



KNOWLEDGE AND ATTITUDE TOWARDS NON INVASIVE PRENATAL TESTING(NIPT) AMONG SRI LANKAN PREGNANT WOMEN



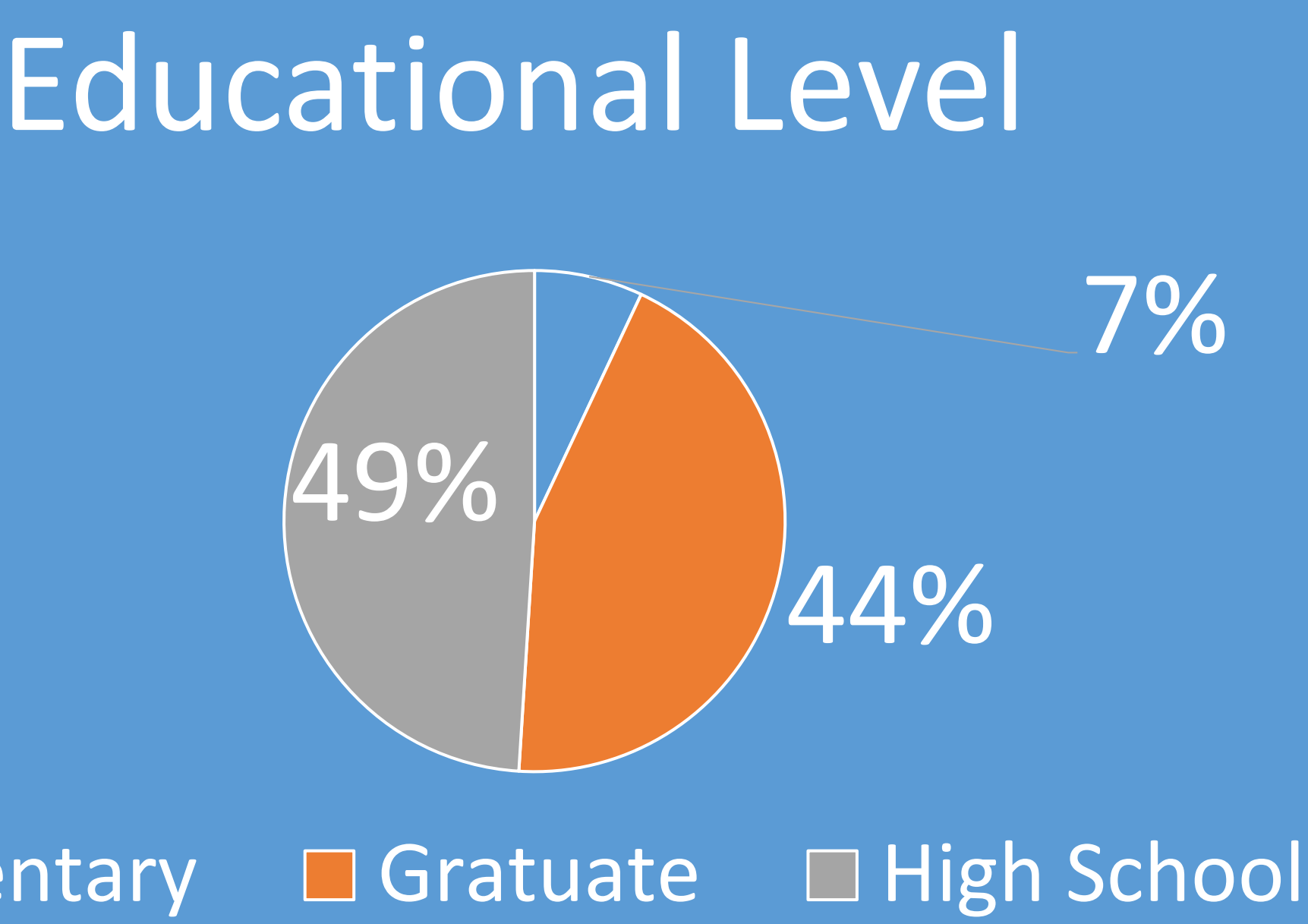
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INTRODUCTION

NIPT has become a major investigation of today’s fetal medicine practice. Sri Lankan national program of antenatal care doesn’t have a considerable place for NIPT. Knowledge and attitudes of Sri Lankan pregnant mothers towards this novel assay are important for policymakers to reform new guidelines of best practices in prenatal testing. Therefore, this study aimed to evaluate knowledge and attitudes toward NIPT among Sri Lankan pregnant women

METHODS

Pregnant mothers attending the Fetal medicine unit, Professorial Obstetrics and Gynaecology Unit, North Colombo Teaching Hospital(NCTH), and Ninewells Care Mother & Baby Hospital, were recruited to the study. data collection was done through a questionnaire in four aspects; social and demographic data, knowledge of NIPT, attitude towards NIPT, and factors important for decision-making for NIPT

