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Genetic Conditions and Complications of Amniocentesis

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Description

Amniocentesis is a procedure that is used to extract amniotic fluid and cells from the uterus for testing or treatment. During pregnancy, amniotic fluid surrounds and protects the baby. Genetic amniocentesis can reveal details about the baby's genes. In general, genetic amniocentesis is recommended when the test results may affect how the pregnancy is managed. Typically, genetic amniocentesis is performed between weeks 14 and 20 of pregnancy. Amniocentesis performed before week 14 of pregnancy may result in additional complications. The fetus develops inside the amniotic sac during pregnancy. Inside the amniotic sac, amniotic fluid surrounds and protects the fetus. It also contains cells from the fetus. These cells contain genetic information that aids in the diagnosis of genetic disorders.

Amniocentesis is typically performed between the 15th and 20th weeks of pregnancy, but it can be performed later if necessary. It can be done earlier, but this increases the risk of amniocentesis complications and is usually avoided. During the test, a long, thin needle is guided by an ultrasound image through the abdominal wall. The needle is inserted into the amniotic sac that surrounds the baby, and a small sample of amniotic fluid is extracted for testing. Amniocentesis is a screening test. Prenatal screening tests for genetic disorders differ from diagnostic tests. There are no risks for baby from prenatal screening tests, but they do not diagnose problems. They can only indicate whether or not the baby has a medical problem.

Having positive prenatal screening test results Amniocentesis may be used to confirm or rule out a diagnosis if the results of a screening test, such as the first-trimester screen or prenatal cell-free DNA screening, show a high risk or are concerning. An earlier pregnancy was hampered by a genetic condition. A doctor may recommend amniocentesis to check for that condition. Babies born to people aged 35 and up are more likely to have chromosomal conditions such as Down syndrome. If prenatal cell-free DNA screening is positive, a health care provider may recommend amniocentesis to rule out these conditions. Having a family history of a genetic condition or being a carrier of a genetic condition Amniocentesis can be used to diagnose other genetic conditions, such as cystic fibrosis, in addition to identifying Down syndrome. Ultrasound are unusual amniocentesis may be recommended by a doctor to diagnose or rule out genetic conditions associated with unusual ultrasound findings.

Complications of amniocentesis

Amniocentesis has some risks, but they are uncommon. Complications could include Amniotic fluid leakage: Amniotic fluid leakage from the vagina can occur after amniocentesis. Most of the time, there is only a minor amount of fluid leakage that stops on its own shortly after the procedure. In rare cases, leakage may continue. There is an increased risk of pregnancy complications, including preterm delivery, in these rare cases. The risk of these complications is usually determined by the amount of fluid that remains around the fetus.

Injury to the foetus: There is a very small increased risk of foetal problems developing as a result of amniocentesis. Clubfoot, hip dislocation, and lung problems are all possibilities. Before undergoing amniocentesis, discuss these risks with doctor.

Infection: A chronic infection, such as HIV or hepatitis, effects the foetus may become infected as a result of the amniocentesis. The risk is very low, but one of these infections.

Miscarriage: Amniocentesis has a very low risk of miscarriage (less than 3 in 1000).

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