

American Academy
of Pediatrics



DEDICATED TO THE HEALTH OF ALL CHILDREN™

Ohio Chapter

Mind Menders

Guide for Pediatricians

This information is available on the Ohio Chapter, American Academy of Pediatrics' Web site at www.ohioaap.org

Fetal Alcohol Syndrome

Case Definition

Fetal Alcohol Syndrome (FAS)

- Prenatal/postnatal growth retardation
- Altered morphogenesis; especially facial dysmorphism
- CNS involvement; microcephaly, developmental disorders

Fetal Alcohol Spectrum Disorder (FASD)

- FAS with confirmed alcohol exposure
- FAS without confirmed exposure
- Partial FAS with confirmed exposure
- Alcohol-related birth defects (ARBD)
- Alcohol-related neuro-developmental disorder (ARND)

Epidemiology

- Prevalence data vary. Fetal alcohol effects occur on a continuum from social drinking to daily alcohol use causing neurobehavioral disturbance to full FAS and increased peri-natal mortality.
- Fetal Alcohol Syndrome is the most common preventable cause of mental retardation.
- 18.8% of women use alcohol during pregnancy.
- Full FAS occurs in about one in 750 births but partial FAS, ARBD and/or
- ARND occur in about one in 300 births.

Neurobehavioral Aspects of FAS

- Learning problems; especially language and speech
- Impaired concentration; difficulty with abstraction
- Poor impulse control and frustration tolerance

Co-morbidities and secondary disabilities

- Early school drop-out
- Alcohol and drug abuse
- Unemployment
- Involvement with correctional or mental health systems
- Premature Death

Interventions

- Early intervention/developmental stimulation
- Sensory integration therapy
- Social skills training; positive parenting programs
- Special education; neuro-cognitive habilitation
- Medications for symptom control

Summary

- Disabilities associated with Fetal Alcohol Spectrum disorders are irreversible and life-long.
- There is no safe time to drink during pregnancy.
- Fetal Alcohol Spectrum Disorder is 100% preventable

Supported through a grant from
Ohio Department of Alcohol and Drug
Addiction Services

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Guide for Teens, Families and Caretakers

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Fetal Alcohol Syndrome

Not a Single Drop

Alcohol is the leading known preventable cause of mental retardation. Any alcohol exposure during pregnancy is dangerous for the development of the child and may cause damage. Only alcohol use by the mother is potentially harmful.

Drinking alcohol during the first trimester is probably the most dangerous to the child. The effects can include mental retardation, facial abnormalities, small head circumference and failure to thrive. Later in the pregnancy, alcohol may still have bad effects. Young children may exhibit developmental delay, poor coordination and difficulty learning. Language problems and poor social skills are common in children with milder effects.

How many children are affected by maternal alcohol use?

About one in 750 infants are born with the full pattern of abnormalities known as fetal alcohol syndrome (FAS). However, many more children (as many as one in 300) are born with enough alcohol related effects to be diagnosed Fetal Alcohol Spectrum Disorder (FASD). The less severe problems may occur with only occasional use. Binge drinking may be particularly dangerous.

What can be done for children with FASD?

Functioning of children with FASD improves with occupational therapy, educational support and behavioral counseling. Although conduct problems tend to intensify as children grow older, early diagnosis and intervention may help avoid more serious dysfunction such as involvement with the law or school drop-out.

Summary

- Prenatal alcohol exposure causes brain damage. The safest choice is not to drink during pregnancy – not a single drop.
- The effects last a lifetime.
- Children with FASD can improve function with help.
- Fetal alcohol syndrome cannot be cured; the best strategy is prevention.

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