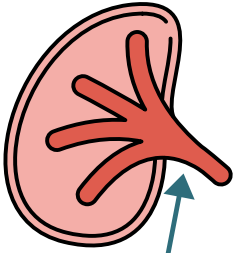


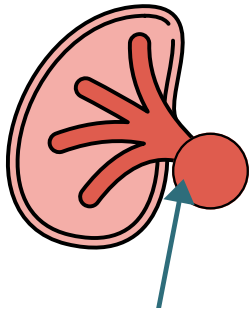
# LEARN MORE ABOUT URINARY TRACT DILATION

## Normal Kidney



Renal Pelvis

## Dilated Kidney



UTD A1 occurs when there is dilation in the renal pelvis

## WHAT IS AN URINARY TRACT DILATION (UTD)?

Urinary tract dilation refers to the enlargement of a portion of the kidney called the renal pelvis. This is usually related to an increase in the amount of urine present in the kidney. In some cases, the increased urine can be due to a blockage along the urinary tract, which results in a backup of urine into the developing baby's kidney. In other cases, no cause for the enlargement is found and it will resolve on its own. Approximately 1 in every 40 pregnancies have UTD seen on prenatal ultrasound, and this can be seen in one (unilateral) or both (bilateral) of the kidneys. UTD can be seen in any pregnancy, but is more common in males.

Your provider may specify if the finding is urinary tract dilation A1 (UTD A1) or urinary tract dilation A2-3 (UTDA2-3). This classification depends on how much urine is present in the renal pelvis and other ultrasound findings. In this resource, we will focus on UTD A1, which **may also be referred to as pyelectasis**.

## COULD UTD A1 MEAN THAT THE BABY HAS OTHER HEALTH CONCERNS OR BE ASSOCIATED WITH CERTAIN CONDITIONS?

If UTD A1 is the only finding seen on ultrasound, it is typically not associated with any major problems for a baby. Some children may have more frequent urinary tract infections. A small percentage of babies with UTD A1 may have an increase in the size of the kidney or other problems in the urinary tract that may require surgery after birth.

Less frequently, a baby with UTD A1 may have a chromosome condition such as Down syndrome. Down syndrome is caused by an extra chromosome 21 and is associated with intellectual disabilities and other health concerns. Based on your ultrasound and other testing results, your genetic counselor or healthcare provider may discuss the specific chance for your pregnancy to have Down syndrome.

## HOW COMMON IS THIS FINDING?

**2-3%** of all pregnancies will have this ultrasound finding



## DO I NEED TO CONSIDER ADDITIONAL TESTING?

In most pregnancies, this finding alone does not significantly increase the chance of a chromosome condition. If you already had a normal chromosome screening test (such as non-invasive prenatal testing, first trimester screening or quad screening) and UTD is the only finding on ultrasound, the chance for a chromosome condition is likely less than 1%. Diagnostic procedures such as amniocentesis may be available, and your genetic counselor or prenatal care provider can discuss this option more. If you have not had any testing for chromosome conditions in the pregnancy and/or if there are other findings on ultrasound, your genetic counselor and/or prenatal care provider can give you further details on available options. It is important to know that there are no tests available to detect all health concerns.



Ultrasound



Non-Invasive  
Prenatal Testing  
(NIPT)



Diagnostic  
Testing

## WHERE CAN I GET MORE INFORMATION?

If you have additional questions or concerns about this ultrasound finding, please don't hesitate to contact your genetic counselor and/or prenatal care provider. Your healthcare team is here to help you during pregnancy.

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