that you will have ICP again in future pregnancies
- Your liver function tests and bile acids should be checked at the start of any future pregnancies and you should tell your healthcare professional if you develop any symptoms
- ICP does not affect your choice of contraception once your liver blood tests and bile acids have returned to normal. If you take an oestrogen containing contraceptive such as the combined pill and develop itching you should see your health care professional/GP immediately for review
- If you have had ICP, it is still possible for you take HRT in the future

## References

- Intrahepatic cholestasis of pregnancy (Green-top guideline No. 43) – Published 9 August 2022
- Intrahepatic cholestasis of pregnancy (Information for you) – Published 9 August 2022

## English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

## Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

## Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

## Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

## Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

## Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。