

Fetal Alcohol

December 2014, ½ hour

What is Fetal Alcohol Syndrome?

Fetal Alcohol Syndrome (FAS) is a disorder caused by a woman consuming alcohol during pregnancy. FAS falls under the umbrella term Fetal Alcohol Spectrum Disorder or FASD. FASD covers other terms including Alcohol-Related Neurodevelopmental Disorder (ARND), Alcohol-Related Birth Defects (ARBD), and Fetal Alcohol Effects (FAE).

Fetal Alcohol Syndrome is the most recognizable and the most serious disability under the FASD umbrella. FASD is the leading known cause of intellectual and developmental disabilities in the western world. In the United States, studies have shown that the frequency of FAS is

estimated to be 0.2 to 2.0 cases for every 1,000 live births.

“FAS represents the severe end of the FASD spectrum. Fetal death is the most extreme outcome from drinking alcohol during pregnancy. People with FAS might have abnormal facial features, growth problems, and central nervous system (CNS) problems. People with FAS can have problems with learning, memory, attention span, communication, vision, or hearing. They might have a mix of these problems. People with FAS often have a hard time in school and trouble getting along with others.”

www.cdc.gov/ncbddd/fasd/facts.html

Special points of interest:

- FAS is 100% preventable
- When a pregnant woman drinks alcohol, the fetus's blood alcohol level becomes as high as, or higher than, the mother's
- When caring for someone with FAS, structure is important
- If you think you may be pregnant, or are thinking about becoming pregnant, it is best to abstain from alcohol to reduce or eliminate the chances of your child having FAS.

Alcohol and the Unborn Baby

Every time a pregnant woman has a drink, so does her unborn baby. Alcohol affects women differently than men. Women have more fat and less water in their bodies than men do, so when a woman consumes alcohol it is more highly concentrated in the blood. Alcohol passes easily from the mother to the fetus. The alcohol travels through the placenta from the mother's bloodstream into the bloodstream of the unborn child, thus putting the fetus at risk for FASD. The blood alcohol

level of the fetus becomes equal to or higher than the mothers. The fetus is unable to breakdown alcohol the way an adult can and

its blood alcohol level remains high for a longer time period.

How does alcohol harm the fetus? Alcohol constricts blood vessels, which interrupts the blood flow in the placenta and blocks the delivery of oxygen and nutrients to the fetus. Alcohol can also trigger cell death in numerous ways and cause different parts of the fetus to develop abnormally. It can also alter the way nerve cells develop, the way nerve cells travel to and from different parts of the brain, and alter brain function.



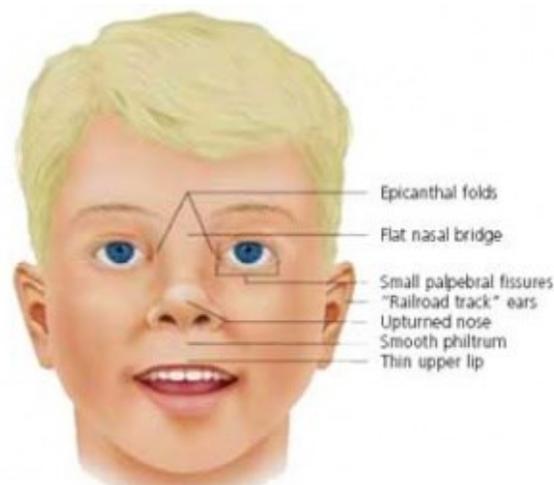
When you drink alcohol, your unborn child drinks it, too.

Signs and Symptoms

What are the signs and symptoms of Fetal Alcohol Syndrome?

They may be as follows:

- Poor growth of the baby in the womb and after birth
- Decrease muscle tone and poor coordination
- Delayed development and problems in three or more major areas: thinking, speech, movement, or social skills
- Heart defects
- Problems with the face, including:
 - Narrow, small eyes with large epicanthal folds
 - Small head
 - Small upper jaw
 - Smooth groove in upper lip (philtrum)
 - Smooth and thin upper lip



Diagnosis and Treatment

How is Fetal Alcohol Syndrome diagnosed? When diagnosing Fetal Alcohol Syndrome, healthcare professionals look for the following:

- Abnormal facial features – there are three distinct facial features noted: smooth ridge between the upper lip and the nose, thin upper lip, and short distance between the inner and outer corner of the eyes.
- Growth problems – these children have a lower than normal height or weight or both. These growth problems can occur even before birth and sometimes resolve themselves early in life.

- Central nervous system problems – including structural, neurological, and functional problems.
- History of maternal alcohol use during pregnancy – can help with diagnoses however, confirmation of maternal alcohol use is not necessary if the child meets the prior criteria.

How is Fetal Alcohol Syndrome Treated? There is no cure for Fetal Alcohol Syndrome. Research shows that early intervention treatment services can improve a child's development.

Prevention

How is FAS prevented? Fetal Alcohol Syndrome is completely preventable with abstinence of alcohol during pregnancy. Stop drinking as soon as pregnancy is known or even suspected or planned! The National Organization of Fetal Alcohol Syndrome states, "No amount of alcohol has been proven safe to consume during pregnancy and Fetal Alcohol Syndrome is 100% preventable when a pregnant women abstains from alcohol."

