

Low PAPP-A, Raised AFP or Raised Inhibin A

Information for pregnant people who have Low PAPP-A, raised AFP or raised Inhibin A detected following first or second trimester screening

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Who is this patient information for?

This patient information has been written to support people whose recent first or second trimester screening test (a screening test for Down syndrome, Edwards' syndrome and Patau's syndrome or Down syndrome only), has shown that one or more of the pregnancy hormones has measured outside of the expected normal range. These are incidental findings of your first or second trimester screen and this does not affect the results of the screening test. You should have already received your results via a letter or phone call from the screening team.

This patient information has been produced to give you general information about these pregnancy hormones, and to help answer any concerns or queries.

Pregnancy hormones

During pregnancy, the placenta develops in your womb and delivers oxygen and nutrients to your baby via their umbilical cord. Pregnancy associated plasma protein-A (PAPP-A), Inhibin A, and free beta human chorionic gonadotrophin (beta-hCG) are hormones that are made by the placenta. Alpha-fetoprotein (AFP) is a protein made in the liver of your baby. These hormones play an important role in determining the healthy growth of both your placenta and your baby.

What does Low PAPP-A, raised AFP or raised Inhibin A mean for my pregnancy?

Studies have shown that low PAPP-A, raised AFP or raised Inhibin A levels may be associated with the placenta not working as well as it should do. This can lead to some babies not meeting their growth potential (not growing as expected) i.e. low birth weight babies and early deliveries.

What does raised free beta-hCG mean for my pregnancy?

Raised beta-hCG alone, is not associated with concerns for growth of your baby. However, if it occurs with raised AFP or raised Inhibit A, then there may be a higher risk of some babies not meeting their growth potential (not growing as expected).

How will this affect my care during pregnancy?

You will continue to see your community midwife for your routine appointments, however, you will also have an appointment with a consultant for pregnancy either by phone or face to face in the hospital.

If you have a low level of PAPP-A, raised AFP or raised Inhibin A you will be offered additional surveillance during your pregnancy:

- Low dose Aspirin (150 mg) daily throughout your pregnancy (until 36 weeks pregnant) will also be considered, as this will promote the blood flow through the placenta.
- A Uterine Artery Doppler Ultrasound scan (UtAD) will be offered at around 22 weeks of pregnancy. This is used to check the blood flow in the vessels around your womb which then feed your placenta. If there is a good blood flow in these vessels, the placenta develops normally helping the baby to grow in a healthy way inside the womb.
- Regular ultrasound scans (USS) throughout your pregnancy will be offered to measure your baby's growth and assess their wellbeing. The timings of these scans will depend on the result of the UtAD. The blood flow through your placenta and the amount of amniotic fluid (the fluid that surrounds your baby in the womb) will also be measured. The number of USS that you will be offered, will depend on your baby's growth and wellbeing.
- If there are any concerns around your baby's growth or wellbeing this will be referred to a consultant to discuss any further management and planning.

What will happen after any USS?

Your baby's estimated weight measured by scan will be plotted on your customised growth chart (GROW 2.0 chart).

If these measurements plot within the normal range, you will be given an appointment for your next scan and sent home to see your midwife or consultant at your next pre-arranged visit.

If any of the measurements plot outside of the normal range, or your baby is starting to show signs of reduced growth, you will be asked to see a doctor following the scan to discuss a plan of care.

Will this affect my options of giving birth?

Birth options, the timing and place of your birth will be discussed with you throughout your pregnancy, depending on the findings of any surveillance.

If there are no concerns and your baby is growing well:

- You will be offered continuous heart rate monitoring in labour of your baby.
- You may be able to labour and birth in water using telemetry monitoring (a wireless, waterproof system) and this can be discussed with the doctor or midwife.

Is there anything I can do to help my baby to grow well?

If you smoke, it is extremely important that you stop. Smoking can seriously affect the function of the placenta and the baby's growth. Please ask your midwife to refer you to Stop Smoking Service STARR.

Monitoring your baby's movements is a very good way for you to check your baby's wellbeing.

If you notice a change in your baby's pattern of movements, always ring the hospital the same day. **Do not** leave it until the next day or your next appointment.

Who can I speak with if I need further information?

Receiving the news that you have low PAPP-A, raised AFP or raised Inhibin A levels may cause anxiety but please be assured that most babies will have normal growth.

You are welcome to contact the Antenatal Clinic on 01205 445422 (at Pilgrim Hospital, Boston) or 01522 573338 (Lincoln County Hospital, Lincoln), Monday to Friday 9am to 5pm, to speak to the midwives if you have any queries or concerns.

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