

How Can Genetic Counselling Help?

Sometimes people worry that they may develop a health problem which affects other members of their family. Or they may want children - but are concerned that this problem may be passed on to them. This is where genetic counselling can help. This service, available at many large hospitals, helps in a number of ways. One is to advise people on their chances of developing a particular disorder - or of passing it on to a child. It can also help people who are concerned because:

- They have one child with a disorder and are worried that any future children may have the same disorder
- Their partner is a close relative, such as a first cousin, and they are planning a pregnancy
- They have had two or more miscarriages, a stillbirth or an early infant death
- They are pregnant and have been exposed to infections, drugs or other potentially dangerous substances during pregnancy
- They are in their mid 30's or older and want to have children

In many cases a genetics service can reassure people their risk of developing a disorder, or of having a child with a disorder is less than they think. A genetics service can estimate the risk of developing an inherited disorder, or of passing one on, by asking questions about family history. In some cases there are tests to find out if you are carrying a genetic disorder (but they can't test for all genetic disorders).

There are also some tests to detect abnormalities in unborn babies. Although most women over 35 have healthy babies, their age increases risk of some disorders such as Down syndrome. There are tests available during pregnancy which can tell if a baby has Down syndrome, as well as some other disorders. A genetic counsellor can discuss the risks and benefits of these tests.

What if a test finds that a baby does have a problem?

A genetics service can provide counselling, prepare couples to cope with the effects of having a child with a disorder and give information about organisations which can help.

Some people whose partner is related to them worry that they may have a child with an abnormality. Marrying a relative such as a cousin occurs in most communities, but is more likely when a community is small and perhaps newly arrived in a country. Many people believe it helps protect women - it's a way for parents to feel reassured about the family she is marrying into. Although most parents who are related to each other have healthy babies, there is an increased risk of having a baby with an abnormality. For most people who aren't related there is a three in a hundred chance of having a baby with a disorder - for parents who are close relatives, such as cousins, the chance is six in a hundred.

To understand how this happens, it helps to know that none of us is perfect and we all carry faults in our genes. Most of the time this won't cause problems for any children we might have - unless both parents have the same faulty gene. This is more likely to happen if both parents belong to the same family. But it can also happen if both parents come from the same part of the world. Two hereditary diseases which are more common in people from certain ethnic groups include thalassaemia (a blood disorder) and cystic fibrosis (a life threatening respiratory and digestive disorder). Anyone who thinks they may have a family history of either disease, and who is planning to have children, should talk to a genetic counsellor.

A doctor can refer you to a genetic counselling service. Interpreters can be arranged if necessary. Anything that is said to either a counsellor or an interpreter remains confidential.

If you need help making phone calls in English, ring the Translating and Interpreting Service (TIS) on 131 450.

You can find more health information in your language on the Multicultural Communication website at <http://mhcs.health.nsw.gov.au>

Telephone numbers are correct at time of publication but are not continually updated. You may need to check the numbers in the telephone directory.