

ICP: THE SUPPORT

Every day people who need support contact us in our social media groups, on our helpline and by email.

"I'm sat in tears in my lounge, been itchy all night."

"I am now 27 weeks and I am itching like crazy... my poor legs are swollen and red raw."

"I felt so sorry watching my wife tear at her skin... I felt so helpless and scared."

We also provide support to other members of the family, who often feel helpless about what they can do to help.



We know what we do helps because people tell us!

"I found this resource a steady rock during a stressful time."

"The people from the support group were there for us every step of the way."

"Without your support, I'm not sure I would have coped too well with my second ICP experience."

GET INVOLVED!

We can only achieve our aims with your support.

A regular donation of just £2 per month can make all the difference. It can help us to:

- Support people affected by ICP
- Provide information about the condition
- Fund scientific research



"Knowing there are people trying to find answers builds hope."

Contact
www.icpsupport.org
and help us make a difference

ICP Support

Correspondence address:

69 Mere Green Road
Sutton Coldfield
B75 5BY
0121 323 4316

Charity registration number 1146449
Limited company registered in England and Wales
No. 07817408

ICP Support

**For anyone affected by
intrahepatic cholestasis
of pregnancy**



*Join in our vision that every ICP
baby will be born safely*

www.icpsupport.org

ICP: THE CHARITY

ICP Support was originally set up in 1991 as a support and information line, and was formally registered as a charity in 2012. During that time we have been a vital point of contact for thousands of women and their families.

The information we provide about ICP is research-based, as not only do we work closely with one of the largest research groups in the UK (headed by Professor Catherine Williamson), two of the charity's founding members work in ICP research.

Our aims are to:

- Provide information and support to people affected by ICP
- Raise awareness of ICP
- Promote and fund research into ICP

We work closely with hospitals and other organisations, such as the Royal College of Midwives, as we believe that collaboration is key if we are to achieve our vision:

That every ICP baby is born safely



ICP: THE FACTS

- ICP (intrahepatic cholestasis of pregnancy) is a liver disorder unique to pregnancy. It is also referred to as obstetric cholestasis (OC).
- ICP affects around 5,500 women in the UK each year.
- It's a complex condition, but is thought to be caused by:
 - Genetics – it has been found in families
 - Hormones – women expecting more than one baby or women who have had fertility treatment appear to have a higher risk of developing it
 - Environment – there are more cases in the winter months
- The main symptom is **itching**, which is typically noticed on the hands and feet, but can be anywhere on the body. It may be mild or severe, and is generally worse at night.
- Diagnosis is made by excluding other causes of the itch. **The most important blood tests are liver function and bile acid tests.**
- Treatment includes the use of medication, regular blood tests and usually an early birth for the baby (by 38 weeks of pregnancy).
- If you have had ICP in one pregnancy you have a high chance (over 60%) of developing it in a subsequent pregnancy.

*“Scratching
can be more than just
an itch”*

ICP: THE RISKS

- ICP is known to be associated with an increased risk of:
 - Spontaneous premature birth
 - Fetal distress
 - In severe cases, stillbirth
- Stillbirth rates worldwide have been quoted as being as high as 20%. A recent study in the UK has shown that when bile acids rise above 40 $\mu\text{mol/L}$ the risk of stillbirth ranges from 1.5% to 4.5%. However, this risk may be reduced if the baby is born before 37–38 weeks
- Researchers are trying to establish why bile acids may be the cause of stillbirth. Until this happens most experts recommend regular bile acid testing with rapid results.
- Women with the condition have a higher risk of developing gallstones and some may already have them at the time of diagnosis.
- Researchers have now started to question the long-term consequences for mother and baby – for example, it may slightly increase the woman's (and her child's) risk of developing diabetes and/or cardiovascular disease in later life.

