Alcohol use and pregnancy: Fetal Alcohol Spectrum Disorder (FASD) Webinar

Presented by

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Before we get started...

Questions/comments "Q&A" "Chat"



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Alcohol Use in Pregnancy: Fetal Alcohol Spectrum Disorders (FASD)

Presented by:

Associate Professor Delyse Hutchinson

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We acknowledge the Traditional Owners of country throughout Australia and recognise their continuing connection to land, waters and culture. We pay our respects to their Elders past, present and emerging.

Introduction



- Today's webinar will focus on:
 - Alcohol use in Pregnancy
 - Brief History and Prevalence of FASD (including priority groups and people at increased risk)
 - Diagnosis and Screening
 - Prevention
 - Management and Support
 - Case study example
 - Questions
- This encompasses four of the key national priorities of the FASD Strategic Action Plan 2018-2028 (Dept of Health, 2018), which aims to improve the quality of life for children and adults who have FASD.

Prevalence of Alcohol Use in Australia

- Current Australian guidelines recommend that women abstain from alcohol when planning a pregnancy, during their pregnancy, and when breastfeeding, as no safe level of alcohol consumption has been established (NHMRC, 2009).
- Despite this, alcohol use is common among women in Australia.
- 2016 National Drug Strategy Household Survey :
 - ~47% consumed alcohol before knowing they were pregnant
 - ▶ 1 in 4 continued to drink once they became aware of their pregnancy
 - ➤ ~10% make no reduction in their consumption pattern



(AIHW, 2017)

Variation in the impacts of alcohol exposure





Prenatal exposure at moderate levels (3-4 drinks per occasion), or higher levels, increases the risk, type and severity of child problems.

Factors that may influence variation in the consequences of maternal drinking:

- Maternal drinking pattern (heavy binge drinking particularly harmful)
- Differences in maternal metabolism
- Differences in genetic susceptibility
- Timing of the alcohol consumption during pregnancy (exposure in the early weeks of pregnancy may be particularly harmful)
- Variation in the vulnerability of different brain regions

History of FASD

- In 1973, the term *Fetal Alcohol Syndrome* (FAS) was coined by Jones and Smith.
- By 2000 it was recognised that alcohol exposure in utero may result in neurodevelopmental problems in the absence of facial and other physical features and the term *Fetal Alcohol Spectrum Disorder* (FASD) was coined.
- ► FASD is a diagnostic term for a range of physical, cognitive, behavioural and neurodevelopmental abnormalities which results from maternal drinking in pregnancy.
- ► FASD is used as an 'umbrella' term to encompass the diagnostic categories of Fetal Alcohol Syndrome, partial Fetal Alcohol Syndrome, Alcohol-Related Neurodevelopmental Disorder and Alcohol-Related Birth Defects.

Fetal Alcohol Spectrum Disorder (FASD)

Fetal Alcohol Syndrome Partial Fetal Alcohol Syndrome Alcohol-Related Neurodevelopmental Disorder

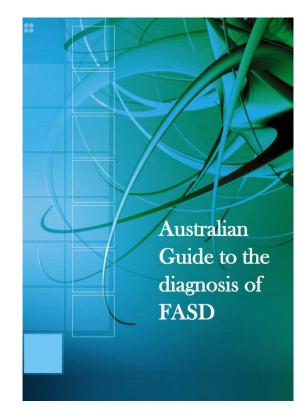
Alcohol-Related Birth Defects

Prevalence of FASD

- Nationally, estimates based on state and territory data indicate likely rates at 0.01 to 0.60 per 1,000 births in the total population (Hidden Harm, 2012).
- ► This is likely to be an underestimate, and it has been suggested that ~2% of all Australian babies may be born with some form of FASD.
- However, there are vulnerable populations with disproportionally high rates of FASD.
- ► For Aboriginal and Torres Strait Islander Australians, the incidence if FASD may range from 1.87 to 4.7 per 1,000 births.
- Fitzroy Valley Indigenous community: 194/1,000 births diagnosed from 2002-2003 (Fitzpatrick, 2015).
- ▶ Juvenile justice system: 36% of 10-18 years olds at Banksia Hill Detention Centre (WA) diagnosed with FASD (Bower, 2018).

