

WHEN YOU'RE PREGNANT
THE BEST DRINK IS NO DRINK AT ALL

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Fetal Alcohol Syndrome/Effects is a condition caused by a pregnant woman's use of alcohol during pregnancy, i.e., prenatal alcohol exposure.

Fetal Alcohol Syndrome (FAS) is a medical diagnosis and is determined by a pediatric geneticist, developmental pediatrician, or dysmorphologist (physician specializing in birth defects). FAS characteristics are:

1. Growth deficiency for height and weight;
2. Distinct pattern of facial features and other physical abnormalities;
3. Central nervous system (CNS) dysfunction.

Indicators of CNS dysfunction include poor coordination, lower average I.Q., hyperactivity, attention problems, learning difficulties, developmental delays and motor problems.

A Child with a history of prenatal alcohol exposure, but not all the physical and behavioral symptoms of FAS may be categorized as having **Fetal Alcohol Effects (FAE)**. Although children with FAE look normal and usually act normal, it is not a less severe form of FAS. A child with FAE does not have all of the physical abnormalities of FAS; however, the cognitive and behavioral characteristics of FAS and FAE are similar, and FAE can have equally serious implications for education, social functioning and vocational success.

FAS/FAE are caused by prenatal exposure to alcohol. Alcoholic beverages contain ethanol, a drug that has toxic (teratogenic) effects on the developing fetus. Teratogens cause malformations. Ethanol is a teratogenic drug and drinking alcoholic beverages during pregnancy can cause death, physical malformations, growth deficiency, and neurobehavioral damage (developmental delay, behavioral problems, and learning problems) to the fetus.

Alcoholic beverages include beer, wine coolers, wine and liquor. A "drink" is: 12 ounces of beer, or 12 ounces of wine cooler, a 4 ounce glass of wine, or 1 ½ ounces of liquor. All contain about ½ ounce of ethanol. All are an equal dose of alcohol.

When a pregnant woman drinks, so does her fetus. Alcohol freely crosses the placenta and reaches the fetus in concentrations similar to

those in the mother's circulation. Unlike the mother, though, the fetus' liver cannot process alcohol.

Patterns of use of alcoholic beverages vary, and a woman does not have to drink every day or be a chronic alcoholic to have a child with FAS/FAE.

An average of seven drinks per week or one drink per day can cause subtle, but real developmental problems.¹

Binge drinking of more than five drinks on any one occasion and drinking during the first two months of pregnancy is two of the strongest maternal predictors of later neurobehavioral deficits.²

Neurobehavioral effects are produced at lower levels of maternal drinking than gross physical malformations and growth deficiencies; however, they may be more devastating to children in the long run.³

At any point in pregnancy it is important for a woman to stop drinking alcoholic beverages. If a pregnant woman needs help to stop drinking, community resources are available: Treatment programs, counseling services and support groups.

Fetal Alcohol Syndrome is the leading known cause of mental retardation in the U.S., and one of the three leading causes of birth defects, and the only preventable one.

FAS/FAE are caused solely by the use of alcohol during pregnancy. The fetus is at risk during each stage of development. No amount of alcohol is safe during pregnancy. FAS and FAE are totally preventable.

0 Alcohol = 0 Risk

¹. Jacobson, J. Ph.D., and S. Jacobson, Ph.D., "Prenatal Alcohol Exposure and Neurobehavioral Development - Where is the Threshold?" Alcohol Health & Research World, Vol. 18, No. 1, 1994:40-36.

². "Alcohol, Tobacco, and Other Drugs May Harm the Unborn." U.S. Department of Health and Human Services Publications, No. (ADM) 92-711, 1990:18.

³. Ibid. at p. 20.

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