



Summary of NICE Guidelines

Title	Multiple Pregnancy – The management of twin and triplet pregnancies in the antenatal period
NICE Reference	CG 129
Date of Review:	
Date of Publication	September 2011
Summary of Guidance	<p>CG129 specifies additional or alternative care for twin and triplet pregnancies than that set out in CG62 'Antenatal Care'. Key priorities:</p> <p><u>Determining gestational age, chorionicity and risk of Down's syndrome</u> Ultrasound offered when crown-rump length measures from 45 to 84 mm (~11 weeks 0 days to 13 weeks 6 days):</p> <ul style="list-style-type: none"> • Gestational age – estimated using the largest baby • Chorionicity - determined by number of placental masses, lambda or T-sign and membrane thickness at the time of detecting twin or triplet pregnancies. In women presenting later than 14 weeks all 3 features and discordant sex should be used. • Screen for Down's syndrome In twin pregnancies in the 1st trimester the 'combined test' should be used. For women booking too late for 1st trimester screening (15 weeks 0 days to 20 weeks 0 days) 2nd trimester triple or quadruple testing should be considered. For triplet pregnancies nuchal translucency and maternal age should be used and 2nd trimester screening should not be considered. <p><u>Monitoring for intrauterine growth restriction</u> Scans at intervals of <28 days from 20 weeks to estimate fetal weight discordance using 2 or more biometric parameters.</p> <p><u>Indications for referral to tertiary level fetal medicine centre</u></p> <ul style="list-style-type: none"> • A risk of Downs > 1:150 • Size difference of >25% between twins or triplets, fetal anomaly, discordant fetal death, feto-fetal transfusion syndrome. • Consultant opinion for: monochorionic monoamniotic twin, monochorionic monoamniotic triplet, monochorionic diamniotic triplet and dichorionic diamniotic triplet pregnancies. <p><u>Timing of birth</u> Uncomplicated multiple pregnancies should be offered elective birth:</p> <ul style="list-style-type: none"> • Triplet and monochorionic twin - from 35 weeks 0 days and 36 weeks 0 days respectively, after a course of antenatal corticosteroids has been offered • Dichorionic twin pregnancies - from 37 weeks 0 days • If this is declined weekly appointments with the specialist obstetrician should be offered for US.
Impact on Lab (See below)	<input checked="" type="checkbox"/> Moderate
Lab professionals to be made aware	<input type="checkbox"/> Laboratory Manager <input checked="" type="checkbox"/> Chemical Pathologist <input checked="" type="checkbox"/> Clinical Scientist <input type="checkbox"/> Biomedical Scientist

Please detail the impact of this guideline (Max 150 words)	Clinical scientist/chemical pathologist should be aware of the care pathway for multiple pregnancies and how this may impact on biochemical tests used for screening.
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Impact on Lab

- **None:** This NICE guideline has no impact on the provision of laboratory services
- **Moderate:** This NICE guideline has information that is of relevance to our pathology service and may require review of our current service provision.
- **Important:** This NICE guideline is of direct relevance to our pathology service and will have a direct impact on one or more of the services that we currently offer.