



What is amniocentesis?

Amniocentesis is a needle test which involves using a fine needle to remove a small amount of the amniotic fluid around your unborn baby (nothing but the baby's urine).

Amniocentesis is a diagnostic test. For example, it tells you that your baby does or does not have Down syndrome.

When should the test be carried out?

It will usually be carried out between the 16th and 20th week of your pregnancy. However, the test can be carried out later in pregnancy also.

Why am I offered the test?

Amniocentesis is offered if you have received a HIGH- RISK (Screen Positive) result from a screening test for chromosomal abnormalities. This is a diagnostic/confirmatory test with 100% percent detection rate against a small risk of culture failure(< 1%)

You may also be offered a test if:

1. your scan has shown that your baby has an increased chance of having a chromosomal or genetic disorder
2. you or your baby's father may have a higher risk of passing on an inherited abnormality to your baby, for example Sickle cell disease or Thalassemia major
3. you have had a previous pregnancy where your baby was born with a genetic or chromosomal abnormality
4. you or people in your family have been born with abnormalities

How do I decide whether I want to have the test?





It can be difficult to make a decision about having an invasive test. You may find it helpful to talk to your doctor, your friends and family. You may also find it helpful to talk to an emotional counsellor at BFMC.

You should remember that only you can decide whether or not you want to have this test.

Is there a risk to my pregnancy if I have the test?

Any invasive test may increase the risk of you having a miscarriage. The overall risk of you having a miscarriage after amniocentesis is about 1:300 (BFMC outcomes data base). In other words, about one in every 300 women who have an amniocentesis will miscarry.

What are the precautions to be taken after the test?

It is safe to eat and drink as normal before and after the test. You can take your routine pregnancy supplements after the test and can join work immediately the next day.

How is amniocentesis done?



An hour before the test, you will receive a test dose followed by a full dose of an antibiotic (One dose only) to cover infections.



Under utmost sterile precautions and continuous ultrasound guidance, a fine needle is inserted through your skin, through your abdomen and into your womb and a small sample (20 ml) of the amniotic fluid surrounding your baby. Because the needle is so fine, local anesthetic is not usually used.

Is an amniocentesis painful?

Most women say that having an amniocentesis is uncomfortable rather than painful like a period pain. You may notice some cramping for a few hours afterwards. This is normal. You can take paracetamol for any discomfort. If you experience any unusual symptoms immediately after the test or over the next few days for example, feeling shivery or feverish, have started leaking fluid or bleeding or have contractions, you should call us or your doctor (or both) straight away.

What happens after the amniocentesis?

After the test, the sample of amniotic fluid will be sent to the Genetics laboratory. Two types of laboratory test are used usually to look at your baby's chromosomes - 'FISH' (Fluorescent in-situ hybridization) for testing for five major chromosomes and a 'full karyotype' which checks all your baby's chromosomes.

The FISH result is available in a weeks time. A full karyotype is usually ready within three to four weeks. As the full karyotype test is more detailed, it can sometimes take more time to get the results.