

## Amniocentesis

### What is amniocentesis?

Amniocentesis is a procedure usually performed between 15 -17 weeks of pregnancy. It is used to gather a small sample of the amniotic fluid surrounding the unborn baby (fetus) so that diagnostic testing may:

- Determine genetic information (fetal karyotype) about the fetus
- Help detect conditions such as Down's syndrome and spina bifida, cystic fibrosis and sickle-cell anemia
- Assess fetal lung maturity

### What happens during the procedure?

The position of the fetus, placenta and amniotic fluid pocket is located by ultrasound. Once the optimal position is established, a fine needle is passed through the mother's lower abdominal wall and into the uterus. About 15-30 milliliters (or one to two teaspoons) of amniotic fluid is withdrawn. Some women experience mild uterine cramping and pressure sensation at the time of the procedure. The procedure lasts only a few minutes.

### What can the results tell me?

Amniocentesis is a diagnostic test and answers the question: "Does my baby have a major chromosome problem?" with a "yes" or a "no". However, it does not guarantee a normal pregnancy outcome. It provides information regarding major chromosome abnormalities. Not all chromosome abnormalities are tested. Special testing has to be requested if a specific gene is to be tested for a genetic condition.

### What are the risks involved?

Some risk is associated with any invasive (into the body) procedure. The risk for fetal loss (miscarriage) among the general population is estimated to be about 3%. The increased risk of miscarriage after amniocentesis is estimated to be one in every 400 procedures, or 0.2% above the general loss risk. Thus, the total risk for miscarriage is estimated at 3.2%. Each pregnancy is special and your health care provider will be best able to tell you your specific risk.

*Leakage of amniotic fluid, spotting or cramping* - During the first 12 hours following the procedure, leakage, spotting or cramping may occur. However, these symptoms usually settle with rest. If these problems continue or become progressively worse, call your doctor or go to the nearest emergency room.

*Infection* - Infection following the procedure is extremely rare. At the time of the procedure, the risk of infection is estimated to be one to two in 3000 procedures. However if you develop fever, have chills, cramps or bleeding call your doctor immediately.

*Injury to Baby* - Fetal injuries are extremely rare. However, there is a very small risk of the needle touching the baby.

*Repeat testing* - A repeat amniocentesis may be required if sufficient fluid cannot be obtained at the time of amniocentesis or if a technical problem occurs in the laboratory. These incidents occur rarely and do not necessarily indicate a problem with the pregnancy.