

# Echogenic Bowel

You have recently learned that your baby has echogenic bowel. This fact sheet is designed to provide you with information to answer some of the most commonly asked questions.

## What is echogenic bowel?

Echogenic bowel is when the baby's intestines have an unusually bright appearance on ultrasound. The more solid or dense a structure, the brighter it appears. Most of the baby's organs, including bowel, are some shade of gray. When the baby's bowel appears "bright" rather than the typical gray, this is referred to as echogenic bowel.

## How common is echogenic bowel?

Echogenic bowel is observed in approximately 2% of babies during the second trimester.

## What is associated with echogenic bowel?

- **Normal variant:** Most often, echogenic bowel is a normal variation, and will not cause any problem.
- **Bleeding:** Bleeding in pregnancy is not uncommon, and blood can cross into the amniotic fluid. Since all babies swallow amniotic fluid, the presence of blood in the fluid may cause an increase in the density inside the baby's intestines causing the bowel to appear bright (echogenic). The blood is harmless to the baby but can explain the echogenic bowel.
- **Obstruction (blockage) in the intestines:** A blockage in the bowel is rare. Blockages may be either isolated or associated with a condition such as, cystic fibrosis. When a baby has an intestinal obstruction, surgery may be needed after birth to correct the problem.
- **Infection:** Cytomegalovirus (CMV) is a common virus and if contracted during pregnancy may be problematic to the developing baby.
- **Down syndrome:** Echogenic bowel may be seen in some babies with Down syndrome.
- **Poor Fetal Growth:** An additional ultrasound is recommended between 28-32 weeks to monitor the baby's growth.

## How do we determine if our baby is affected by any of these conditions?

You will be offered blood tests to screen for cystic fibrosis, CMV infection, and Down syndrome. You may already have had some of these tests earlier in pregnancy, and it may not be necessary to repeat them.

You may be offered a test called amniocentesis to diagnose a chromosome abnormality, CMV infection or cystic fibrosis (if you and your partner are both CF carriers). This procedure involves obtaining a small amount of amniotic fluid from around the baby and analyzing cells within the fluid.

Regardless of whether you choose to have additional testing or not, you will be offered an additional ultrasound to monitor the baby's growth and evaluate the bowel between 28-32 weeks of pregnancy.

Please remember that most babies with echogenic bowel will have a normal outcome. If you would like to discuss this further, a counselor is available at 781-624-5041.

Thank you for choosing Maternal Fetal Medicine at South Shore Hospital.