



Prevalence & safety of acamprosate use in pregnancy

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NEED TO
STOP
DRINKING

Treatment options for alcohol use disorders

Medications:

- Acamprosate (Campral)
- Naltrexone (Revia)
- Disulfiram (Antabuse)



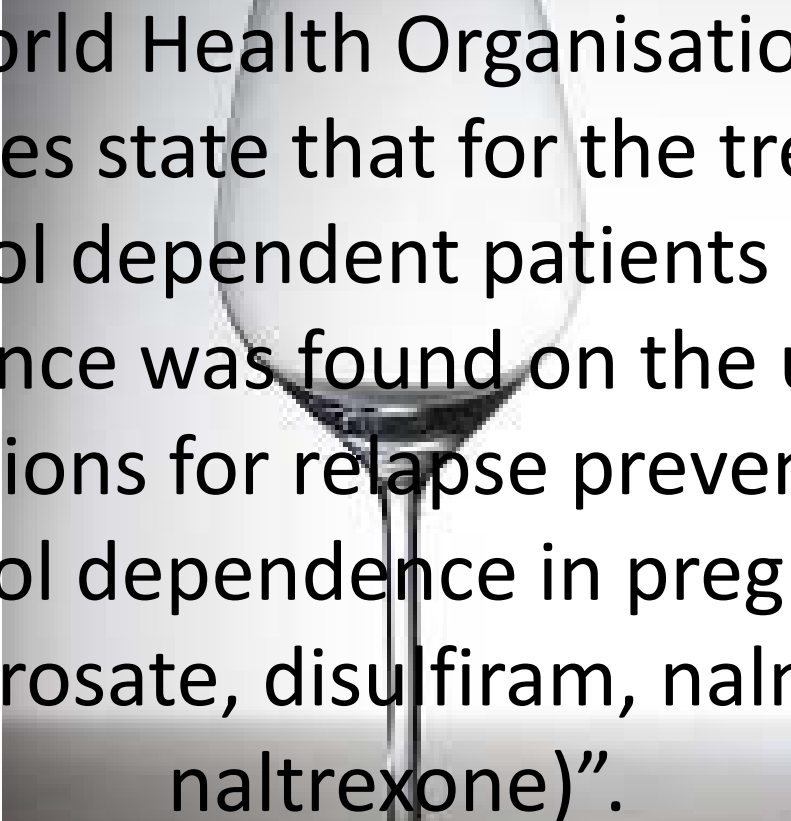
Risks associated with alcohol use in pregnancy

Pregnancy loss

Fetal alcohol spectrum disorders:

- Abnormal facial features
- Low birth weight
- Intellectual and learning disabilities
- Behavioural problems
- Congenital anomalies

