

FASD: What is it? When and How to Start the Conversation

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Disclosure Declarations

Name	Disclosure
Kathy Hotelling (Instructor)	Nothing to disclose
Kerry Mauger, (Planner)	Nothing to disclose
Karen Wolf-Branigin, (Manager)	Nothing to disclose
Leigh Ann Davis, (Manager)	Nothing to disclose

Objectives

- ☐ Learn the basics of FASDs
- ☐ Identify those at risk for having a child with an FASD
- ☐ Acquire pointers on starting and continuing conversations about preventing FASDs

Global Pandemic

As many as 6 of every 100 newborns
are exposed to alcohol

World Health Organization
2014

- ☐ Health problems
- ☐ Social problems
- ☐ Behavioral problems
- ☐ Education issues
- ☐ Legal issues

affecting individuals, families, and societies
worldwide

Leading Preventable Cause of

☐ intellectual disabilities and birth defects

☐ of learning disabilities

Which standard drink is safest for a pregnant woman?





NO safe time

No safe amount

No type of alcohol

Low to moderate consumption
of alcohol crosses placenta
and can interfere with normal
development of fetus.

Brain of fetus gets
hit every time
alcohol is ingested



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One ounce of alcohol dissolves about 10,000 cells
in developing brain

When lose one cell, lose trillions of neuro networks of
cells that were to develop from that cell

Alcohol has the most serious effect on fetus

“Of all the substances of abuse (including cocaine, heroin, and marijuana), alcohol produces by far the most serious neurobehavioral effects in the fetus.”

IOM Report to Congress, 1996

the “face”

#1 Myth



“The minute pursuit of the facial dysmorphology only serves to PROLONG DENIAL of this universal societal public health problem”

Keiran D. O'Malley, MD

world renowned expert on FASD



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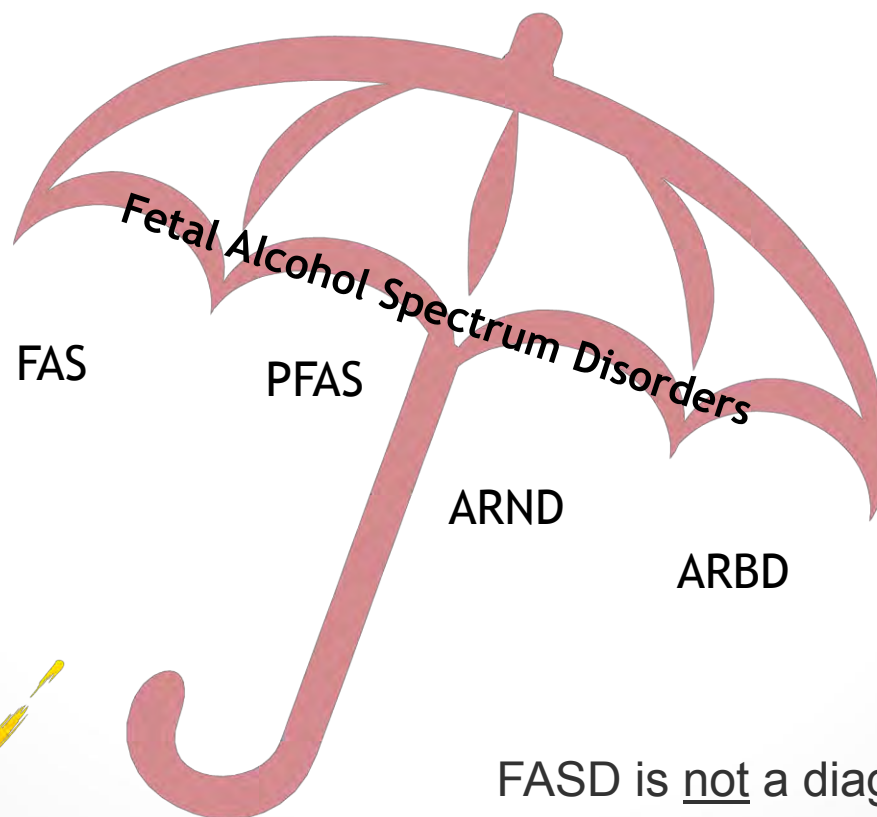


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FASD is a Continuum

Fetal Alcohol Spectrum Disorders (FASD) is the **umbrella** term that describes the range of effects that can result from prenatal alcohol exposure.



FASD is not a diagnostic term.



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Neurodevelopmental Disorder Otherwise specified

(Conditions for further study:
Neurodevelopmental Disorder Associated with
Prenatal Alcohol Exposure)

DSM-V

Signs and Symptoms of FASDs

- ☐ Development dysmaturity (1/2 - 2/3 of chronological age)
- ☐ Slow processing
 - ☐ 10 second person in a 1 second world
 - ☐ 3 out of 10 words
- ☐ Concrete
- ☐ Variable memory
- ☐ Little or no comprehension of money or time
- ☐ Under or oversensitivity to senses (auditory, visual, tactile)
- ☐ Attention difficulties

- ☐ Impulse control
- ☐ “Lies” when it would be “easy” to tell the truth (confabulates)
- ☐ Loses temper easily....escalation in response to stress
- ☐ Blames others for mistakes
- ☐ Poor sleep patterns
- ☐ Difficult to soothe
- ☐ Feeding difficulties especially when young

Executive Functions

Consist of mental skills
that help the brain organize and act on information

Almost always a deficit and reason why traditional
counseling is usually ineffective

- ☐ Cause and effect
- ☐ Working memory (storing and manipulating information needed to do verbal/nonverbal tasks)
- ☐ Apply previously learned info to problem solving
- ☐ Generalization
- ☐ Prediction (ex: time management)
- ☐ Planning
- ☐ Initiation
- ☐ Organization
- ☐ Inhibition



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Most Accurate Description of FASD

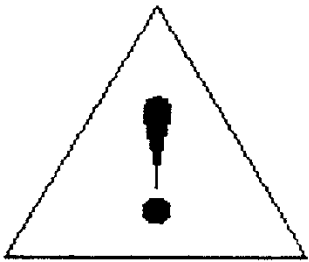
Permanent
Invisible
Physical
Disability

Why?