Diagnosis and Screening

https://www.fasdhub.org.au/siteassets/pdfs/australianguide-to-diagnosis-of-fasd_all-appendices.pdf



(Bower & Elliott, 2016)

Diagnosis

- The diagnosis emphasises the importance of severe neurodevelopmental impairment that results from acquired brain injury caused by prenatal alcohol exposure (PAE).
- Formal diagnosis is complex and ideally requires a multidisciplinary clinical team to evaluate individuals for:

1. Confirmation of alcohol exposure during pregnancy

2. Neurodevelopmental problems

(severe impairments due to abnormal development of the brain and central nervous system)

3. Facial abnormalities

in the context of general a physical and developmental assessment

Diagnosis continued...

- Australian Guide to the diagnosis of FASD recommends that the diagnosis is divided into one of two sub-categories:
 - FASD with three sentinel facial features (without a requirement for growth impairment);
 - FASD with less than three sentinel facial features.
- Facial features associated with FASD:



- Small palpebral fissures (short horizontal length of the eye opening)
- Smooth philtrum (little or no ridges between the upper lip and nose)
- ► Thin upper lip (with small volume)

FETAL ALCOHOL SPECTRUM DISORDER			
	Diagnostic categories		
Diagnostic criteria	FASD with 3 Sentinel Facial Features	FASD with < 3 Sentinel Facial Features	
Prenatal alcohol exposure	Confirmed or unknown	Confirmed	
Neurodevelopmental domains - Brain structure/Neurology - Motor skills - Cognition - Language - Academic Achievement - Memory - Attention - Executive Function, including impulse control and hyperactivity - Affect Regulation - Adaptive Behaviour, Social Skills or Social Communication	Severe impairment in at least 3 neurodevelopmental domains	Severe impairment in at least 3 neurodevelopmental domains	
Sentinel facial features - Short palpebral fissure - Smooth philtrum - Thin upper lip	Presence of 3 sentinel facial features	Presence of 0, 1 or 2 sentinel facial features	

Co-morbid conditions

- FASD may be associated with a wide range of co-morbidities. These include:
 - Developmental and behavioural conditions e.g. Language disorders, ADHD, anxiety disorders, Autism Spectrum Disorder
 - ► Genetic (chromosomal) abnormalities
 - Congenital malformations



Consequences of FASD





Physical and functional difficulties

- Changes to the architecture of the brain, its structure and neuronal networks
- Damage to brain functions including attention, communication, sensory processing, self-regulation, impulse control
- May lead to the later development of mood and behavioural regulation difficulties linked to mental health difficulties

▶ Environment influences

- Parenting and/or educational support services t\do not match needs
- Early trauma and adversity

Consequences of FASD



- FASD has lifelong consequences and can lead to significant impairments including:
 - Difficulties accessing education services
 - Substance use
 - Mental health problems
 - Difficulties living independently
 - Problems obtaining and maintaining employment
 - Involvement in the justice system
 - Lowered life expectancy

Importance of screening

- Health professionals play a crucial role in FASD prevention – more than 50% of women identify health professionals as their preferred information source about alcohol use in pregnancy (Elliott, 2015).
- ▶ 45% of doctors routinely asked about alcohol consumption in pregnancy and only 25% routinely provided information about the potential consequences of alcohol use in pregnancy. Only 13% of GPs provided advice consistent with the current Australian Guidelines (Payne, 2015).
- Pre-pregnancy counseling to provides an opportunity to:
 - Discuss alcohol consumption with women and their partners
 - Identify and assist women who are at risk to access treatment and increased support to reduce the risk of alcohol related harm to the fetus



(Elliott, 2018)

Screening with the AUDIT-C

- The AUDIT-C is a modified version of the 10 questions AUDIT instrument.
- It can be used to identify potential risk of hazardous drinking behaviour or alcohol use disorders.
- Stigma and fear of negative consequences may cause women to under-report alcohol consumption during pregnancy.

