


The risk of bearing a child with a non-hereditary genetic defect such as Down syndrome is directly related to a woman's age—the older the woman, the greater the risk. Thirty-five is the recommended age to begin amnio testing because that is the age at which the risk of carrying a fetus with such a defect roughly equals the risk of miscarriage caused by the procedure—about one in 200. A simple blood screening, usually conducted around the fifteenth week of pregnancy, can determine the AFP levels in the mother's blood. Levels that are too high or too low may signal possible fetal defects. Amniocentesis is generally performed during the sixteenth week of pregnancy, with results usually available within three weeks. Find out the risks and benefits of amniocentesis, when and how amniocentesis is done, and which disorders and defects this prenatal test can detect. Amniocentesis is a prenatal test that is done to determine whether a baby has certain genetic disorders or a chromosomal abnormality, such as Down syndrome. It's usually done between 15 and 20 weeks of pregnancy, but it can be done any time after as well. Just like chorionic villus sampling (CVS), a procedure done in the first trimester, amniocentesis produces a karyotype—a picture of your baby's chromosomes—so that your caregiver can see for sure if there are abnormalities. Prenatal screening for some chromosomal and genetic conditions is offered during pregnancy to provide the woman with more information about her unborn baby. Recommendation 12 In triplet and higher order pregnancies, screening for chromosome conditions should be performed with first trimester ultrasound markers (i.e. nuchal translucency thickness and nasal bone assessment +/- additional markers at 11-13 weeks). Diagnostic testing with amniocentesis or chorionic villus sampling should be recommended prior to definitive management decisions (e.g. termination of pregnancy) in cases of increased chance screening results, including cfDNA-based screening. However, the most recent meta-analysis containing pooled data from 5 studies