

FACTS *for* FAMILIES

No. 93

(Updated August 2006)

DRINKING ALCOHOL IN PREGNANCY (FETAL ALCOHOL EFFECTS)

According to the American College of Obstetrics and Gynecology, pregnant women should not drink any alcohol. Women who are thinking of becoming pregnant need to be aware of the very serious negative effects of alcohol on their developing baby (fetus). Prenatal alcohol exposure is the most common cause of birth defects in the United States. Exposure to alcohol during pregnancy damages the brain and behavior of children—these effects are 100 percent preventable.

Thousands of children are born with the effects of prenatal alcohol exposure. While many people drink, alcohol is poisonous for the baby growing inside you. Drinking even one alcoholic beverage per day during pregnancy puts the developing baby at risk of serious birth defects. Small amounts of alcohol can cause permanent harm to the child. Alcohol during pregnancy can cause many serious problems in children and adolescents:

- Infants may have slow growth and delays in their development, unusual facial features, irritability, brain and neurological disorders, mental retardation and problems with attachment to parents.
- Toddlers and school age children may have learning problems, poor frustration tolerance, poor social boundaries and reading difficulties.
- Adolescents may have continued learning problems, depression, anxiety and sexually inappropriate behavior.

Fetal Alcohol Effects (FAE) describes the negative and bad effects caused by drinking alcohol while you are pregnant. Fetal Alcohol Syndrome (FAS) is a more specific set of symptoms caused by drinking alcohol while you are pregnant. A child is diagnosed with Fetal Alcohol Syndrome (FAS) when there is prenatal alcohol exposure and:

- Facial deformities.
- Slow or delayed growth.
- Brain and neurological problems.

Children who are suspected of having FAE should be carefully evaluated by a pediatrician, child and adolescent psychiatrist or other experienced clinician. Fetal alcohol exposure is frequently missed as the cause of a child's behavior problems. The effects of alcohol on the developing brain during pregnancy cannot be reversed. However, early intervention can reduce the severity of the disability and improve the child's chance for success. Early intervention for FAE or FAS includes occupational therapy, special education and speech therapy evaluations.

**Drinking Alcohol in Pregnancy (Fetal Alcohol Effects), “Facts for Families,”
No. 93 (8/06)**

If you are pregnant and find yourself unable to stop drinking, talk with your obstetrician to help you stop. It is important to get treatment to stop drinking as soon as possible. Inpatient, outpatient and residential treatment programs are available. Local self-help programs (For example, Alcoholics Anonymous “12-Step Program”) can provide support in quitting.

For additional information see *Facts for Families*:

#3 Teens: Alcohol and Other Drugs,

#17 Children of Alcoholics,

#23 Mental Retardation,

#31 When Children Have Children,

#41 Substance Abuse Treatment for Children and Adolescents: Questions to Ask,

#45 Lead Exposure.

See also: *Your Child* (1998 Harper Collins) and *Your Adolescent* (1999 Harper Collins).

Web sites for parents to learn about Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effects (FAE) include:

National Organization on Fetal Alcohol Syndrome

www.nofas.org

National Institute on Alcohol Abuse and Alcoholism

<http://pubs.niaaa.nih.gov/publications/brochure.htm>

SAMHSA – FASD Center for Excellence

www.fasdcenter.samhsa.gov/index.cfm

SAMHSA – FASD Information in Spanish

www.fascdcenter.samhsa.gov/fasdsp/index.cfm

CDC’s Information on Fetal Alcohol Spectrum Disorders

www.cdc.gov/ncbddd/fas/

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The American Academy of Child and Adolescent Psychiatry (AACAP) represents over 7,000 child and adolescent psychiatrists who are physicians with at least five years of additional training beyond medical school in general (adult) and child and adolescent psychiatry.

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