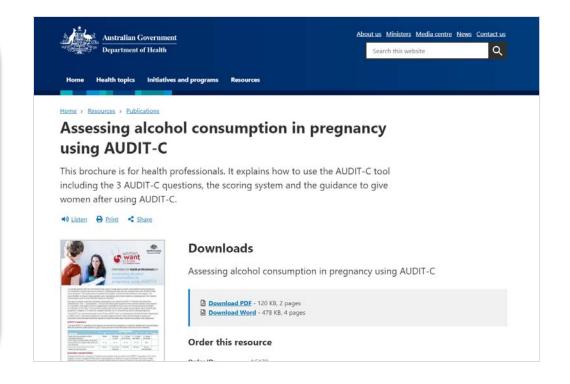
1.	How often do you have a drink containing alcohol?
	a. Never
	b. Monthly or less
	c. 2-4 times a month
	d. 2-3 times a week
	e. 4 or more times a week
2.	How many standard drinks containing alcohol do you have on a typical day?
	a. 1 or 2
	□ b. 3 or 4
	c. 5 or 6
	☐ d. 7 to 9
	e. 10 or more
3.	How often do you have six or more drinks on one occasion?
	a. Never
	b. Less than monthly
	c. Monthly
	d. Weekly
	e. Daily or almost daily

Screening with the AUDIT-C

AUDIT-C

One way to assess a woman's alcohol consumption is by using the AUDIT-C (Alcohol Use Disorders Identification Test – Consumption). This tool has three short questions that estimate alcohol consumption in a standard, meaningful and non-judgemental manner.

<u>alcohol.gov.au/internet/</u> <u>alcohol/publishing.nsf/ Content/wwtk-audit-c</u>



Prevention



- Factors associated with heavier alcohol consumption in pregnancy can include:
 - Limited information about the risks of alcohol consumption in pregnancy
 - Alcohol dependency
 - Other substance use
 - High life stress
 - Intimate partner violence
 - Mental health problems
 - Poverty
 - Malnourishment
 - Part of a community with social norms promoting drinking
 - Partner drinking
- Prevention of FASD therefore needs to include women alongside a focus on the broader relational, familial, social and cultural context.

(FASD Hub, 2018; McBride, 2011)

Management and Support

National Fetal Alcohol Spectrum Disorder (FASD) Strategic Action Plan 2018-2028

 Useful resources listed in the National Fetal Alcohol Spectrum Disorder (FASD) Strategic Action Plan 2018-2028 (Dept of Health, 2018)

FASD Hub

The FASD Hub is a one-stop shop for all information, tools, resources, research and consumer support about FASD in Australia.

The Hub is a repository for clinically accurate information, diagnostic tools, referral services, research and consumer information.

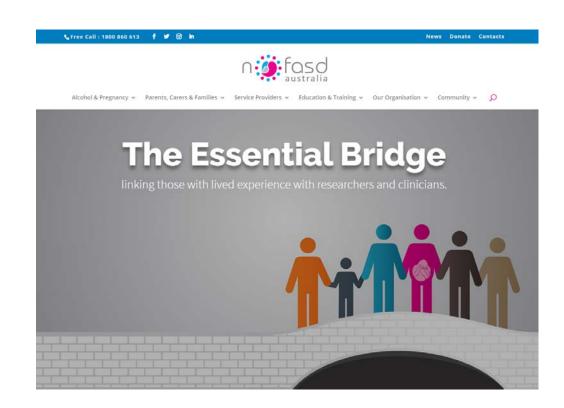
fasdhub.org.au



NOFASD Australia

National Organisation for Fetal Alcohol Spectrum Disorder (NOFASD) Australia's mission is to provide a strong and effective voice for individuals and families living with FASD, while supporting initiatives across Australia to promote prevention, diagnosis, intervention and management.

nofasd.org.au



Pregnant Pause

The 'Pregnant Pause' campaign encourages Australians to go alcohol free during their pregnancy, or the pregnancy of their partner, family member, friend or loved one.

