Amniocentesis

What is an amniocentesis?

We do an amniocentesis (say *am-nee-oh-sen-tee-sis*) to take a small sample of the fluid that surrounds your baby in the womb (uterus). Many people refer to this test as an “amnio”.

Why would I have an amniocentesis?

The results can tell us about a baby’s health before it is born.

Reasons for an amniocentesis:

- **Check for genetic conditions.** We can test the cells in the fluid for certain genetic conditions.
- **Check for infection** or other health conditions.
- **Drain extra fluid from the uterus**. We might do this when there is a buildup of too much fluid around the baby. The condition is polyhydramnios (say *poly-hi-dram-nee-os*).
- **Check baby’s lungs.** If the plan is to deliver early, we might do this test to make sure a baby’s lungs are mature enough for birth.

What is a genetic amniocentesis?

A genetic amniocentesis can rule out or confirm some conditions caused by changes in genes or chromosomes, such as Down syndrome. Unfortunately, it cannot identify all genetic conditions or birth defects.

We usually offer a genetic amniocentesis to a person if the results might affect how they manage the pregnancy. You decide if you want to proceed with one. Your doctor, nurse practitioner, midwife, or genetic counsellor can give you information to help you decide.

We usually do a genetic amniocentesis between the 15th and 20th week of pregnancy. Doing it earlier than 15 weeks increases the risks to the unborn baby and the pregnancy.

Reasons to consider genetic testing:

- **A positive screening blood test**

  You might have had a screening blood test early in the pregnancy. A positive result means the blood test showed there is a chance of a problem with the baby’s health. The amniocentesis might confirm or rule out the presence of a genetic condition.

- **A previous pregnancy or child affected by a genetic condition**

  The amniocentesis looks for that same problem in the current pregnancy.

- **Being 40 years or older**

  Babies born to people 40 years and older are more likely to have changes in chromosomes, resulting in conditions, such as Down syndrome.

- **Family history or parents are known carriers of a genetic condition**

  Along with chromosome changes, an amniocentesis can be used to confirm other genetic conditions, such as cystic fibrosis.

- **Unusual ultrasound findings**

  An amniocentesis might be suggested when something unusual is seen on an ultrasound.

Are there risks to having an amnio?

While serious problems are rare, some people might have complications from this test. Before you decide to have an amniocentesis, it is good to know what risks there are.

- **Miscarriage**

  If you have an amniocentesis between 15 and 20 weeks of pregnancy, there is a slight chance of a miscarriage (less than 1 in 200).If you have an amniocentesis before 15 weeks of pregnancy, the changes of a miscarriage are higher.

- **Infection in the uterus**

  There is a chance of infection any time the skin is pierced or cut. With an amniocentesis, a needle goes through the skin and uterus.

- **Passing infection to baby**

  If you have an infection like hepatitis, HIV, or toxoplasmosis, it could pass to the baby during the amniocentesis.

- **Blood Rh problems**

  During the amniocentesis, some of your blood and your baby's blood could mix, though this rarely happens.

  If your blood type is Rh-negative, we will explain the possible problems. We will offer you an injection after the amniocentesis to decrease the chances of any problems happening.

Is there anything I need to do to prepare?

Usually, there is nothing special you need to do to prepare. Sometimes, we might ask birth parents to go for a blood test either before or after the amniocentesis.

It is best to have someone come with you to the appointment for emotional support and to drive you home afterwards.

While we believe in family-centred care, we ask that children not be present during the test. If children do come with you, have an adult come with you to be with your children in the waiting area.

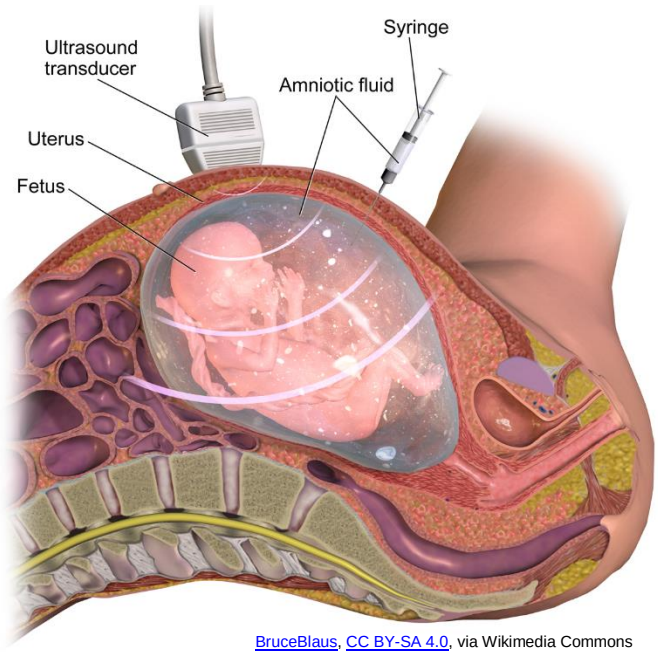
How is the amnio done?

Here is what happens:

- You lie on your back.
- We use ultrasound to see where the baby (fetus) and placenta are in the uterus.
- We clean your belly with antiseptic wipes to kill any germs on your skin.
- Using the ultrasound to guide us, we put a long thin needle through your skin and uterus into the amniotic sac that surrounds the baby.
- We take a small sample of fluid using a syringe attached to the needle.
- We remove the needle.
- We use the ultrasound to check your baby's heartbeat.

You need to lie still while we use the needle and take the sample of fluid. You will feel a sting as the needle enters your skin. You might feel some cramping as the needle enters the uterus.

If you are pregnant with more than one baby, we might use more than one needle to take samples of the fluid from around each baby.



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What can I expect after the amnio?

For the remainder of the day:

- Rest.
- Try not to lift any heavy objects, including children.
- Do not do any strenuous exercise or have sexual intercourse.

You can return to your regular daily activities the day after the amniocentesis.

It is normal to have some cramping or spotting (light vaginal bleeding) for 24 to 48 hours afterwards. It is safe to take these actions if needed for pain:

- Take regular strength acetaminophen (Tylenol® or store brand).

  Note: Do not take ibuprofen (Advil® or store brand) in pregnancy.
- Put heat on your belly.

When would I need to get medical help?

Watch for these signs:

- a fever over 38.5°C (101.3F)
- pain that does not go away with pain medicine
- strong cramping or contractions
- bleeding more that spotting
- clear fluid coming from your vagina

If you notice any of these signs, contact us right away:

Monday to Friday *8:00 a.m. to 4:00 p.m.*	**Maternal Fetal Medicine** **604-582-4558** **extension 763995** Ask to speak to a nurse.
After hours, weekends, and statutory holidays	Surrey Memorial Hospital **Obstetrician on call** **604-897-2161**

When will I know the results?

Some results are ready within a few days while others can take a few weeks.

We will contact you when we have the results. We will help you understand the results and options for the pregnancy.

Your family doctor, midwife, or nurse practitioner will also get a copy of the results. You might want to talk with them or a genetic counsellor about the results and options as well.

Sometimes we need to do the amniocentesis again. This could be for any of these reasons:

- We did not get enough fluid the first time.
- The cells in the fluid failed to grow in the laboratory.
- The results were not clear.

We will contact you if we need to repeat the test.