BIONEXT
LABORATOIRE D'ANALYSES MÉDICALES

Non-Invasive Prenatal Diagnosis (NIPD)

Screening for trisomy 13, 18 and 21
by analysis of free circulating fetal DNA

What is NIPD?

During pregnancy, the placenta releases detectable fetal DNA into the mother's blood.
If DNA from chromosomes 13, 18 or 21 is present in abnormally high quantities, it means that the fetus has a high probability of having trisomy for one of these chromosomes.

NIPD makes it possible to detect trisomy 13, 18 or 21 in the fetus by a **simple blood test** of the mother-to-be.
It is a test **without any risk for the fetus**.

What are the indications?

NIPD can be performed during each pregnancy in the absence of an ultrasound anomaly.

It is covered by the CNS on medical prescription.

NIPD test does not replace regular ultrasound monitoring of the pregnancy, regardless of the result.

In practice?

This examination will be **prescribed by the gynecologist or midwife** who is following your pregnancy.

NIPD can be performed from the 10th week of amenorrhea (SA), ideally from 12 SA, but it can be prescribed until the end of the pregnancy.

The blood test can be done **without appointment** in all our laboratories and also by appointment at the address of your choice, from Monday to Saturday.

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via bionext.lu/en/rdv

via l'application myLAB (iOS and Android)

You do not need to be fasting.

Bring the prescription, the consultation **certificate and the signed consent form.**

What tests are available?

		Clinical interest	Results
Supported by the CNS	Standard NIPD	· screening for trisomies 13, 18, 21 · indication of fetal sex (on request)	10 days
Not covered by the CNS	Standard NIPD	· screening for trisomies 13, 18, 21 · indication of fetal sex (on request) · detection of sex chromosome aneuploidies	7 days
	Extended NIPD	· screening for trisomies 13, 18, 21 · indication of fetal sex (on request) · detection of sex chromosome aneuploidies · detection of autosomal aneuploidies · detection of imbalances greater than 7 megabases	7 days

What is the performance of the test?

This test is very sensitive (>99.9%) and very specific (99.9%) for detecting trisomy 13, 18 and 21. However, only amniocentesis allows for a definite diagnosis. It will be proposed to you according to the results of NIPD.

How to interpret the results?

The results will be communicated to you by the prescriber.

If the result is negative, it means that the test did not detect fetal trisomy 13, 18 or 21. The usual follow-up of your pregnancy will continue.

If the result is positive, the presence of trisomy (13, 18 or 21) is likely.

A positive result must be confirmed by an invasive prenatal diagnosis such as amniocentesis.

If the result is inconclusive or uninterpretable, it does not mean that the risk of trisomy is important, but simply that due to a technical problem or a too low quantity of fetal DNA, the test has failed. It is then necessary to repeat the analysis on a new sample, usually 14 days after the first test.

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Suivez-nous sur

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