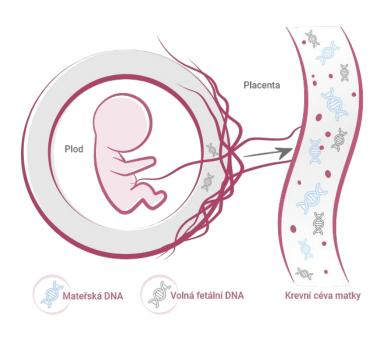
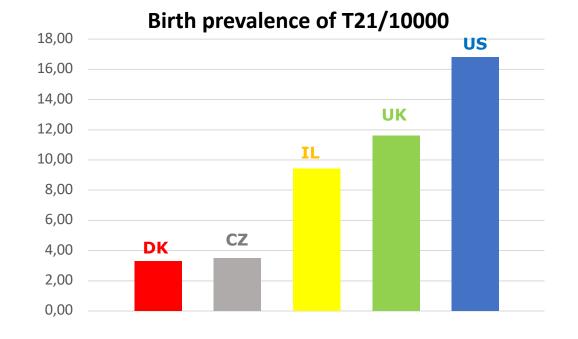
# NIPT in contingent screening protocol





# Arguments for systematic introduction of NIPT into antenatal screening

- Expansion of diagnostic spectrum.
- Reduction the frequency of invasive tests.





# NIPT in contingent screening

(recommendation SLG 2018)

**HIGH RISK (INVASIVE) CONTINGENT** 

COMBINED TEST RISK (CTR) >1/100
 STRUCTURAL DEFECTS
 LOW PAPP-A/fbhCG

MIDDLE RISK (NIPT) CONTINGENT

CTR 1/100 - 1/500

**LOW RISK CONTINGENT** 

FETAL ANOMALY SCAN 2nd TRIM



# NIPT in contingent screening validation study

- 11378 naturally conceived low risk pregnancies
- Period Nov 2020 Apr 2023.
- Average age 32yrs / 28.8% > 35



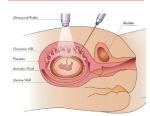
# Screening protocol

### **Combined Test**





### **INVASIVE**





(Integrated Test) (NIFTY by BGI) (Anxiosity)

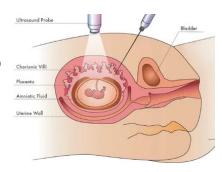
## **NIPT**



#### IInd Trim Scan

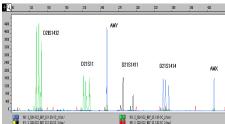


# **Diagnostic procedures**

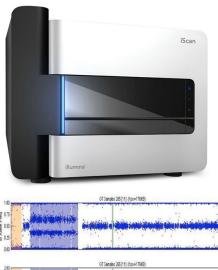


#### I. QF PCR





## II. CMA



#### III. pES



#### ##fileformat=VCF4.2

##INFO=<ID=SVTYPE,Number=1,Type=String,
Description="Type of structure variant">
##INFO=<ID=END,Number=1,Type=Integer,
Description="End position of the variant described in this record">
#CHROM POS ID REF ALT QUAL FILTER INFO

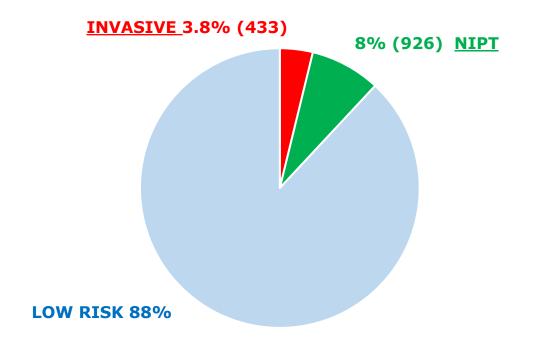
1 160929435 rs7520618 G A . . SVTYPE=SNP;END=160929436 1 160932043 rs113387749 A . . SVTYPE=INS;END=160932043 1 160932206 rs5778188 C . . SVTYPE=SLE;END=160932207 1 160932771 rs2256505 A G . . SVTYPE=SNP;END=160932772 1 160934077 rs2481074 T A . . SVTYPE=SNP;END=160934078 1 160934818 rs1023115 A G . . SVTYPE=SNP;END=160934819 1 160935328 . AAA TGC . . SVTYPE=SUB;END=160935331 1 160935334 rs75452934 AA TC . . SVTYPE=SUB;END=160935336