Coping and Support

Coping and Support. If you are the caregiver or the parent of someone with FAS, here are some suggestions that may be helpful in dealing with behavioral problems related to FAS:

- Work with the individual to implement daily routines to which the individual can become accustomed.
- Create and enforce simple rules and limits; communicate in concrete terms, not abstract; use lists whenever possible.
- Point out and use rewards to reinforce acceptable behavior.
- Because many people with fetal alcohol syndrome are vulnerable, guard against their being taken advantage of by others.
- Teach the individual skills for daily living - remember, repetition is key.
- Carefully chose who you ask to care for your child when you can't be there, because some behaviors may be difficult to manage.

(Source: <http://www.mayoclinic.com/health/fetal-alcohol-syndrome/DS00184/DSECTION=coping-and-support>)

Ask your physician for sources of support from professionals and local support groups for children and families affected by FAS.

FETAL ALCOHOL SYNDROME TEST



Name: _____

Title: _____

Agency: _____

Date: _____

Please provide contact information (email address, fax number, or mailing address) where you would like your certificate to be sent:

You must submit your completed test, with a score of at least 80%, to receive **1/2 hour** of credit for this course.

Via fax: please fax the test and evaluation to 814-728-8887.

Via email: please send an email to HCQUNW@MilestonePA.org. Please put "Fetal Alcohol Test" in the subject line, and the numbers 1—10, along with your answers, in the body of the email.

Via mail: send the test and evaluation pages to Milestone HCQU NW, 247 Hospital Drive, Warren PA 16365.

1. Fetal death is the most extreme outcome from drinking alcohol during pregnancy. True False
2. Fetal Alcohol syndrome is curable. True False
3. Fetal Alcohol Syndrome is the most serious disability under the Fetal Alcohol Spectrum Disorder umbrella. True False
4. Fetal Alcohol is completely preventable with abstinence of alcohol during pregnancy. True False
5. Fetal Alcohol Spectrum Disorder is the second leading cause of intellectual developmental disability in the western world. True False
6. When healthcare professionals are diagnosing FAS there are four distinct facial features they are looking for. True False
7. Alcohol affects women differently than men as women have more fat and less water in their bodies. True False
8. When a women drinks alcohol it is more highly concentrated in the blood. True False
9. The fetus is unable to break down alcohol the way an adult can. True False
10. No amount of alcohol has been proven safe to consume during pregnancy. True False

Resources

http://www.onhealth.com/fetal_alcohol_syndrome/article.htm#what_is_fetal_alcohol_syndrome, 09/11/2013

<http://www.cdc.gov/ncbddd/fasd/facts.html>, 09/09/2013

<http://www.mayoclinic.com/health/fetal-alcohol-syndrome/DS00184/METHOD=print&DSECTION=all>, 09/19/2013

<http://www.nlm.nih.gov/medlineplus/ency/article/000911.htm>, 07/25/2013

<http://fasdcenter.samhsa.gov/grabGo/factSheets.aspx>, 07/18/2013

http://fasdcenter.samhsa.gov/documents/WYNK_Numbers.pdf, 07/18/2012

http://fasdcenter.samhsa.gov/documents/WYNK_Effects_Fetus.pdf, 07/25/2013

http://fasdcenter.samhsa.gov/documents/WYNK_Native_American_Teal.pdf, 07/25/2013

<http://www.cdc.gov/ncbddd/fasd/diagnosis>, 08/23/2013

Home Study Evaluation

Training Title: Fetal Alcohol Syndrome

Date: _____

- | | |
|--|--|
| <input type="checkbox"/> Direct Support Professional | <input type="checkbox"/> Provider Administrator/Supervisor |
| <input type="checkbox"/> Program Specialist | <input type="checkbox"/> Provider Clinical Staff |
| <input type="checkbox"/> Consumer/Self-Advocate | <input type="checkbox"/> Family Member |
| <input type="checkbox"/> Support Coordinator | <input type="checkbox"/> Support Coordinator Supervisor |
| <input type="checkbox"/> PCH Staff/Administrator | <input type="checkbox"/> County MH/MR/IDD |
| <input type="checkbox"/> FLP/LSP | <input type="checkbox"/> Other (please list): _____ |

Please circle your PRIMARY reason for completing this home-study training:

- It's mandatory interested in subject matter need training hours convenience

Please circle the best response to each question.

5 = Strongly Agree 4 = Agree 3 = Undecided 2 = Disagree **1 = Strongly**

- | | | | | | |
|---|---|---|---|---|---|
| 1. As a result of this training, I have increased my knowledge. | 5 | 4 | 3 | 2 | 1 |
| 2. I learned something I can use in my own situation. | 5 | 4 | 3 | 2 | 1 |
| 3. This training provided needed information. | 5 | 4 | 3 | 2 | 1 |
| 4. The training material was helpful and effective. | 5 | 4 | 3 | 2 | 1 |
| 5. Overall, I am satisfied with this training. | 5 | 4 | 3 | 2 | 1 |
| 6. I am glad I completed this training. | 5 | 4 | 3 | 2 | 1 |

Suggestions for improvement: _____

Additional information I feel should have been included in this training: _____

I would like to see these topics/conditions developed into home-study trainings: _____