Saint Mary's Hospital
Fetal Medicine Unit

Information for Patients

Amniocentesis

When the baby is in the womb it is surrounded by a liquid called 'amniotic fluid'. This fluid contains cells that have the same chromosomes as your baby. This means that we can use a small amount of this fluid if we want to check the chromosomes of the baby.

How is the amniocentesis done?

An amniocentesis is done by passing a fine needle through the mother's abdominal wall into the fluid around the baby. We watch the needle carefully on ultrasound scan all the time to ensure that it is correctly positioned in the fluid. We then take 15-20mls (three to four teaspoons) of fluid and send it to the laboratory. The procedure only lasts for a few minutes. Very occasionally we do not get enough fluid at the first attempt and the needle needs to be inserted again.

Does it hurt?

Not much. You feel a prick as the needle goes through the skin. This is similar to the prick you feel when having a blood test. Once the needle is inside there is some vague discomfort, but not pain, and it only lasts for a minute or two.

What should I do after an amniocentesis?

For the first day or two you may have some crampy pain, like mild period pain. You may find it helpful to take paracetamol – it is safe to take paracetamol in pregnancy. We advise you to take things easy for the first day or two. Take a couple of days off work and avoid doing housework. If you have a lot of pain, any bleeding or if you lose any fluid you should contact your local hospital. Although we use sterile equipment and antiseptics during the test there is always a small risk of introducing infection. If you develop flu like symptoms or get a smelly vaginal discharge within three weeks of the test you should see your family doctor (GP) or the doctor at your local hospital.

When will I get the results?

The three most common chromosome problems, Down's syndrome, Edward's syndrome and Patau's syndrome will be checked for in 2-3 working days. We will contact you when

this first part of the test is available. The laboratory staff then continue to check the other chromosomes and it takes approximately two weeks to get the final result on all the chromosomes. If the sample is blood stained, it will not be possible to do the rapid test. We will discuss with you how you would like to be informed of the result. Many women like to be telephoned with the results as this is the quickest way of getting the results.

Will the procedure need to be repeated?

If we only get a very small sample, or if the sample is blood stained the result may take longer. Occasionally the cells from the sample fail to grow in the laboratory. Both the local and national risk of this happening is approximately 1 in 200. But if it does happen the test would have to be repeated if you so wished.

How accurate is the test?

The test is very accurate – over 99%. However, it is not 100% accurate.

What are the risks associated with the test?

There is a small risk of miscarriage associated with the test. Following a large review of our figures, the risk of miscarriage in our unit is 1 in 100. The national risk is 1 in 100. Unfortunately, if a woman miscarries there is no way of knowing whether this was due to the test or whether it would have happened anyway, even if she hadn't had the test. Studies have suggested that if an amniocentesis is carried out before 14 weeks of pregnancy there is an increased risk of miscarriage. To avoid this risk we do not perform the amniocentesis test before 14 weeks of pregnancy.

Why do you need to know my blood group?

Some women are Rhesus blood group negative. It is important that we give these women an injection after the test to prevent complications related to this blood group. If you are Rhesus positive then you don't need an injection.

Further information

If you have any further questions about the test please contact the Screening Co-ordinator Midwife on:

(0161) 276 6081

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