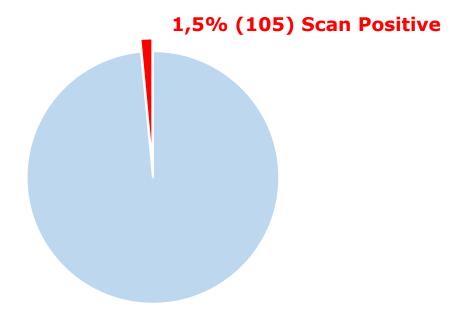
## **Screening Results**

**11378** cases

#### **First Trimester**



### **Second Trimester** (66% cont.)



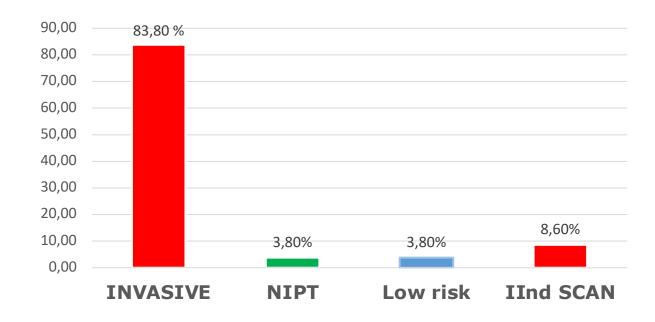


## **RESULTS**



## distribution of findings (105) by contingents

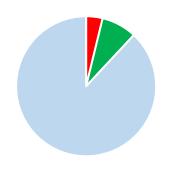
Dg. Procedures	Aneupl	CNV	Monogenic	Yield
653 (5.7%)	93	5	7	105 (15%)





## **NIPT RESULTS**

NIPT contingent (656/926=70.8%)



No	Initial positives	True positives	Aneupl	CNV	NO_report	PPV
656	8 (1.2%)	2 (0.31%)	2 (+21)	0	4(0.6%)	25%





## **CAN BE DIAGNOSED BY NIPT?**

**(79%)** 

### **ANEUPLOIDIES**

Aneuploidy	T21	T18	T13	XO, XO mosaic	XXY	Triploidy	Total
NO	45	25	3	8	1	7	89
Replacebility By NIPT	100%	100%	100%	50%	100	0%	78 (87.6%)

#### **CNV**

CNV	Lenght
5p15.33p14.2x1	23.8Mb
22q11.21x1	0.78Mb
22q11.21x1	0.74 Mb
3p26.3 x3	0.817 Mb
22q11.21x3	2.6Mb

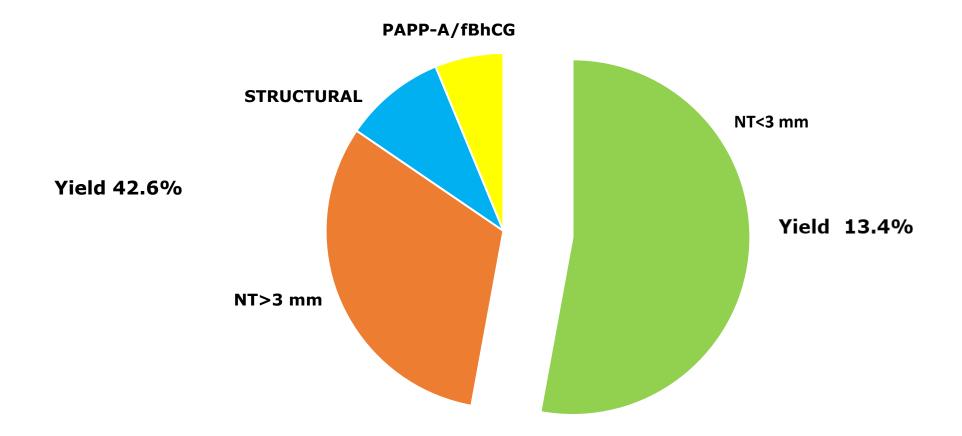
### **SNP**

(CHD7)	(p.Asp1758Gly)
(GLI2):	(p.Leu1140Ter)
(SOS1):	(p.Lys170Glu)
(FGFR3):	(p.Ser249Cys)
(L1CAM):	(p.Glu309Lys)
(BICC1):	(p.Gly149Ser)
(TSC2):	(c.1947-2A>G)



