Amniotic bands and Amniotic sheets.

These two terms are often used interchangeably when in fact they have a very different meaning.

The baby sits inside a balloon full of water. The wall of the balloon is made up of two layers an amnion and a chorion. Sometimes when we are scanning we see an infolding of these layers which gives the appearance of a white band. This is an amniotic sheet and is of no relevance. It does not attach to the developing baby or carry any risk. They are often called amniotic bands on the report which is incorrect as these carry a significant risk of causing a problem (see below).

Amniotic bands are thought to occur as a result of a hole forming in the amnion. The simple explanation which may not be completely true is that the very early developing fetus falls into the hole and becomes attached to the membranes which are sticky. Bands of membrane attach to various parts of the fetus and can cause complete occlusion of the blood supply which may cause for example a limb to be amputated or a reduction in the blood supply which may cause an area to be underdeveloped. Often these bands cause major abnormalities to the abdomen, and face. The earlier in development this occurs the more devastating the anomalies. Later in development it may cause a milder anomaly such as the amputation of a single limb.

Amniotic bands often cause multiple anomalies which are incompatible with life. We are likely to think about this as a cause if we see an unusual pattern of anomalies with many external problems such as hernias of the abdomen with missing limbs and facial anomalies.

No two cases are the same; therefore the doctor looking after you will explain what they have seen and discuss the severity of the problem. As this is caused by an external factor, in the cases where there is a missing limb or part of a limb as the only feature one would expect the child to be of normal intelligence.

The recurrence risk is felt to be extremely low.