

## Why You Should Think Twice about Prenatal Ultrasounds

Written by Shelby Salinas

Thursday, 01 March 2018 00:00 - Last Updated Friday, 04 January 2019 08:38

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I'm now in my second trimester—14 weeks, to be exact—and I have yet to hear my baby's heartbeat. It's a weird feeling, to be honest. During my first pregnancy, I had no idea about the dangers of prenatal ultrasound. The second I saw those two pink lines, I knew I had to get an appointment with a doctor as soon as possible. I had to know that my baby was alive and healthy. I had to know that this was real. And for many of us modern mothers, that requires a heartbeat.

But then I got my hands on one of the most eye-opening books I have ever read: *Gentle Birth, Gentle Mothering*, by Sarah Buckley. She raises a question that nobody else was even bothering to ask.

Is it safe to expose your unborn baby to ultrasound? In short, the answer is “we don't know.” I'm not sure about you, but that just doesn't cut it for me. Why would I want my child to be a potential human experiment for this technology?



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### Prenatal Ultrasound: The Facts

Ultrasound has never been proven safe. To this date, there are no studies comparing the development of children who were exposed to ultrasound versus those who weren't. Despite the lack of safety studies, this technology continues to increase in exposure and intensity (from 46 to 720 mW/cm<sup>2</sup>— more than 7 times the limit in 1992).

The American Congress of Obstetricians and Gynecologists doesn't even recommend routine ultrasounds. And there is plenty of evidence suggesting it could be dangerous.

A University of Washington study found experimental evidence that early ultrasound could perturb brain development and alter behavior, and may contribute to the severity of autism.

*“As is the case for most habitual rather than evidence-based medicine, the vast majority of women undergoing this procedure are not adequately consented about the potential ultrasound risks and the state of benefits as acknowledged by objective assessment of the literature.”*

—Kelly Brogan, M.D.

Another recent study done on mice found that fetal exposure to ultrasound can alter typical social behaviors, a conclusion that may be relevant for autism. One more study found that those who received two or more prenatal doppler scans had more than twice the risk of perinatal

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death compared to babies unexposed to doppler. There's even a book containing 50 human studies conducted in China that provide empirical evidence of ultrasound hazards to humans. In summary, some of the major risks include:

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Miscarriage and perinatal death

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Intra-uterine growth retardation

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Damage to the developing brain

Even at low levels, ultrasound can produce physical effects to fetal tissue, such as a rise in temperature or jarring vibrations.

Temperature increases can cause significant damage to a developing fetus's central nervous system. Among mammals, elevated maternal or fetal body temperatures have been shown to result in birth defects in offspring. (Hello, pregnant women avoid hot baths for a reason!) Your unborn baby can hear the ultrasound, and it's as loud to them as a subway train.

Could this be why ultrasound is connected to speech delay? In 1993, the Canadian Medical Association Journal published a study that examined 72 children between the ages of 2 and 8 who were suffering from speech delay of unknown cause. These children were twice as likely to have been exposed to ultrasound in the womb than those in the control group.

Doppler could be even more dangerous.

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I read that 30 seconds of doppler is equal to a 30-minute sonogram because it uses continuous rather than pulsed waves, and that doppler ultrasound has been shown to cause significant heating—especially in the baby’s developing brain.

*“The casual observer might be forgiven for wondering why the medical profession is now involved in the wholesale examination of pregnant patients with machines emanating vastly different powers of energy which is not proven to be harmless to obtain information which is not proven to be of any clinical value by operators who are not certified as competent to perform the operations.” —Sarah Buckley, M.D.*

### Guidelines for Ultrasound Use

Ultrasound does have its place. If a major problem arose, I would definitely consider using it myself. Usage in normal, low-risk pregnancies is my concern.

Ultrasounds should not be performed during the first trimester in a low-risk pregnancy. They should only be conducted if there are specific medical indications.

The operator should have a high level of skill and experience, as well as an understanding of the potential dangers.

A session should last about 3 minutes, 5 minutes at most. Only minimum intensity settings should be used. Women should avoid multiple sessions.

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Stay away from non-medical 3-D ultrasounds. There is a potentially higher risk to the baby due to the higher acoustic output required for high-definition images. That's definitely not worth a keepsake photo, in my opinion.

### My Experience: A Mother's Intuition

With my first child, I received the following:

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1 vaginal ultrasound at 8 weeks pregnant.

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A sonogram at around 14 weeks pregnant.

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A way-too-freaking-long anatomy scan at 20 weeks pregnant.

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Doppler at nearly every appointment with my midwife, including when I was in labor.

Agh. It's hard for me to even type this out, knowing what I know now.

What's interesting is that it didn't take me long to feel like something was off. Have you noticed that most babies move away from the wand whenever it's near? This was the first red flag for me. My son appeared to hate it—as they all do—and now I understand why.

The other time I felt my intuition at work was during my 20-week anatomy scan. The ultrasound

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technician wasn't very experienced, and she took her time scanning every tiny part of my baby's body. As the minutes wore on, I began to feel anxious and hot. That energy flowed out of my feet as they shook on the table, and I asked her, "How much longer?" Something in my body was telling me to get the hell out of there, and it took every ounce of control to keep from jumping right off the table. Tears began to form as I looked over at my partner, communicating to him with my eyes that I would never subject myself or my baby to this again.

### What I'm Doing Instead

There are plenty of other ways to check on my baby; they just require a little bit of patience.

We can use a fetoscope, a stethoscope-like device designed for listening to fetuses, to hear the heartbeat at around 20–24 weeks.

Around that time—or even earlier—I'll feel my baby moving around in the womb.

At future appointments, my midwife can palpate my belly to gain an understanding of baby's position. Kicks and hiccups are other helpful clues.

Connecting with my baby, talking to my baby, trusting my intuition. Having faith in my body's abilities. Modern technology is life-saving in certain situations, but it also causes disconnection among ourselves, our bodies, and our babies. Instead, many of us put our trust in doctors and their machines. Making the conscious choice to take your power back as a woman is incredibly healing.

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