Thursday, October 9, 2003

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## Syndrome

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stael, Brazil and many other October 9, 2003

In an accompanying editori-Drs. Michael T. Mennuti d Deborah A. Driscoll of the niversity of Pennsylvania chool of Medicine wrote that cond-trimester screening ould continue to be the stanrd until detailed guidelines in be developed for using the Because mothers 35 or older

we a higher risk of having a lown syndrome baby most get cent of the time, it one of the invasive tests. ndicated a fetus prob-In addition to looking at the other's age, the screening e in 800 babies has

combination tested by Wapner and colleagues looks for low ome, the most comevels of a protein called pregh the syndrome suffer ancy-associated plasma proein A, and for high levels of a pe of the hormone human small head and ears. horionic gonadotropin. The ne four indicators trasound test looks for tellw a high probability ale high levels of fluid in the ndrome, women can

initive test. In chori-Evans, who has researched he ultrasound test and been sing it for a decade, said it is om the placenta with esingle best marker of Down ally at 10 to 12 weeks ndrome. But he also warned . In amniocentesis, at correctly reading the ultraound requires specialized aining and experience. It is vailable at some U.S. academmedical centers.

Wapner said doctors might tin half the number of invave tests by using the comined screening to correctly lentify normal as well as own syndrome fetuses.

Currently, the screening enerally used in this country sts the mother's blood for nusual levels of a different ype of gonadotropin horone, a protein called alphatoprotein and the hormone triol, which together are 65 ercent accurate. Adding a ew test for the hormone nhibin A increases reliability

oup to 75 percent.

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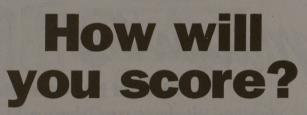
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ew England Journal I. Evans, director of or Genetics and Fetal

at St. sevelt Hospital York, said the study gradual shift from ter screening to this

usands of patients aid Evans, president Iedicine Foundation It's being routinely ne United Kingdom,

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