Coombe Women & Infants University Hospital
Excellence in the Care of Women and Babies
Foirfeacht i gCúram Ban agus Naíonán

AMNIOCENTESIS

INFORMATION GUIDE FOR PATIENTS

Amniocentesis is a test usually carried out to examine a baby's chromosomes, most commonly in search for Down Syndrome.

Amniocentisis is always voluntary and parents can decide if they would like to have this test. The information below may help you decide whether or not to have this test.

What is amniocentesis?
Amniocentesis is the withdrawal of a small amount of fluid from around the baby. This is called amniotic fluid. Cells from your baby's skin and bladder are in the fluid and can be grown in the laboratory for chromosome analysis. Chromosomes are essentially ways of carrying and passing on genes. Our genes dictate what we look like and everything about us.

Normally in each human cell there are 46 chromosomes. These are divided into pairs so that we have 22 pairs and two single chromosomes, which dictate what sex we are. A missing, or an extra, chromosome causes many changes in the way an unborn baby develops. For example, an extra no 21 chromosome causes Down Syndrome and amniocentesis is able to detect this.

Amniocentesis also detects other chromosome abnormalities and certain genetic conditions when there is a family history of such a disease.

How is amniocentesis performed?
Amniocentesis is generally performed from 16 weeks' gestation up to the date the baby is due. An ultrasound scan will be done first to check the position of the baby/placenta and to find the pocket of amniotic fluid.

The skin on your tummy is cleaned with anti-septic fluid and a very fine needle is passed through your tummy and into the womb. A small amount of fluid from around the baby – amniotic fluid- is withdrawn. The needle is carefully watched with the ultrasound scan to ensure that it is in the correct position.

The test lasts two or three minutes and afterwards the baby's heartbeat is checked. Local anaesthetic is not usually used as the insertion of the anaesthetic is usually more uncomfortable than the test itself.

Occasionally it may be necessary to pass the needle into your tummy a second time.
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If your blood group is Rhesus negative you will require an injection of Anti-D to prevent blood incompatibility developing between you and the baby as a result of the amniocentesis test.

What should I expect after amniocentesis?
For the first few days you may experience some tummy discomfort, period-like pain or a little bleeding. These are relatively common and in the vast majority of cases, the pregnancy continues without a problem. You may find it helpful to take some simple pain relief like Paracetamol, which is safe in pregnancy, and rest for a few hours. If you have a lot of pain or bleeding, please seek medical advice.
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When can I expect the results?
Results of the tests are usually available in 2-3 weeks. This is because the cells have to grow before they are examined. After amniocentesis we will make an arrangement to contact you with the results as soon as we obtain them from the National Genetics Centre in Our Lady's Children's Hospital, Crumlin. Most people are happy to receive the result over the 'phone but if you wish to have your result in person, this can be organised.

The full result will also tell you whether you are expecting a girl or a boy, so you may want to give some thought whilst you are waiting for the result if you would prefer not to know the sex of your baby.

If you have not heard from us after three weeks, please contact us. Rarely - less than 1% - is a result not obtainable from the amniocentesis test because the cells have failed to grow in the laboratory. If it should happen, the amniocentesis may have to be repeated

What are the risks associated with this test?
One in two hundred women who have an amniocentesis test will experience a miscarriage. Unfortunately, there are no ways of predicting who will miscarry.

The result will clearly state whether your baby is affected with Down Syndrome or not with a high degree of accuracy – 99%.

A result that says that your baby does not have Down Syndrome does not guarantee that your baby is entirely normal. If there were, by chance, a genetic condition such as cystic fibrosis, or a structural defect such as congenital heart disease, these would not be detected on amniocentesis

Where can I find out more?
For further information, you may find these websites of value.

www.rcog.org.uk . Look under patient information.

www.downsyndrome.ie

www.arc-uk.org

www.softireland.com.

If you have any comments on this leaflet, please let us know by emailing info@coombe.ie.

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This version produced June 2007