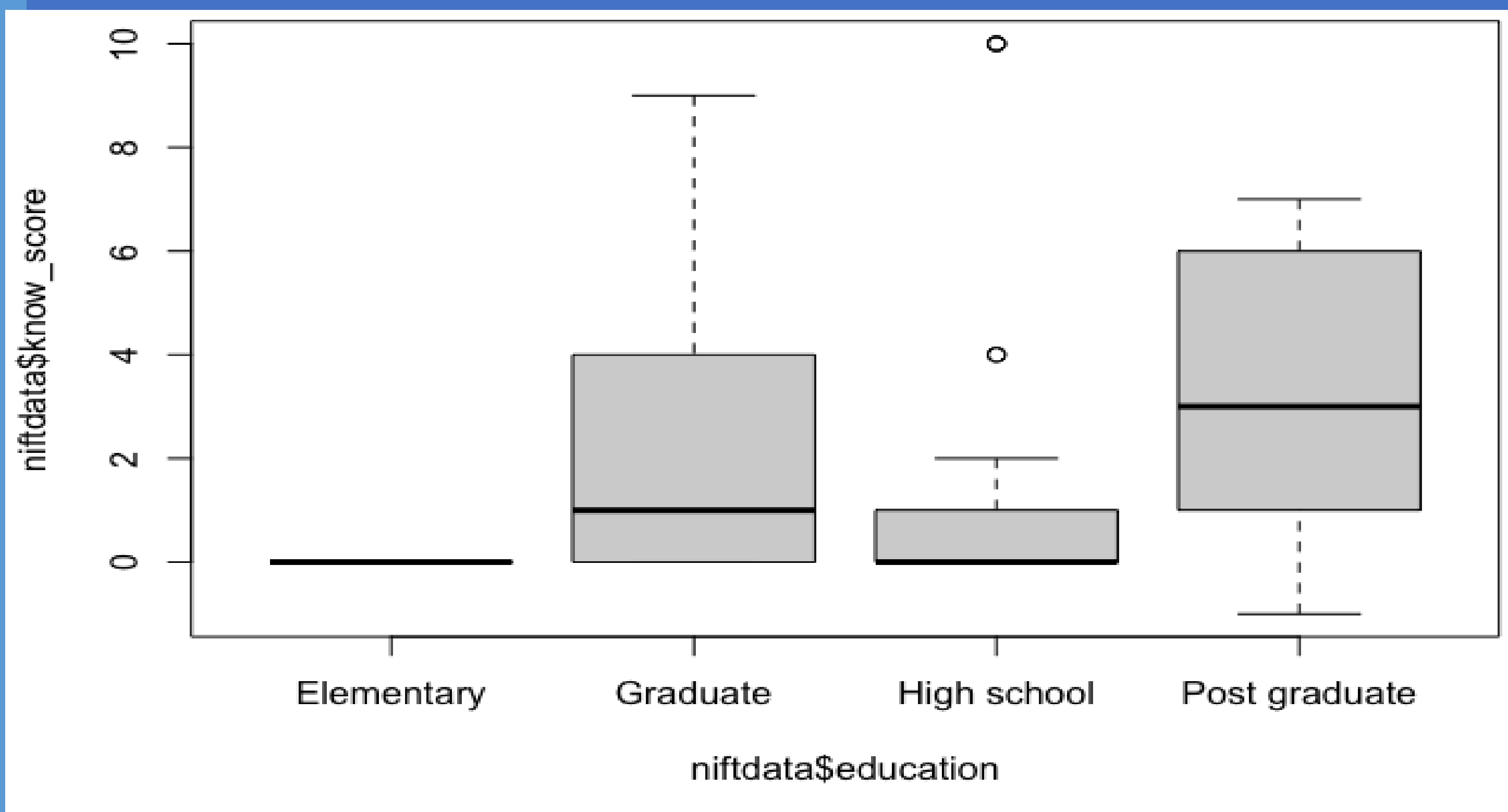


STUDY POPULATION

Of the total 179 mothers, 60 were recruited from NCTH, and 119 were from Ninewells hospital.

- The mean(SD) age of 31.3(6.46) years, and the highest number (79;44%) of patients, were in the age range of 35-44 years.
- The majority (129;72%) of women were in the second trimester,
 - 13(7%) 1st trimester
 - 37(21%) 3rd trimesters,
- 24(13%) had twin pregnancie
- 7(4%) had triplets.

Knowledge score (KS) comparison between education level



RESULTS

The mean knowledge score(KS) of NCTH and Ninewells participants were 0.27 and 2, respectively. Highest score was 4. The KS is significantly high in Ninewells participants (p=0.0001) and women who were with post-graduate qualifications (p=<0.0001). Seventy (39%) mothers strongly agreed that NIPT should be offered to all high risk pregnant populations in Sri Lanka, whereas 13(7%) strongly disagreed. The majority (141;79%) agreed with the decision to undergo invasive prenatal testing either by amniocentesis/chorionic villus sampling, and 23 (13%) disagreed.

- With 100% agreement, the most important factor in undertaking NIPT was knowing more about the baby in-utero.
- The least important factors (127,71%) were the family support and social support of having a baby with a chromosomal abnormality

Statement	Correct responses
Down syndrome is caused by chromosomal abnormality	75 (42%)
NIPT availability in SL	32(18%)
NIPT maternal blood testing	30(17%)
NIPT tests for trisomy 13, Trisomy 18, and Trisomy 21	16 (9%)
NIPT can do 10wks onwards	2 (1.11%)
NIPT tests all genetic disorders	3(1.6%)
NIPT test for gender confirmation	1(0.55)
Negative results means the fetus is unaffected of any genetic disease	9 (5.0%)
Positive results should be confirmed by invasive testing	2 (1.11%)
Positive test is diagnostic	9(5.0%)

CONCLUSION

The majority (147;82%) of the study cohort needs to be made aware of the availability of NIPT. The KS is significantly high in the participants recruited from Ninewells hospital (p=0.0001), whereas women who were with post-graduate qualifications had the highest mean KS (p=<0.0001).