

# Ultrasound detection of fetal gastroschisis

**The aim of this leaflet is to answer your questions if you have had an ultrasound scan and have been informed that your developing baby has gastroschisis. If you have any further questions, please speak to the doctor, midwife or sonographer caring for you.**

## What is gastroschisis?

Gastroschisis is a type of abdominal wall (tummy) defect, in which the muscles that make up the baby's abdominal wall do not form correctly, resulting in a small gap or opening on the baby's abdominal wall, usually to the right side of the umbilicus (belly button). This gap allows the intestines (bowel loops) to protrude through to the outside of the baby's body.

Gastroschisis is a rare condition, affecting 1 in 5,000 babies, and it happens very early in pregnancy. It is not clear why it happens, but it appears to be more common in younger mothers. This condition is usually isolated and it is not hereditary (does not usually run in families).

## How is gastroschisis diagnosed?

It is usually diagnosed during pregnancy at the time of routine prenatal ultrasound scans, at or after 12 weeks of pregnancy.

## How does gastroschisis affect the baby and the pregnancy?

The majority of babies (more than 95 in 100) with this condition make a full recovery and live a normal life. However, some of the babies with gastroschisis may be born earlier than their due date and they may be smaller than the average weight. For this reason extra scans will be offered in the fetal medicine unit to monitor the baby's growth during the pregnancy.

The timing and mode of delivery will be advised by your obstetric team and a decision made according to your individual needs. Delivery will be offered by 38 weeks gestation. The delivery may be normal vaginal delivery or by caesarean section depending on individual circumstances, and what seems best for you and the baby.

## What happens after the baby is born?

In babies with gastroschisis, because the intestines or the bowels are not covered in a protective sac and are exposed to amniotic fluid during pregnancy, the bowel can become irritated and swollen, twisted or shortened. Therefore, after the delivery the baby will be transferred to the neonatal unit for follow-up care. Soon after the delivery, surgery will be needed to place the bowel back inside the baby's abdomen and repair the gap (close the opening) on the abdomen. This will be undertaken by a specialist paediatric (baby) doctor and team.

You will meet one of them during your pregnancy. Depending on the size of the opening on the baby's abdomen, the baby may need one or more operations to repair the gap in stages.

The majority of babies make a full recovery, however, some babies may experience difficulties, which may include problems with feeding or infection. These are not normally severe and often they are resolved over a period of time. The baby is likely to stay in hospital for at least six weeks to recover fully and establish feeding before going home. Occasionally they can be in for longer than this.

You will be introduced to the neonatal and paediatric team during your pregnancy to discuss in more detail the care of your baby after delivery.

## Will it affect my future pregnancies?

As gastroschisis is a condition that occurs by chance, and is not hereditary, the chance of it happening again in a future pregnancy is very small.

## Useful sources of information

### Antenatal Results and Choices (ARC)

t: 020 7631 0285 e: [info@arc-uk.org](mailto:info@arc-uk.org) w: [www.arc-uk.org](http://www.arc-uk.org)

### Contact a Family (CAFAMILY)

t: 0808 808 3555 e: [info@cafamilly.org.uk](mailto:info@cafamilly.org.uk) w: [www.cafamilly.org.uk](http://www.cafamilly.org.uk)

### DIPEX – Database of Individual Patient Experiences

e: [info@healthtalkonline.org](mailto:info@healthtalkonline.org) w: [www.healthtalkonline.org](http://www.healthtalkonline.org)

### Gastroschisis Exomphalos Extrophies Parents Support Network (GEEPS)

e: [geeps@btinternet.com](mailto:geeps@btinternet.com) w: [www.geeps.co.uk](http://www.geeps.co.uk)

## Contact us

If you have any questions or concerns about the scan, please contact the fetal medicine midwives on 020 7188 2321 (Monday to Friday, 9am to 5pm).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.guysandstthomas.nhs.uk/leaflets](http://www.guysandstthomas.nhs.uk/leaflets)

## Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) e: [pals@gstt.nhs.uk](mailto:pals@gstt.nhs.uk)  
t: 020 7188 3514 (complaints) e: [complaints2@gstt.nhs.uk](mailto:complaints2@gstt.nhs.uk)

## NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day. t: 111

## NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health. w: [www.nhs.uk](http://www.nhs.uk)

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