

A close-up photograph of a baby's foot, showing the heel and the arch. The skin is pinkish-red and has a visible texture. The background is blurred, suggesting a clinical or hospital setting.

Heel prick
for new-born babies

rivm

General information
for parents



This brochure explains about the heel prick.
You can learn about the process and what to do if you want more information.

Heel prick for new-born babies

What it is for

In the first week after your child is born a little blood is drawn from its heel. This is called the heel prick (hielprick). The blood is tested in a laboratory for a number of rare hereditary disorders.

The heel prick is important as early detection of these rare disorders can prevent or limit extremely serious harm to your child's physical and mental development.

The disorders cannot be cured, but with proper care, such as medicine or a diet, they can be managed. So it is in the interests of your child's health that you take part in the examination.

Before the heel prick is carried out you will be asked to give your consent. Participation in the heel prick is voluntary.

The heel prick

A worker from home care, local health services or your midwife will come to your home for the heel prick. They will call you to make an appointment.

S/he will prick the heel of your baby with a small device. A few drops of blood will be taken on a special card: the heel prick card.

Children don't enjoy the heel prick. It may even make your baby start to cry.

If your child is in the hospital, the heel prick will be carried out there.

Result

If the result is normal, you will NOT receive a report.

If you have not heard anything within three weeks of the heel prick, the result was normal.

If the result is abnormal, you will hear from your GP.

Sometimes the amount of blood taken is too small for the examination. In this case the heel prick has to be carried out again. This is a 'repeat first heel prick'. Occasionally the result is not clear; then a second heel prick is needed.

A second heel prick usually takes place within two weeks of the first. You will ALWAYS hear about the result of the second heel prick within three weeks of the second heel prick, whatever the result.



What disorders is the blood tested for?

The blood from the heel prick is tested for various disorders. These include thyroid disorders, disorders of the adrenal gland, a blood disease (sickle cell disease) and a number of metabolic disorders. Most of these are hereditary. Fortunately they are not common.

Do you want to know more about these disorders?

Go to: www.rivm.nl/hielprik. You can find a brief description of the disorders there. The disorders cannot be cured, but with proper care they can be managed.

At www.rivm.nl/heel prick you can watch a short film about the heel prick.

Heredity

If the screening reveals that your child has a disorder, this usually means that the parents are carriers of the disorder. Carriers do not have the disorder themselves. However, being a carrier may affect any subsequent pregnancy. Your obstetric assistant can tell you more about this. You can also visit the website www.erfelijkheid.nl.

Sickle cell carriers

One of the diseases that is screened for is sickle cell disease. Sickle cell disease is a severe form of hereditary anaemia. The heel prick may also reveal that your child is a carrier of sickle cell disease. If it reveals that your child is a carrier of sickle cell disease, this means that one or both parents are also carriers of this disorder. This may have consequences for the health of any future children. The fact that your child is a carrier of sickle cell disease may also be of importance to other family members, as they may also be carriers.

If your child is a carrier of sickle cell disease, your GP will contact you. If you do not want to hear if your child is a carrier of sickle cell disease, please tell the person carrying out the heel prick. Your choice will be noted on the heel prick card.





What happens to the heel prick blood?

After the heel prick, the drops of blood are stored for one year in a laboratory. This is because it is occasionally necessary to review the test. After this, the RIVM may still use the blood for scientific research for four years. This is necessary to prevent diseases and improve treatments. The scientific research is anonymous. However if the researcher wants to make use of the personal details of your child, you will ALWAYS be asked for your consent.

If you object to the blood being made available for scientific research, you may say so to the person who carries out the heel prick. S/he will ask you to initial the heel prick card. If you do not consent to the scientific research with the residual blood, the blood will be destroyed one year after it is taken.

What else you need to know

Registration of birth

Registration of the birth at the local Burgerlijke Stand (similar to the Registrar's Office) is the starting point for the heel prick. Therefore it is important to register the birth as soon as possible, and no later than three working days after the birth. Remember that the Population Affairs Departments are closed on Saturdays, Sundays and national Bank Holidays.

No heel prick within eight days?

Your child has not had a heel prick and it is more than eight days since the birth? Please contact the RIVM-RCP. You can find the telephone numbers on Page 9.

Costs

There is no cost to you for the heel prick.

Not 100% certain

There is always a chance that the laboratory test shows that the blood is abnormal, but a follow-up examination in the hospital shows that the child does not have the disorder. There is also a small chance that the laboratory test shows that the blood is not abnormal, but the child does have the disorder.

The heel prick is used to look for a number of disorders. It does not however guarantee that your child has no other problems.

Are you uncertain about the health of your child? Please contact your GP.

Contact your GP as soon as possible after registering the birth of your child,
and no later than three working days after.



Combination with hearing test

In the Netherlands the heel prick is often combined with a hearing test for your child. In some child health care organisations in Gelderland and Zuid-Holland you have to go to the health centre for the hearing test. In this case you will receive an invitation to an appointment. The hearing test involves a soft bud being put in your child's ear. The bud makes a soft rattling noise. It does not hurt. The result of the hearing test is available immediately.

Privacy

Your details and those of your child are handled carefully. All personal details and the medical details of the blood test are recorded in a database. This database is subject to the Dutch Data Protection Act. The details will only be used for the purpose for which they were provided. On request you may view your details at an RIVM-RCP. See Page 9 for the telephone numbers.

