



This information is for you if your fetal anomaly scan has shown that your baby has echogenic bowel

The information applies if echogenic bowel is the only unexpected finding on the scan (known as isolated echogenic bowel).

Every pregnant woman in Wales is offered a fetal anomaly scan when they are between 18 and 20 weeks pregnant. The scan is a way of checking that your baby appears to be developing as expected. This means it may show up unexpected findings that would then need to be checked by other tests.

Echogenic bowel

Echogenic bowel is found in approximately 4 in 1000 (0.4%) fetal anomaly scans performed in Wales.

What is echogenic bowel?

Echogenic bowel (sometimes known as echogenic gut) is where a part of the baby's bowel looks brighter (whiter) than the baby's bones on an ultrasound scan.

It is thought that echogenic bowel is most commonly caused by the baby having some bloodstained fluid in its bowel, probably because the baby has swallowed it. The baby normally swallows amniotic fluid and if there is blood in the amniotic fluid, this will appear brighter than clear amniotic fluid on the scan.

In Wales, when echogenic bowel has been seen as the only finding on the 18 to 20 week scan, about 7 in 10 (70%) babies are born with no other conditions associated with echogenic bowel.

The following are some of the conditions that have been found in babies with echogenic bowel.

- Babies born smaller than would be expected (about 9 in 100 babies (9%))
- Babies born too early (about 12 in 100 babies (12%))
- A higher than expected incidence of stillbirth (about 3 in 100 babies (3%))
- Babies born with cystic fibrosis (2 in 100 (2%))
- Babies born with cytomegalovirus infection (2 in 100 (2%))

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Cystic fibrosis

Cystic fibrosis (CF) is caused by a change to a gene that a baby inherits from both of their parents. Babies with CF have issues digesting food and may have trouble gaining weight. They are also more likely to have frequent chest infections.

Cytomegalovirus

Cytomegalovirus (CMV) is a common virus and belongs to the herpes family of viruses. It is often carried in the air in tiny droplets when someone coughs or sneezes. It can also be transmitted during sex and blood transfusions.

CMV infection in pregnancy may cause issues for the baby such as jaundice, hearing loss, sight loss, epilepsy, dyspraxia (lack of physical co-ordination) and learning difficulties.

What will happen next?

You will be seen by a midwife who specialises in antenatal screening or your hospital doctor (obstetrician) who will explain what care you will be offered next. The hospital midwife and doctor will explain more about the condition and about the tests you can have, how they are done and when you can have them.

Because of these unexpected findings you will be offered an appointment with a fetal medicine consultant. This appointment may or may not be at the hospital where you are booked to deliver your baby.

At this appointment, the fetal medicine consultant will review your ultrasound findings. They will also explain more about the condition, its possible association with other conditions and about further tests you may be offered.

Some women decide not to have these tests. The midwife and doctor will support whatever choice you make. You may have questions to ask the midwife or doctor and may want to have another appointment. You may want your partner or a friend to come with you, and you may want more time to think before you decide what to do next.





You may want to think about what you might do if the test result shows your baby has one of the conditions. Some women will want to prepare themselves for the birth knowing that their baby has a condition. Other women may decide to end the pregnancy.

What tests will I be offered?

• Blood test for cystic fibrosis (CF)

You and the father of your baby will be offered a blood test to see if you are carriers of a change in the CF gene. Usually both parents must be carriers of CF for a baby to have the condition. If both parents are found to be carriers of CF, the baby will have a 1 in 4 chance of having the condition.

If your baby has echogenic bowel and you and the father are both carriers of CF, your baby has a higher than 1 in 4 chance of having CF. If this happens you will be offered an amniocentesis to test the amniotic fluid (the fluid around the baby in the womb) to see if your baby has the condition.

You may want to wait until your baby is born to find out if they have CF. If you and your baby's father are both found to be carriers of CF and you choose to wait until your baby is born, you will be offered a blood test for your baby soon after the birth. Screening for CF is also offered as part of newborn bloodspot testing which is carried out when the baby is five days old, followed by further testing to diagnose CF if it was suspected on the initial screening test.

There are different types of CF gene changes. Testing you and your baby's father does not detect all of the changes, so you could still be a carrier of CF.

Blood test for cytomegalovirus (CMV)

You will be offered a blood test to see if you have had a recent CMV infection. If the blood test shows you have had a recent CMV infection, there is a chance the virus may pass across the afterbirth and infect your baby. This is known as congenital CMV.

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If your blood test shows that you have had a recent infection, you will be offered an amniocentesis to test the amniotic fluid to see if your baby is infected by the CMV. You can get more information about amniocentesis from the Antenatal Screening Wales 'This information is for you if you have been offered further tests for suspected chromosomal conditions'.

Ultrasound scans

You will be offered regular ultrasound scans to check the growth of your baby.

Further information

You can get more information from the hospital midwife who specialises in antenatal screening or the hospital doctor (obstetrician).

Antenatal Results and Choices (ARC)

www.arc-uk.org

Phone: 08450772290 or 0207713 7486

The Cystic Fibrosis Trust www.cysticfibrosis.org.uk

Phone: 02037951555

CMV Action

cmvaction.org.uk

Phone: 0808 8020030

Information from CARIS (Congenital Anomaly Register and Information System) and The Welsh Study of Mothers and Babies has been used in this leaflet to describe how echogenic bowel may present in your baby.

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