

## **BAARITAANADA UURKA**

Waa muhiim in la fahmo farqiga u dhexeeya baaritaanada la xiriira xanuuno ama cuduro imaan kara (screening tests iyo baaritaanka lagu ogaanayo cudur markaas jira (diagnostic tests).

Baaritaanka la xiriira wax soo socda (screening tests) wuxuu ku siin karaan macluumaad ku saabsan suurtagalnimada laga yaabo inuu ilmuhu yeesho dhibaato caafimaad oo gaar ah laakiin maku siinayo jawaab sugan. Baaritaanka lagu ogaanayo xanuun markaas jira (diagnostic tests) wuxuu ku siinaya jawaab sugan.

Inta aad uurka leedahay oo dhan waxaad yeelan doontaa baaritaano badan kuwaas waxaa loo yaqaan screening tests ama diagnostic tests. Qaar ka mid ah baaritaanadan ayaa kugu noqon doona lacag, had iyo jeer weydii daryeel bixiyahaaga haddii ay jiraan kharash la bixinayo.

Baaritaanada lagu ogaanayo waxa soo socda (screening tests) waxay bixin karaan qiyaasta fursada ah in ilmahaaga ay saameeyaan xaalado kala duwan laakiin kuuma sheegayo cudur markaas jira. Haddii baaritaanada waxa dhici kara ay muujiyaan fursad laga yaabo inay u badan tahay waxa la filayo inay imaan karaan, baaritaanno dheeri ah ayaa la sameyn karaa si loo xaqiijiyo natiijadaas. Baaritaanadaas xiga ee xaqiijinta ah waxaa loogu yeeraa baaritaanka cudurka lagu ogaanayo (diagnostic tests), waxayna bixiyaan natiijo la hubo.

Waxaa lagu siin karaa baaritaanadan (screening tests) soo socda:

- Isku-darka baaritaanka seddexda bilood ee ugu horeeya - baaritaankaan waxaa la sameeyaa horaanta uurkaaga wuxuuna isku daraa macluumaadka ka soo baxa ultrasound-ka seddexda bilood ee ugu horreeya iyo baaritaanka dhiigga ee hooyada (baaritaanka dhiigga hooyada ee seddexda bilood ee ugu horreeya) si loo xisaabiyo fursadda dhalashada cunug leh dhibaatooyin koromosoom, oo ay ku jiraan Down syndrome.
- Baaritaanka seddexda bilood ee labaad (waa bisha seddexaad ilaa tan lixaad inta u dhaxeysee) ee dhiigga hooyada - kani waa baaritaan dhiig oo aad sameyn doontid qiyaastii 15-17 toddobaad oo uur ah. Waxay kaa caawinaysaa in la ogaado fursadda xaaladaha qaarkood ee saamaynta ku yeelan kara ilmahaaga, sida cilladaha koromosoomyada (oo ay ku jiraan Down Syndrome) ama cilladaha tubada neerfaha (sida laf-dhabarka).
- Non-invasive prenatal testing (NIPT) - baadhitaankan dhiiggu wuxuu eegaa inta uu la egyahay hiddo-wadaha ilmaha (DNA), ee ku jiro dhiigga hooyada. Wuxuu sheegi karaa fursada uu ilmuhu ku yeelan karo cilladda Down Syndrome iyo dhibaatooyinka kale ee koromosoomyada waana la samayn karaa wakhti kasta laga bilaabo 10 toddobaad marka uu uurku gaaro. Natiijada kasoo baxdo way ka saxsan tahay marka la isku daro baaritaanka saddexda bilood ee ugu horreeya ama baaritaanka dhiigga hooyada ee saddexda bilood ee labaad ah, laakiin wuu ka qaalisan yahay tijaabooyinka baaritaanka [qiyaastii \$ 400-500].

Tijaabooyinka soo socdaa waa kuwa cudurka lagu ogaadaa (diagnostic tests) waxaana badanaa la sameeya baaritaanka lagu ogaanayo waxa imaan karo (screening tests) kabacdi:

**ultrasound** - waxaa loo isticmaali karaa in lagu hubiyo caafimaadka ilmaha haddii ay dhacdo astaamo uur oo aan caadi ahayn, sida dhiig baxa siilka ama dhaqdhaqaaq la'aanta uurjiifka.

**chorionic villus sampling (CVS)** - muunada (sample) mandheerta waxaa lagu qaadaa iyadoo la isticmaalayo cirbad dhuuban oo dheer, iyada oo loo marayo caloosha hooyada lana isticmaalayo ultrasound si loo arko halka ay ku socoto. Hilibka (oo loo yaqaan 'chorionic villus sample') ayaa markaa lagu baarayaa shaybaarka si loo ogaado in ilmuhu yeelan karo wax xaalad caafimaad darro ah iyo in kale.

