AMNIOCENTESIS

Amniocentesis is a diagnostic procedure carried out during pregnancy. It is most commonly used to check the baby’s chromosomes. Amniocentesis is occasionally performed to test for other disorders in pregnancy such as infection or genetic disorder. The tests look for substances in the fluid itself, rather than at the baby's chromosomes. Amniocentesis is performed after 15 weeks.

You do not usually need a local anesthetic. Before the procedure, gel is applied over your abdomen. You are scanned to check the positions of both the baby and the placenta (afterbirth). Your skin is then cleaned where the needle will be inserted. Using an ultrasound probe for accurate guidance and to ensure a safe distance from the baby, a fine needle is pushed into your skin, through your abdomen and womb. A small sample of the fluid surrounding the baby is removed using a syringe. The needle is then taken out and the baby is checked on ultrasound. The amniotic fluid, which contains some of the baby's cells, is sent to the laboratory for testing.

Who should consider amniocentesis?

Women may consider amniocentesis if they:

- have received a high-risk screening result from a blood test for Down syndrome.
- have received a result from a scan which shows certain features, such as fluid collection at the back of the baby’s neck (nuchal translucency), or fetal anomaly which indicates the baby may have a chromosomal abnormality.
- have had a previous pregnancy affected with a disorder.
- have one or more relatives affected with a genetic disorder.

Is amniocentesis painful?

Most women say that having amniocentesis is uncomfortable rather than painful, a bit like a period pain. Women describe a sharp stinging feeling when the needle goes in and a feeling of pressure when the needle comes out. After the procedure you should rest for the rest of the day.
You may notice some ‘spotting’ of blood and cramping for a few hours afterwards. This is normal. **If you experience any unusual symptoms immediately after the test, such as having a temperature, fluid loss, bleeding or contractions you should seek advice immediately.**

**What are the risks?**
Every pregnancy carries a risk of miscarriage.

As amniocentesis involves putting a needle through the wall of the womb, it may sometimes cause a miscarriage due to injury or infection in the womb. The additional overall risk of miscarriage from amniocentesis is approximately 1%.

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**Key Points**

- **Amniocentesis** is a procedure in which a small amount of the amniotic fluid surrounding the baby in the womb is removed by passing a fine needle through the mother's abdomen.
- One of the main reasons amniocentesis is used is to detect whether or not a baby has a chromosomal disorder, such as **Down syndrome**.
- The safest time to have amniocentesis is after **15 weeks of pregnancy**.
- About 1 in every 100 women (or 1%) who has amniocentesis from 15 weeks of pregnancy under ultrasound guidance **miscarries** as a result of the procedure.
- Amniocentesis is usually offered to women who have an increased chance of having a baby with a **disorder**.
- If a disorder is diagnosed, then you should be given information and the opportunity to discuss this with a **specialist**.
- You will be asked to sign a **consent** form before having amniocentesis.