What are the risks associated with the test?

Amniocentesis is an invasive procedure and therefore is associated with some risks to your pregnancy. Therefore you should think carefully before deciding to do this test.

Earlier research from the 1980s suggested that the risk of pregnancy loss after amniocentesis was 1 in 100 or 1 in 200. However, more recent data have suggested that the actual risk of pregnancy loss today is much less than this and is likely to be less than 0.1% of cases (1 in 1000 cases or less).

In about 5% of cases, amniocentesis may cause vaginal bleeding, cramping, infection in the uterus, leakage of amniotic fluid or soreness in your abdomen (1 in 20 cases).

In less than 1% of cases, there is a small chance of injury to the baby, although this is highly unlikely when ultrasound is used during the procedure.

In less than 1% of cases the cells obtained by the amniocentesis will be cells from the mother and not the baby. This may give you a falsely reassuring result.

f you decide to have the optional rapid test, sometimes the test may fail to give a result. Also, sometimes even if the rapid test does not find a problem, the final test may show an abnormality when that result becomes available about 2 weeks later.

It is important to remember that a normal amniocentesis does not guarantee a normal baby, as it cannot exclude all genetic or fetal abnormalities. It is recommended that you have a Fetal Anomaly Scan at 20 weeks to check for other abnormalities.

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CARING FOR GENERATIONS
SINCE 1745

THE ROTUNDA HOSPITAL DUBLIN

Maternity Care

FETAL MEDICINE CENTRE

Amniocentesis

CARING FOR GENERATIONS
SINCE 1745

Maternity Care

What is Amniocentesis?

Amniocentesis is a test in which a small amount of fluid (amniotic fluid) is collected from the pregnancy sac around the baby in the womb. This fluid contains cells from the baby's skin and bladder which can be grown in the laboratory to test for chromosomal problems, like Down syndrome, or DNA abnormalities, like cystic fibrosis.

Who may be offered Amniocentesis?

Amniocentesis is always voluntary and only you can decide if you should have this test. The information below may help you decide whether or not to have this test.

The most common reason to have an amniocentesis is for those worried about the chances that the baby may have a chromosomal problem, like Down syndrome. This might include:

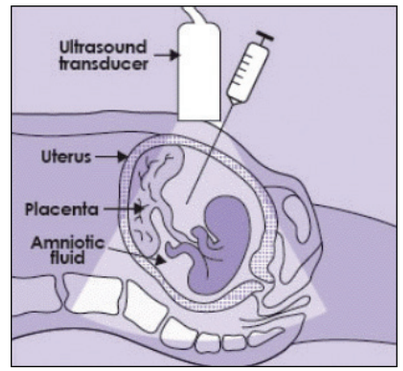
- ***Women with a First Trimester Screening (FTS) test suggesting an increased chance of having a baby with a chromosomal problem.***
- ***Women who are anxious about the risk problems, often because of their age.***
- ***Women who have had a previous pregnancy affected by a serious medical or genetic problem with the baby.***
- ***Where ultrasound findings suggest that there may be a problem with the baby.***

How is the Amniocentesis test performed?

Amniocentesis is performed from 16 weeks onwards. Ultrasound is used to carefully direct a very fine needle through the mother's abdomen, into the womb and then into the amniotic fluid space around the baby, as shown in the picture.

A small amount of this amniotic fluid is then removed. The needle does not touch the baby. The fetal heart rate is checked both before and after the test.

Local anaesthetic is not required as the needle is so thin.



What preparation do I need before the test?

No special preparation is needed before the test. Your bladder does not need to be full. A scan is first performed to confirm the baby's size and the position of the placenta.

It is very important to inform the medical staff at the Prenatal Diagnosis Clinic if you are taking medication such as "blood thinning" agents (Heparin or Aspirin) that may need to be stopped prior to your procedure.

It is important to know what your blood group is before the test. If possible please ask your doctor or midwife to provide this information to you, or bring along your blood donor card. If you have a negative blood group you will also need to have a special injection of "anti-D" after the amniocentesis.

What should I expect after the Amniocentesis?

For the first couple of days after the procedure you may experience some abdominal cramping, like period pains. This is relatively common and in the vast majority of cases is of no importance. You may find it helpful to take painkillers like paracetemol.

If there is a lot of pain or bleeding or if you develop a temperature, please seek medical advice immediately from your obstetrician, midwife, or from the Rotunda Fetal Medicine Centre.

When can I expect my results?

The results for Down syndrome and other major chromosomal problems are usually available within 2-3 weeks. However, if you wish to get your results sooner than this, you can choose to have some of the amniotic fluid sample sent to a special laboratory that can provide some results in 2-3 days. The results for other special genetic conditions may take 2 weeks or longer.

We will call you with your results as soon as they are available.

What if the results are abnormal?

Arrangements will be made for you to receive your results, either by telephone or appointment in the clinic, depending on your preference. Most women who have an amniocentesis will get normal results. However, if the amniocentesis reveals that your baby has an abnormality, we will provide you with full details about what the abnormality means and all the options available to you. You may also have an opportunity to discuss these details with paediatricians or genetic specialists if you and your partner prefer. It is important to remember that you will be offered support, no matter what you decide to do.