THALASSEMIAS AND HEMOGLOBINOPATHIES

# Hemoglobin D Trait or HBFAD

The child's newborn screening test identified him/her as a possible carrier of Hemoglobin D, also referred to as Hemoglobin D Trait or Hb FAD.

## CLINICAL EXPECTATIONS FOR CARRIERS OF HEMOGLOBIN D

Being a carrier of Hemoglobin D will not have an adverse influence on this child's life expectancy. The trait is basically silent and carriers are not more likely to get sick than any other child. In most cases, children are symptom-free and will have normal growth and development, hence do not need special medical care. Rarely, carriers can manifest with mild anemia.

## REPRODUCTIVE RISKS

The results indicate that the child is a carrier of the Hemoglobin D. It is important to remember that the trait may be transmitted by the child to his/her would-be children. Thus, it is extremely important to have his/her future partner screened for the hemoglobin disorders as their union may result in a baby with a hemoglobin D disease which, at most, may present with mild anemia. More importantly, in a population with high incidence of alpha or beta thalassemia, co- inheritance with these conditions may present with moderate to severe anemia. Family members of this child may also be at-risk for hemoglobin D disease.

References:
Gepte, MB., Naranjo, ML., Bahjin, RR., De Castro, Jr. R., Fajardo, P., Maceda EB., Paclibar MLF. (2022, October) Disorder[Thalassemias Experts Committee Session]. Newborn Screening Reference Center, National Institutes of Health, University of the Philippines Manila.

## Important Considerations

- Treatment is typically not needed.
- Immunizations are not contraindicated for this condition, and may be given as recommended by the Philippine Pediatric Society.

## Note

Parents or hematologists may opt for genotyping but this will not be covered by the Newborn Screening program and is at the own expense of the family. This may be taken into account when counseling is done by the pediatrician/hematologist.