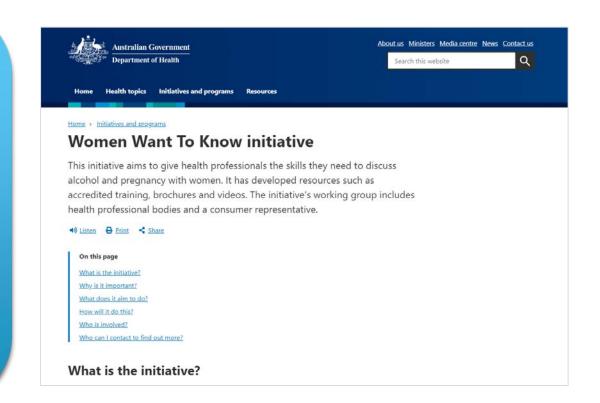
pregnantpause.com.au



Women Want to Know

The 'Women Want to Know' project encourages health professionals to routinely discuss alcohol and pregnancy with women and to provide advice that is consistent with the Australian Guidelines to Reduce Health Risks from Drinking Alcohol.

http://alcohol.gov.au/
internet/alcohol/publishing.
nsf/Content/wwtk



Australian Guide to the diagnosis of FASD

The Australian Guide to the Diagnosis of FASD was produced to assist clinicians in the diagnosis, referral and management of Fetal Alcohol Spectrum Disorder. It contains the Australian Fetal Alcohol Spectrum Disorder (FASD) Diagnostic Instrument and information about how to use the instrument.

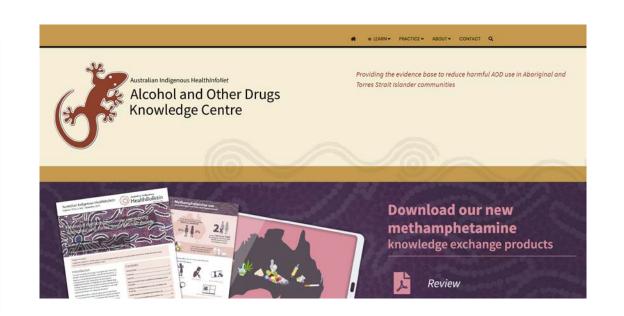
www.fasdhub.org. au/fasd-information/ assessment-and-diagnosis/ guide-to-diagnosis/



AOD Knowledge Centre

The Alcohol and Other Drugs Knowledge Centre was established by the Australian Indigenous HealthInfoNet in partnership with the National Drug Research Institute, the National Drug and Alcohol Research Centre and the National Centre for Education Training on Addiction.

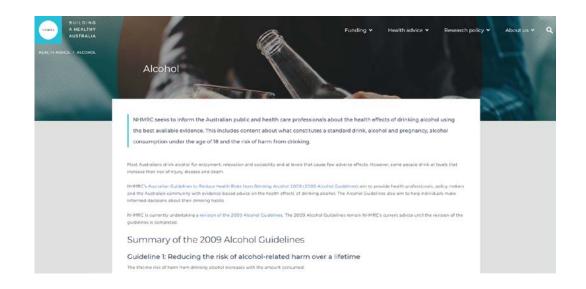
aodknowledgecentre.ecu. edu.au/about/



Australian Guidelines to Reduce Health Risks from Drinking Alcohol

NHMRC's Australian Guidelines to Reduce Health Risks from Drinking Alcohol 2009 (2009 Alcohol Guidelines) aim to provide health professionals, policy makers and the Australian community with evidence-based advice on the health effects of drinking alcohol.

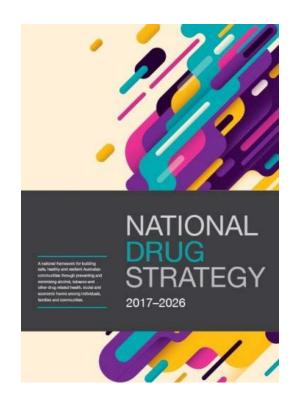
nhmrc.gov.au/health-topics/ alcoholguidelines



FASD in Australia: An update

Monograph of the Intergovernmental Committee on Drugs Working Party on Fetal Alcohol Spectrum Disorders

nationaldrugstrategy.gov.au/ internet/drugstrategy/ publishing.nsf/Content/ mono-fasd



Understanding and addressing the needs of children and young people living with FASD – A resource for teachers

This practical education resource is designed to support school leaders, teachers, Aboriginal educators and the broader school community to recognise, understand and work effectively with students living with FASD in schools.