Complaints

Do you have a complaint about how the heel prick carried out? Please contact the organisation that carried out the heel prick. Do you have a complaint about the heel prick in general?

At www.rivm.nl/contact you can find information about how we handle complaints.

More information

- You can find more information about the heel prick at the website of the RIVM: www.rivm.nl/hielprik. You can also watch a short film about the heel prick screening here.
- You can find more information about the hearing test at the website of the RIVM: www.rivm.nl/gehoorscreening.
- You can ask your obstetric assistant any questions you may have about the heel prick.

RIVM Regional Coordination Programs:

RCP North:

Groningen, Friesland and Drenthe **050 - 368 63 50**

RCP East:

Overijssel and Gelderland **0570 - 66 15 20**

RCP Mid-west:

Utrecht, Noord-Holland and Flevoland **0346 - 55 00 40**

RCP South-west:

Zuid-Holland **079 - 341 82 38**

RCP South:

Zeeland, Noord-Brabant and Limburg **040 - 232 91 11**

English In the first week after birth, children are tested for congenital disorders. This is done by drawing some blood from your child's heel. This test is known as the heel prick (hielprik). In this leaflet you will find more information about the test. This leaflet has been translated into English. You can find the English translation on www.rivm.nl/hielprik.

Français Un test de dépistage de affections congénitales est effectué chez les nouveau-nés au cours de la première semaine qui suit leur naissance. Cet examen est fait par prélèvement de quelques gouttes de sang au talon de l'enfant. Cet examen est appelé en néerlandais test de la piqûre au talon (hielprik). Cette brochure contient de plus amples informations sur cet examen. Cette brochure est traduite en français. Vous pouvez trouver la brochure traduite sur le site internet: www.rivm.nl/hielprik.

Deutsch In der ersten Woche nach der Geburt werden Kinder auf angeborene Erkrankungen hin untersucht. Dazu wird dem Kind Blut aus der Ferse abgenommen. Diese Untersuchung wird Fersenblutentnahme (hielprik) genannt. In dieser Broschüre finden Sie Informationen zu dieser Untersuchung. Die Broschüre wurde in die deutsche Sprache übersetzt. Die Übersetzung der Broschüre finden Sie unter www.rivm.nl/hielprik.

Türkçe Yeni doğmuş bebeklere, doğuştan gelen bozuklukların teşhis edilmesi için bir test yapılır. Doğumdan sonraki ilk hafta içinde yapılan bu test için bebeğin topuğundan birkaç damla kan alınır. Zaten bu uygulamaya da "topuktan kan alma" (Hollandaca: hielprik) testi denmektedir. Bu broşürde testle ilgili ayrıntılı bilgi bulacaksınız. Broşürün Türkçe çevirisi vardır. Türkçe metni şu adreste bulabilirsiniz: www.rivm.nl/hielprik.

Español Durante la primera semana tras su nacimiento, se efectúan controles a los bebés para ver si padecen posibles enfermedades. Esto se realiza mediante un pequeño pinchazo en el talón del bebé para recoger unas gotas de sangre. Este control se denomina la prueba del talón (hielprik). En este folleto le ofrecemos más información sobre esta prueba. Este folleto ha sido traducido al español. El folleto traducido lo puede encontrar en www.rivm.nl/hielprik.

عربي في الأسبوع الأول بعد الولادة، يتم فحص الأطفال للتأكد من عدم إصابتهم بعلّة خلقية. وتتم هذه الفحوصات بسحب بعض الدم من كعب طفلك. تعرف هذه الفحوصات باسم وخز الكعب (hielprik). ستجدون في هذه النشرة المزيد من المعلومات حول الفحص. تمت ترجمة هذه النشرة إلى العربية. ويمكنك العثور على الترجمة العربية على موقع www.rivm.nl/hielprik.

Papiamentu Den e promé siman despues di nasementu, ta kontrolá beibinan riba malesa kongénito (malesa ku bo ta nase ku ne). Ta hasi esaki dor di kue poko sanger na e hilchi di e beibi. E investigashon médiko aki yama (hielprik). Den e foyeto aki bo ta haña mas informashon tokante e investigashon aki. A tradusi e foyeto na Papiamentu i bo ta haña e tradukshon na www.rivm.nl/hielprik.

中文

新生兒在出生後一週內，應接受先天性疾病檢查，檢查的方式是從嬰兒的腳跟採集少量血液，一般稱之為“腳跟採血法”（荷蘭文叫做“hielprik”）。在這份宣傳單中，您會找到更多關於這項檢查的資訊。宣傳單的內容已被翻譯成中文。若想查看中文內容，請前往 www.rivm.nl/hielprik。

Português Na primeira semana a seguir ao nascimento, as crianças são testadas em doenças congénitas. Isto é feito através de uma análise ao sangue retirado do calcanhar da sua criança. O teste é conhecido como o teste do pézinho (hielprik). Neste folheto irá encontrar mais informação acerca deste teste. Este folheto foi traduzido para Português. Pode encontrar a tradução Portuguesa em www.rivm.nl/hielprik.



Midwives, gynaecologists, GPs and other obstetric assistants can order additional copies of this brochure from the website www.rivm.nl/pns/folders.

You will receive this brochure from your obstetric assistant around the 35th week of your pregnancy and on registering your child's birth.

This information is issued by the RIVM and has been compiled with the assistance of many experts. The RIVM takes the utmost care to ensure that all information is up-to-date, accessible, correct and complete, however no rights may be derived from the contents.

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