

PATIENT INFORMATION

*Advice regarding
your 12 week scan*

Nuchal Translucency



YOU'RE IN SAFE HANDS

A Few Facts . . .

- The vast majority of babies are born normal.
- All women, whatever their age, have a small risk of delivering a baby with physical and/or intellectual impairment.
- In some cases the impairment is due to a chromosome abnormality such as Down's Syndrome (Trisomy 21).
- The programme will only accept foetuses with a crown rump length between 4.5 and 8.3cm ie within the 11+2 days – 13 weeks 6 days period. Optimal time for this scan is 12–13 weeks.
- The scan gives an estimate of the risk for Down's Syndrome. To know for sure whether or not the foetus has a chromosomal abnormality, an invasive test is needed (chorionic villus sampling or amniocentesis).
- However, invasive tests carry a small risk of causing miscarriage (1%).
- The early scan allows detection of some, but not all, physical defects. A further scan at 19–20 weeks is recommended.

Risk for Down's Syndrome

The table to the right shows how the chance of having a baby with Down's Syndrome increases with age.



The First Trimester Scan

At the 12 week scan we confirm that the foetus is alive and we assess the gestational age by measuring the crown-rump length. We can look for major physical defects, measure nuchal translucency thickness and calculate your baby's chance of Down's Syndrome based on the scan findings and your age. Occasionally the foetus is not well seen on the abdominal scan and it may be necessary to perform a transvaginal scan.

Assessment of Risk

The nuchal translucency thickness measures the soft tissue at the back of the neck of the foetus. Findings in more than 100,000 pregnancies have shown that most foetuses have some fluid that can be seen. If there is more than the normal amount, the risk of a chromosome abnormality is increased. We use a computer program that combines that foetal nuchal translucency thickness and your age to calculate an estimate of your baby's risk.

What Next...

You may choose to have maternal blood serum screening at 9-13 weeks of gestation. This will give you a combined estimate of the risk for Down's Syndrome based on biochemical markers in your blood. The results will then be added to your Nuchal Scan. The first trimester scan allows us to identify most serious physical defects, but we recommend that all women have a 19-20 week scan, when the baby's anatomy can be seen more clearly.



Maternal Age Risk of trisomy 21 (*Downs Syndrome*)

YEARS	AT BIRTH	AT 12 WKS
20	1 in 1526	1 in 1018
25	1 in 1351	1 in 901
30	1 in 894	1 in 596
32	1 in 658	1 in 439
34	1 in 445	1 in 297
36	1 in 280	1 in 187
38	1 in 167	1 in 112
40	1 in 96	1 in 64
42	1 in 55	1 in 36
44	1 in 30	1 in 20

For more information please visit our website

www.hamiltonradiology.co.nz



Your Decision

Depending on the estimated risk you may be happy to continue without further testing, or you may feel that you want a more definite answer.

These decisions are best made after consultations with your LMC.

INVASIVE TESTS

Amniocentesis (15–17 weeks)

This involves passing a thin needle into the uterus and removing a small amount of amniotic fluid from around the foetus. The needle is carefully watched using Ultrasound to make sure it does not injure the foetus.

Chorionic Villus Sampling (10–12 weeks)

This is an alternative test, which tests the cells from the placenta.

These cells can be used to check the chromosomes of the baby.



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