

Ask a Professional Home Economist

For Immediate Release

FASD ~ The Risk of Drinking Alcohol in Pregnancy by Mary K. Cunningham, P.H.Ec.

Fetal Alcohol Spectrum Disorder (FASD) refers to the many disabilities that may affect a baby if the birth mother drank alcohol while pregnant. Many people do not know that alcohol consumption can cause a variety of physical birth defects and varying levels of permanent brain damage if consumed in a pregnancy.

FASD is the most common birth defect in North America. Health Canada estimates that it occurs in 1% of all live births, and this is considered to be conservative. This means that hundreds of thousands of Canadians are living with FASD. Most people with FASD are not recognized, diagnosed or treated.

Alcohol is a neurotoxin with toxic effects on the developing brain cells of the growing fetus. It can change the number and structure of brain cells, brain size, cell organization and neurochemistry and causes permanent brain damage as a result. Many physical birth defects are common with but not limited to FASD. Mid-line defects involving the ear, heart and skeletal structure are often found with FASD.

Approximately 95% of people with FASD show only dysfunctional or unusual behaviours as a result of their condition. Such behaviours may include problems with adaptation, understanding meaning, predicting consequences, and difficulty with attention, memory and abstract thinking. Executive decision-making is affected and repeated poor decisions confuse and anger family and friends alike. Early school failures, drop-out and repeated interactions with the law are common side effects.

The permanent brain damage of FASD is often not recognized as the source of any of these behaviours in people who show no physical signs of FASD. Most are instead labelled with a host of co-occurring mental health diagnoses which miss the real problem of permanent, organic brain damage.

The amount of damage caused by alcohol consumption in pregnancy varies with factors such as the timing and amount of alcohol consumed, age of the mother, and maternal stress and nutrition. Some fetuses appear to be more vulnerable to alcohol damage than others, even though FASD is not a genetic disorder. Though these factors have not been studied scientifically, one fact we know for certain is that avoiding all alcohol in pregnancy prevents Fetal Alcohol Spectrum Disorder.

Men do not cause FASD. However, some studies indicate that men who abuse alcohol and drugs prior to conception can produce damaged sperm which could create other serious, but as yet unnamed, conditions with life-limiting effects on children. On a positive note, fathers can play a major role in the prevention of FASD when they actively support and encourage their partner not to drink in a pregnancy.

Even though FASD prevention education has been widely available in Canada for over a decade, many Canadian women still consume alcohol during pregnancy or before realizing they might be pregnant. Exact numbers are difficult to determine reliably, but experts in the field acknowledge that FASD is a factor in thousands of pregnancies every year in Canada.

Alcohol use is common in our culture, and many people do not understand the dangers of drinking during pregnancy. Some women may stop drinking when the pregnancy is confirmed. Friends and even some doctors may tell them that it is okay to drink in moderation. Most do not realize that any alcohol in pregnancy has the potential to permanently damage a fetus.

Binge drinking (4 or more drinks at a time) and partying are common and contemporary customs with adolescents and young adults. Newly-legal drinkers need to absorb the message that binge drinking is thought to be especially dangerous in the development of FASD in a child.

Causes of drinking during pregnancy such as physical, mental and sexual abuse, poverty, severe stress and mental health issues are the most difficult to work with. No woman ever drinks to harm her baby, but alcohol is frequently used as self-medication in many extremely difficult situations.

Society tends to ignore that addiction is a disease, not a moral failure. When we establish this truth more firmly in our social consciousness, it may be easier to deal with these complicated, difficult and interrelated causes of drinking in pregnancy in supportive and compassionate harm reduction programs. It will also make education about FASD much easier and more effective.

FASD is a preventable birth defect. It is hoped that public FASD education will lead to FASD prevention in the near future. For more information, contact the Public Health Agency of Canada at http://www.phac-aspc.gc.ca/fasd-etcaf/faq_e.html.

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