

**A CLINICAL STUDY OF DOWN'S SYNDROME IN  
1975/1976**

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The clinical criteria for diagnosis of Down's Syndrome make it unnecessary in most situations for routine cytogenetic analysis.

Penrose described two groups:

The age-dependant group being solely due to nondisjunction associated with late maternal age and

The age-independant group which too can be due to non-disjunction and hence Trisomy 21, but also due to heritable and nonheritable translocation defects.

This study firstly shows the maternal age distribution of patients seen in the University Paediatric Unit in Colombo. The incidence in late maternal age is low and this is related to the number of pregnancies after 40 years. The incidence is highest between maternal ages of 20 and 30, 50% of cases being in this group. The maximum number of pregnancies in this country however coincide with this peak incidence and this is shown in the study. The need to highlight this age incidence is to disseminate this knowledge, to prevent the incidence of Down's Syndrome after 30 years.

The age of presentation for diagnosis, the family histories, and the association with congenital heart diseases are discussed.

Cytogenetic studies though attempted are not presently economically possible in all cases. Successful cultures are shown. The study brings out (1) the need for cytogenetic analysis because of the high incidence of Down's Syndrome in the young mother. (2) The possibility of prevention of 50% of D. S. by family planning.