Usually typical or “normal” looking,
but when introduce the idea of physical disability,
others understand expectations must change
of those with an FASD.

PREVENTING AN FASD

requires a
combined and multifaceted effort over time



GOVERNMENT WARNING: (1) According to the Surgeon General, women should not drink alcoholic beverages during pregnancy because of the risk of birth defects. (2) Consumption of alcoholic beverages impairs your ability to drive a car or operate machinery, and may cause health problems.



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“Alcohol-related warning messages, alcohol bans, social marketing strategies implemented on a massive scale and similar approaches have little impact on behaviour change”

Institute of Health Economics
Canada
2011

We ALL MUST be part of prevention efforts

Perception that FASD is affected only by a woman's choices is a major barrier to effective prevention efforts

DRINKING HABITS ARE SHAPED BY THOSE AROUND US

- ☐ Social norms may promote drinking during pregnancy
- ☐ Marketing of alcoholic beverages
 - ☐ must caution women of childbearing age
- ☐ Providers of health care /social services
 - ☐ must inform pregnant women about risks of drinking
 - ☐ provide meaningful support to help pregnant woman to abstain from alcohol
- ☐ Society as a whole is responsible
 - ☐ for failing to help pregnant women to cope with fear, anxiety, violence, malnutrition, & poor health through means other than alcohol use

"This isn't new information and somehow it's missing big segments of our society. And so I think all the ways that we can share the information in every direction is really a good idea."

Deb Evensen
Educator

ALASKA



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****MEN****

- ☐ Be a good host
- ☐ Don't minimize harms of own drinking or effect on partner and other women around you
- ☐ Take a “pregnant pause”
- ☐ Plan ahead (more than half of pregnancies are unintended)



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FASD affects everyone

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Health Care Professionals



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Alcohol's effect does not discriminate among pregnant women

- ☐ Age
- ☐ Race
- ☐ Socioeconomic class

Anywhere people drink alcohol of any kind

Who is most likely to drink during pregnancy?

- ☐Caucasian
- ☐College educated
- ☐Middle to upper class

Privilege bias



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Beginning the Conversation

- ☐ When the female is “of child bearing age”
- ☐ With ALL females, regardless of race, social class, age
- ☐ With male partners, not just females
- ☐ Review history form with patient/client
- ☐ Ask about current usage verbally and at every visit
- ☐ Non-judgmental tone, face, words

Individual Circumstances

- ☐ Planning to get pregnant
- ☐ Finds out pregnant a month or more after the fact
- ☐ In treatment for addiction
 - ☐ Recognize that many women who are addicted to any substance may have an FASD themselves
 - ☐ Women who use drugs, also drink alcohol

Visual Aids



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FASD Center for Excellence

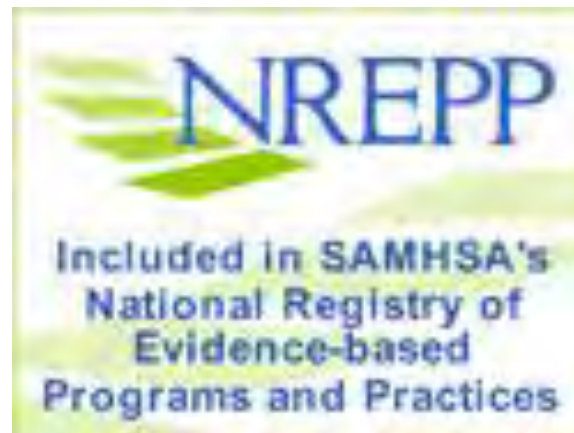
- ☐ Rack cards
- ☐ Posters
- ☐ Ad slicks

<http://fasdcenter.samhsa.gov/Products/CustomizableMaterials>

Audiovisual Aids

<https://www.youtube.com/watch?v=0Xzd5dIXH3k>

☐ CHOICES



- ❑ Based on scientific study in Fort Lauderdale, Houston, Richmond
- ❑ Those receiving both information and brief motivational intervention were twice as likely to be at reduced risk for an AEP compared to the group that received only information

- ❑ In-depth assessment of alcohol use & contraception use patterns
- ❑ Counseling about consequences of alcohol use during pregnancy
- ❑ Brief advice/counseling for moderate to heavy drinkers to reduce intake levels or referral to community treatment services for alcohol dependent drinkers
- ❑ Reproductive health education about contraceptive methods, provision of contraceptive services, client follow-up

Website Resources

- ❑ http://www.cdc.gov/ncbddd/fasd/acog_toolkit.html
- ❑ www.aap.org/fasd
- ❑ www.canfasd.ca
- ❑ www.womenspopulationhealth.ca/womenandalcohol
- ❑ <http://www.kyfasd.org/>
- ❑ www.fasdoutreach.ca
- ❑ www.fasdcenter.samsha.gov
- ❑ <http://www.nofas.org>

<http://www.mofas.org/wp-content/uploads/2010/12/Overlapping-Characteristics-3-23-10-CBT.pdf>

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Next FASD Webinar

- Alcohol Use in Pregnancy: Criminal Activity or Public Health Issue?
 - Thursday, June 25th @ 2:00 - 3:00pm EST

www.thearc.org/FASD-Prevention-Project

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