**amniocentesis** - wax yar oo dheecaanka makaanka ah ayaa lagaa qaadayaa iyadoo la isticmaalayo cirbad dheer oo dhuuban oo la marinayo caloosha, dheecaanka ku xeeran ilmaha. Dheecaankaan yar waxay ka kooban tahay qaar ka mid ah unugyada ilmaha oo la daadiyey markuu ilmuhu korayo, kuwaasna ka dib ayaa lagu baarayaa shaybaarka.

Fursada ah in uurku dhicisoobo CVS kabacdi ama amniocentesis ayaa lagu qiyaasaa inay noqon karto ilaa 1kiiba 100.

Natiijooyinka kabacdi baaritaanadan ayaa la bixiyaa waalidiinta waxay ogaan doonaan inuu ilmahoodu qabo xaalad caafimaad iyo in kale. Haddii ilmuhu leeyahay xaalad caafimaad, waalidiinta waxaa laga yaabaa inay qiimeeyaan go'aanada ay ka qaadanayaan iyadoo ay kuxiran tahay in ilmuhu yeelan doono nolol tayo leh. Waxay heli doonaan la-talin hidde ah waxaana laga yaabaa in la siiyo fursad ay ku go'aansadaan in uurka la joojiyo ilmaha dilmaan. Weydiiso umulisadaada ama takhtarkaaga macluumaad dheeri ah oo ku saabsan baaritaanadan ka hor intaadan aqbalin in lagaa qaado baaritaanka si aad u hesho dhammaan macluumaadka aad u baahan tahay. Haddii aadan hubin waxa lagu sharraxayo ama lagu siinayo aad had iyo jeer weydiisato macluumaad dheeraad ah, iyo haddii aad u baahan tahay turjumaan ha ka waaban inaad weydiisato.

## SCREENING AND TESTING DURING PREGNANCY

It is important to understand the difference between screening tests and diagnostic tests. Screening tests can provide information about how likely it is that a baby might have a particular health problem but cannot provide a definite answer. Diagnostic tests provide a definite answer.

Throughout your pregnancy you will be offered lots of testing these are called screening tests or diagnostic tests. Some of these tests will cost you money, always ask your care giver if there is a cost.

Screening tests can provide an estimate of the chance that your baby is affected by a range of conditions but cannot make a diagnosis. If a screening test shows an increased chance, further tests are available to confirm that result. These tests are called diagnostic tests, which provide a more definite result.

You may be offered the following screening tests:

- Combined first-trimester screening – this test is done early in your pregnancy and combines information from a first-trimester ultrasound and a blood test from the mother (first-trimester maternal serum screening) to calculate the chance of having a baby with chromosome problems, including Down syndrome.
- Second-trimester maternal serum screening – this is a blood test you will have done around 15-17 weeks pregnant. It helps to show the chance of some conditions that may affect your baby, such as chromosome abnormalities (including Down syndrome) or neural tube defects (such as spina bifida).
- Non-invasive prenatal testing (NIPT) – this blood test looks at how much of the baby's genetic material (DNA), is in the mother's bloodstream. It can tell the chance of the baby having Down syndrome and some other chromosome problems and can be done any time from 10 weeks into the pregnancy. It is more accurate than combined first-trimester screening or second-trimester maternal serum screening, but it is more costly than the screening tests [approximately \$400-500].

The following tests are diagnostic and are often completed after a screening test:

**ultrasound** – may be used to check the health of the baby in the case of unusual pregnancy symptoms, such as vaginal bleeding or lack of fetal movement.

**chorionic villus sampling (CVS)** – a sample of the placenta is taken by using a long thin needle, through the mother's abdomen using ultrasound to see where it is going. The tissue (known as a chorionic villus sample) is then examined in a laboratory to tell whether the baby may have any medical conditions.

**amniocentesis** – a sample of amniotic fluid is taken using a long thin needle through the abdomen, the fluid which surrounds the baby. This fluid sample contains some of the baby's cells which have been shed as the baby grows, and these are then examined in the laboratory.

The chance of having a miscarriage after the CVS or amniocentesis is estimated to be up to 1 in a 100. After the results of these tests are given the parents will know if their baby has a medical condition or not. If the baby does have a medical condition, the parents may have to consider options depending on whether the baby will have a quality of life. They will receive genetic counselling and may be offered the option of termination of the pregnancy. Ask your midwife or doctor for more information on these tests before agreeing to have the test so you have all the information you need. If at any time you are not sure what is being explained or offered to you always ask for more information, and if you need an interpreter do not hesitate to ask for one.

## DISCLAIMER

This information is not intended to be medical advice, it is a guide only. Please ask your midwife or doctor for information and advice directly related to your care and your baby's care.