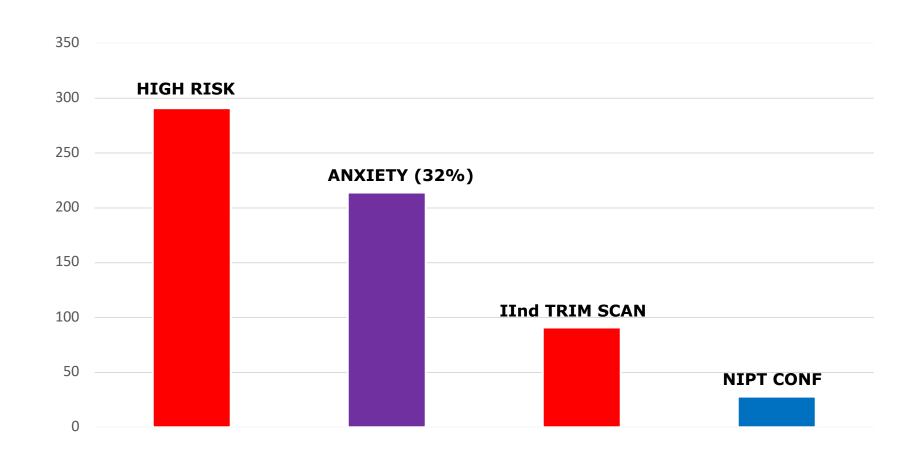
# **INVASIVE** contingent

(433/3.8%)

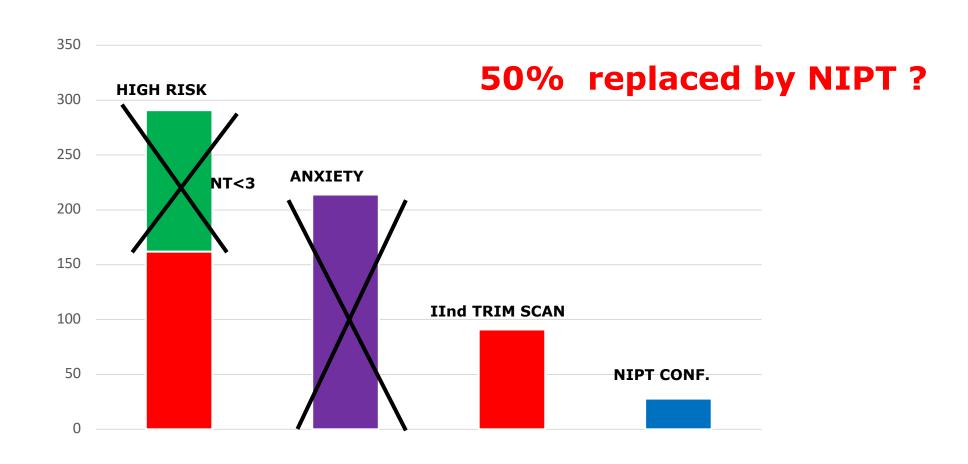




# **Indications to diagnostic procedures**653/11378 (5.75%)



# **Indication to diagnostic procedures** 653/11378 (5.75%)



# NIPT in contingent screening conclusion:

- NIPT contributed to 2% of aneuploidy (=T21) diagnoses
- The frequency of invasive procedures did not decrease
- Potencial of NIPT is in FTS positive and NT<3 mm</li>
- NIPT could replace all invasive procedures indicated by maternal anxiety
- At least 3% of pregnancies are candidates for invasive procedure anyway



# NIPT in contingent screening protocol



\*1944

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Filip Zembol
Hana Dvořáčková
Michael Němec
Lenka Nguyen Thi Ngoc







### **Prague Spring Symposium**

7th International Symposium of Genetics and Reproductive Medicine

The Centre of Medical Genetics and Reproductive Medicine, GENNET (www.gennet.cz), a member of FutureLife group is delighted to announce that The Prague Spring Symposium 2024 will be held in Prague on **Friday, May 24th, 2024.** 

# Registration: www.praguespringsymposium.com

#### Venue:

Prague Marriott Hotel, Praha 1, V Celnici 8

## Expert guarantor of the event:

Dr. David Stejskal