

What are the possible results from diagnostic tests?

- ***The babies do not have Down's, Edward's or Patau's Syndrome***

This is the result that most women get

- ***One baby has Down's Edward's or Patau's syndrome***

A very small number of women will learn that one baby is affected and the other is not. They then have the following options:

- Some women will decide to continue the pregnancy and prepare for any challenges they might face bringing up one affected and one non-affected child.
- Other people will decide they do not want to continue the pregnancy and have a termination of the whole pregnancy.
- Others will consider termination of the affected baby with a procedure called selective termination. There is a 5-10% risk that this procedure causes loss of both babies.
- Some people may feel unable to bring up the child themselves and consider adoption.

- ***Both babies have Down's Edward's or Patau's syndrome***

A very small number of women will learn that both babies are affected. They then have the following options and it is entirely their decision to choose.

- Some women will decide to continue the pregnancy and prepare for any challenges they might face bringing up two affected children.
- Other people will decide they do not want to continue the pregnancy and have a termination of both babies.
- Some people may feel unable to bring up the child themselves and consider adoption.

If you are faced with these results you need to make sure you reach the right decision for you. You will be given the opportunity to discuss your options with health professionals, information and support but the decision is yours.

FURTHER INFORMATION: www.antenatalscreening.wales.nhs.uk

Antenatal Results and Choices, www.arc-uk.org

SOFT, www.soft.org.uk (Support for families affected by Trisomy 13 or 18)

Screening for Down's, Edward's and Patau's Syndrome in Twin Pregnancies

All pregnant women are now offered tests for Down's (Trisomy 21), Edward's (Trisomy 18) and Patau's Syndrome (Trisomy 13). These are conditions where one baby or both babies have an extra chromosome. This booklet gives you information about testing when you are expecting twins, so you can decide whether to have the tests.

The screening process is different in twin pregnancy and this leaflet explains it in more detail.

Choosing whether to have the tests is an important decision, for you and your babies. You need to make the decision that is right for you.

Diagnosis of Multiple Pregnancy

You will have been told that you are expecting twins at your ultrasound scan. One of the first things to be looked at is whether your twins share a placenta, monochorionic twins or have two separate placentas, dichorionic twins.

Monochorionic twins (shared placenta)

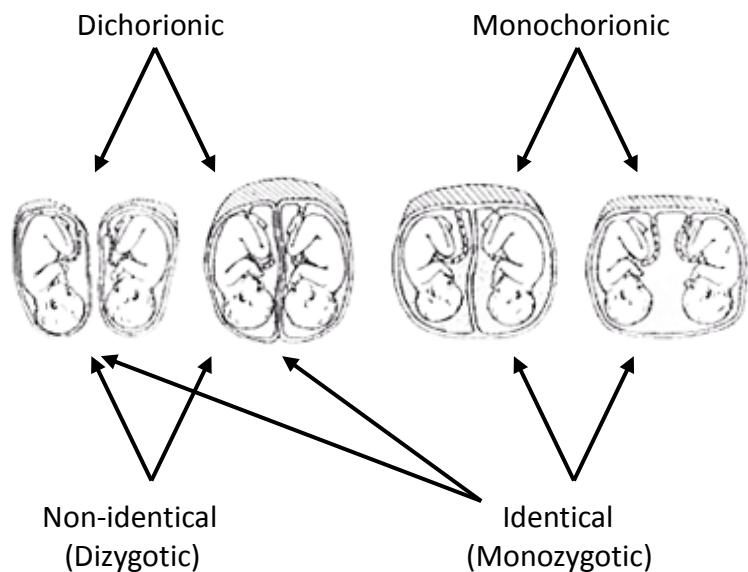
These are identical (monozygotic) twins because they arise from a single fertilised egg, which divides. The babies will be the same sex and both will have the same genes.

Dichorionic twins (each have their own placenta)

These are most often non-identical (dizygotic) as they come from 2 separate eggs fertilised by 2 separate sperm. They are genetically no more alike than other single born brothers and sisters and can be either the same sex or a boy and a girl.

A small number 6% of dichorionic twins are identical (monozygotic). See diagram over.





What screening is offered for a twin pregnancy?

Combined screening, which includes an ultrasound scan between 11⁺²- 14⁺¹ weeks (during which the amount of fluid lying under the skin at the back of each baby's neck is measured – known as nuchal translucency). A computer combines this with the mother's age, the length of the baby and the results of a blood test to work out the risk of each baby being affected by Down's, Edward's or Patau's Syndrome. If you have become pregnant using donated eggs, the approximate age of the woman who donated the eggs will be used to calculate the risk.

If your ultrasound scan is not done before 13 weeks and 6 days then it will not be possible to accurately assess risk for these conditions.

Quadruple testing is not offered in twins, as it is less accurate.

Non-invasive prenatal testing (NIPT) is not currently offered by the NHS for twin pregnancy.

Results of screening in monochorionic pregnancies will be reported as:

A chance of Down's syndrome 1:XXX for the pregnancy and

A chance of Edward's/Patau's syndrome 1:XXX for the pregnancy.

Results of screening in dichorionic pregnancies will be reported as:

A chance of Down's syndrome 1:XXX for each twin and

Combined Screening in Twin Pregnancy.

A chance of Edward's/Patau's syndrome 1:XXX for each twin.

What are the possible results from screening tests?

Lower risk results (chance of affected baby 1 in 151 or less)

Most women will get this result. It is important to remember that this does not mean your babies definitely do not have a syndrome, it means it is very unlikely.

Higher risk results (chance of affected baby 1:5 – 1:150)

A specialist midwife or doctor will discuss the results with you. You will be offered a diagnostic test which would tell you whether either of the babies has Down's, Edward's or Patau's Syndrome or not. If you decide to have a diagnostic test, you will be referred to the specialist Fetal Medicine Unit in Cardiff.

Diagnostic tests offered

Chorionic Villus Sampling, performed from 11-13⁺⁶ weeks. A fine needle is passed through the abdomen and a small sample of tissue taken from the placenta of each baby, if the babies share a placenta only one sample will be taken. There is a 3-4% risk of miscarriage in twin pregnancies, for every 100 women who have the test 3-4 will miscarry.

Amniocentesis can be performed from 15 weeks of pregnancy. A fine needle is passed through the abdomen and a small sample of fluid surrounding each baby (amniotic fluid) will be taken. The fluid contains cells from each baby which will be examined in the laboratory. There is a 2.5% risk of miscarriage in twin pregnancy. This means that for every 100 women who have amniocentesis 2, or 3 will miscarry.