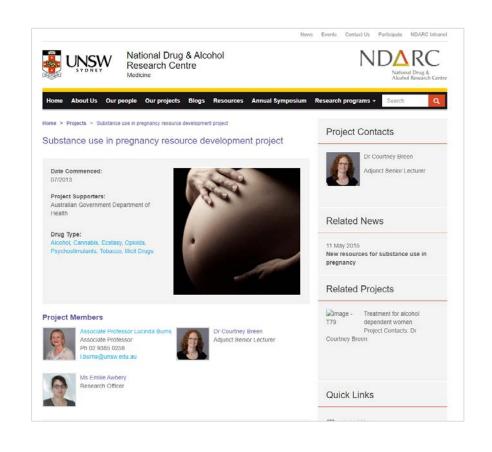
kimberleyfasdresource.com.au/pdf/FASD_ ResourceForTeachers.pdf



Substance use in pregnancy resource project

The National Drug and Alcohol Research Centre was engaged to develop a resource for the identification, management and, if appropriate, referral of women who are pregnant and have a substance misuse problem.

ndarc.med.unsw.edu.au/ project/substanceusepregnancy-resourcedevelopmentproject



Emerging Minds

- New suite of Fetal Alcohol Spectrum Disorder (FASD) resources, including podcasts and webinars
- http://emergingmindsuse.cmail20.com/t/ViewEmail/j/E7AC0C3C1F31C8A 32540EF23F30FEDED/C0D75E8BCF379AD85281 BC0AA5ABFD98

Trouble reading? View online version

Visit Web Hub

Emerging Minds.

eNews September 2019

New suite of Fetal Alcohol Spectrum Disorder (FASD) resources Latest podcast: Fetal Alcohol Spectrum Disorder with Dr. Sara McLean Upcoming webinar: Working to support children and families living with Fetal Alcohol Spectrum Disorder



Case study example



Infancy Challenges

- Challenge 1
- Challenge 2
- Challenge 3

Case study example



Childhood Challenges

- Challenge 1
- Challenge 2
- Challenge 3

Case study example



Adolescent Challenges

- Challenge 1
- Challenge 2
- Challenge 3

Local services for FASD



The Child Development Service, RNSH

Tertiary multidisciplinary assessment for children 0-5 where developmental concerns are more serious or complex in nature, especially where early intervention doesn't appear to be working well Address: L2, Community Health Centre, 2C Herbert St, St Leonards NSW 2065 Tel 02-9462 9288 Email MSLHD-CDS@health.nsw.gov.au website www.nslhd.health.nsw.gov.au / CYFH

NSLHD Community Paediatrics

- For children 0-16 with developmental and behaviour problems
 - Hornsby Community Health Centre Ph 9987 3044
 - RNS-Ryde Community Health Building Ph 9462 9200
 - Northern Beaches Dalwood Children's Services Ph 9951 0300
 - Website <u>www.nslhd.health.nsw.gov.au/CYFH</u>
 - <u>Substance Use in Pregnancy and Parenting Service</u> Support and treatment for women who are using alcohol during their pregnancy





www.snhn.org.au

Local services for FASD



- For assistance selecting services see:
 - Family Referral Service
 - NSLHD Child Youth and Family Health
 - NSLHD Child Youth and Mental Health Service (CYMHS)
 - SNHN Health Pathways See pages on 'Family and Community Support' and 'Child at Risk'







Questions?



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Further info

For video recording and handouts of this webinar, visit https://sydney.edu.au/research/centres/matilda-centre.html and click on 'Workforce Training'

To complete CPD assessment (live viewers only) https://www.surveymonkey.com/r/9MK2JYH



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