Significant issues are also raised by recent developments in prenatal genetic testing. Since 2011, a new non-invasive prenatal test (NIPT) that screens for Down syndrome has been offered to pregnant women during the first trimester. This test, which simply involves taking a blood sample from the mother, is more reliable and safer for the fetus, and can be used earlier in pregnancy than the method previously used for this type of genetic screening. Some specialists feel that these characteristics, coupled with commercial pressure to establish NIPT in routine use, risk increasing the pressure on women, who find themselves faced with the moral burden of deciding whether or not to consent to the test, without being fully informed by medical personnel to make this decision.[[i]](https://mail.google.com/mail/u/0/" \l "m_8180782956259405939__edn1" \o ") The number of conditions that can be screened for with NIPT is also gradually increasing, such that the method should soon be able to provide a wide range of genetic information about the fetus. There are grounds to question whether the ability to obtain a greater amount of genetic information about a fetus is a positive step forward from an individual and societal point of view. To what extent are we preserving the right of pregnant women not to be informed of the probability that their fetus will have an abnormal genetic condition? At a societal level, does prenatal genetic screening not facilitate eugenics?

[[i]](https://mail.google.com/mail/u/0/" \l "m_8180782956259405939__ednref1" \o ") Ravitsky, V., 2017, “The shifting landscape of prenatal testing: Between reproductive autonomy and public health”, *Hastings Center Report*.