Is it Safe for the Mother to Carry to Term a Baby with a Prenatal Diagnosis?

Yes. Studies have found **no increased medical complications for the mother** associated with carrying to term a baby with a prenatal diagnosis. In addition, many abortions for fetal anomaly are performed at 21 weeks or later, by which time the risk of death from abortion (9 per 100,000) is greater than the normal risk of pregnancy and childbirth (7.5 per 100,000). (3) The mother also avoids the risks to future pregnancies associated with surgical abortion, including premature birth and low birth weight.

Are There Psychological Benefits to Carrying to Term?

Yes. Studies show that mothers who chose to carry their baby to term recover to baseline mental health more quickly than those who aborted due to fetal anomaly. Terminating the pregnancy does not shorten the grieving process or allow parents to put it behind them on the contrary, abortion complicates healing. (3) "Women who terminated [following prenatal diagnosis of a lethal fetal anomaly] reported significantly more despair, avoidance, and depression than women who continued the pregnancy. ...

There appears to be a psychological benefit to women to continue the pregnancy following a lethal fetal diagnosis. (3) (5)

What Help is Available if We Receive a Prenatal Diagnosis?

Receiving a prenatal diagnosis is never easy, but organizations that offer perinatal hospice services can provide invaluable practical, emotional, and, if desired, spiritual support for parents carrying to term. In fact, when perinatal hospice support is offered, 80% of parents choose to carry to term and afterward said they would encourage other parents facing a prenatal diagnosis to make the same choice. (3) Parents are empowered to reframe the experience, honor the life of their child, prepare for a peaceful, natural death with no regrets, and build lasting memories.

Resources:

Prenatal Diagnosis www.prenataldiagnosis.org

Resources and referrals to support

Be Not Afraid www.benotafraid.net

Research on diagnoses and professional training

References:

- James, Susan Donaldson. "Prenatal Tests Have High Failure Rate, Triggering Abortions." NBC News. 14 Dec. 2014. Web. http://www.nbcnews.com/health/womens-health/prenatal-tests-have-high-failure-rate-triggering-abortions-n267301>.
- Nugent, Madeline Pecora. My Child, My Gift: A Positive Response to Serious Prenatal Diagnosis. Hyde Park, NY: New City, 2008.
 Print
- 3) PerinatalHospice.org: http://www.perinatalhospice.org/
- Charlotte Lozier Institute: https://lozierinstitute.org/the-perinatal-hospice/
- 5) Cope, H., Garrett, M. E., Gregory, S., and Ashley-Koch, A. (2015) Pregnancy continuation and organizational religious activity following prenatal diagnosis of a lethal fetal defect are associated with improved psychological outcome. Prenatal Diagnosis, 35: 761–768. doi:

http://onlinelibrary.wiley.com/doi/10.1002/pd.4603/abstract

Distributed by:

For local support, contact:

Written by Bridget Mora for Be Not Afraid ©2023

Prenatal Screening & Diagnosis



What every parent should know to make informed decisions about prenatal care.

What is Prenatal Screening?

Prenatal screening is testing typically offered to expectant parents in the 1st or 2nd trimester of pregnancy. The intent is to determine the probability that the baby has a chromosomal anomaly such as trisomy 21 (Down syndrome), trisomy 18 (Edwards syndrome), trisomy 13 (Patau syndrome), a neural tube defect like anencephaly or spina bifida, or other anomalies.

Common types of prenatal screening include:

- Cell-free fetal DNA testing also called Noninvasive Prenatal Testing (NIPT) screens fetal DNA in the mother's blood for chromosomal anomalies in the baby. Brands include MaterniT21 PLUS, Verify Prenatal Test, Harmony Prenatal Test, and Panorama Prenatal Screen. 10+ weeks
- Fetal nuchal translucency (NT) ultrasound to detect the probability of Down syndrome. 11 – 13 weeks
- Maternal serum blood screening measures 3 - 4 specific proteins and hormones in the mother's blood. May be called a triple screen, quad screen, or multiple marker screening test. 15 – 20 weeks
- Structural ultrasound, also called fetal morphology or anomaly scan, is a sonogram to measure baby's organs and structures. 18 – 20 weeks

Note: Ultrasound is often diagnostic for structural issues; parents must be aware of that in order to give informed consent to routine ultrasounds.

Is Prenatal Screening Diagnostic?

No. Noninvasive screening tests may indicate a probability or risk score that a baby has a chromosomal anomaly. However, a definitive diagnosis can only be made through amniocentesis or CVS (Chorionic villus sampling), invasive tests that carry a slight risk of causing a miscarriage. Unfortunately, parents are not always adequately informed that screening tests are not diagnostic, and they may not fully understand to what they are consenting. Parents may also be unaware that there is no in-utero treatment for the vast majority of conditions that screening attempts to detect.

How Accurate is Noninvasive Prenatal Testing?

NIPT screening tests are name brand tests that are aggressively marketed to both doctors and expectant parents as being up to 99% accurate. However, independent laboratory studies have found that *a positive result from a NIPT can be incorrect 50% of the time or more.* There is also growing evidence that screening tests may deliver "false negatives" – in which the baby does have a chromosomal condition that was not detected. (1)

In addition, NIPTs are not FDA approved or regulated. In 2022, the FDA issued a warning to the public of the risk of false results, inappropriate use, and inappropriate interpretation of NIPT tests. The alert said that manufacturer claims about performance and use may not be based on sound science.

What is the Link Between Prenatal Testing and Abortion?

Most parents undergo prenatal screening or testing with no plan to abort based on the results; however, 80% of parents who are told their unborn baby has a severe congenital anomaly decide to abort. (2)

Pressure to abort quickly is often intense and is frequently couched in euphemisms like saying an early goodbye, early induction, and preventing suffering. Parents may be rushed through the abortion process before they have time to make a sound moral judgment.

Is Prenatal Screening Required? Can We Decline It?

Prenatal screening is optional, and parents may decline it. If considering prenatal screening or testing, parents should ask questions such as:

- What does this test/screen measure? How accurate is it? Is it diagnostic?
- Is it medically necessary or just routine? Why should I have it?
- Would invasive follow up testing be necessary to make a diagnosis? What are the risks?
- Would a prenatal diagnosis impact my care or the care of my baby? (Babies diagnosed prenatally with certain conditions may be declined basic care, such as fetal monitoring during labor and delivery, or extraordinary care, such as certain surgeries at birth.)