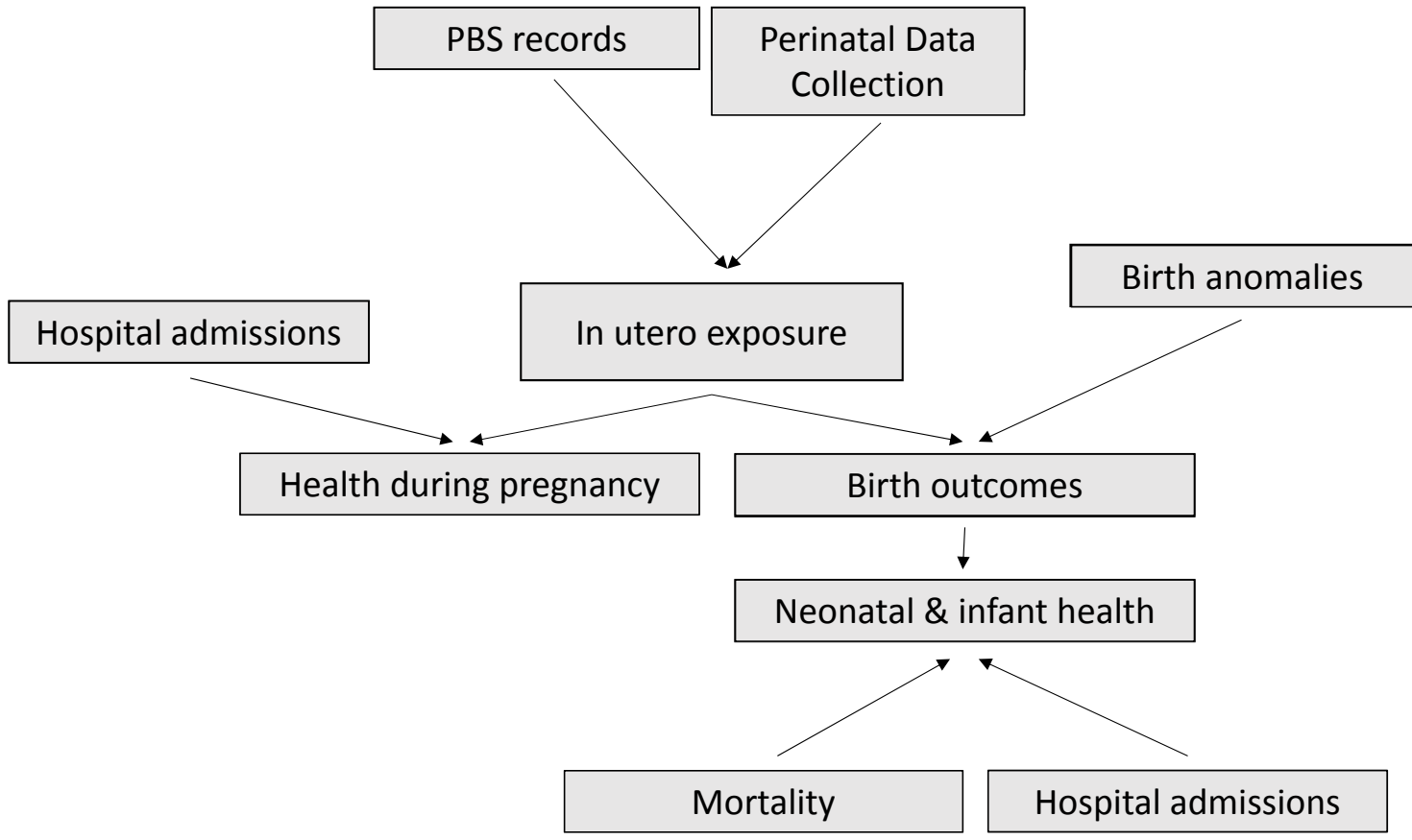





The World Health Organisation 2014 guidelines state that for the treatment of alcohol dependent patients that “No evidence was found on the use of medications for relapse prevention for alcohol dependence in pregnancy (acamprosate, disulfiram, nalmefene, naltrexone)”.

MUMS: Maternal Use of Medications and Safety

- PBS data – Oral naltrexone and acamprosate
- CHeReL – Centre for Health Record Linkage (NSW)
- Control groups
 - Alcohol and non-alcohol comparison group
 - Matched one smoking status, Indigenous status, year of birth (baby), year of birth (mother)





**Is the use of
acamprosate
common during
pregnancy in NSW?**

923,259 pregnancies

910,652 eligible pregnancies

71 acamprosate pregnancies

7.7 pregnancies per 100,000

	Acamprosate	Alcohol comparison	Community comparison
Number	54	162	162
Age at birth	31.2 ± 5.4	31.2 ± 5.1	31.2 ± 5.2
Smoked during pregnancy	48.2%	48.2%	48.2%
Previous pregnancies	1.5 ± 1.5	1.6 ± 1.9	1.2 ± 1.3*
Married	50.9%	60.8%	75.8%*
Private health insurance	20.0%	20.4%	30.4%
Socio-economic status			
- Upper 25%	13.0%	18.0%	16.7%
- Lower 25%	22.2%	31.1%	23.5%
Recent history of alcohol hosp.	38.9%	100.0%*	1.2%*

* P < 0.05

A black and white photograph showing a close-up of a person's hands. The hands are clasped together in a supportive grip, with fingers interlaced. The skin appears slightly wrinkled, suggesting an older individual. The background is blurred, showing what might be a patterned fabric or a tiled surface. Overlaid on the center of the image is the text "What complications occur during pregnancy?" in a white, sans-serif font.

What complications
occur during
pregnancy?

	Acamprosate (n = 54)	Alcohol (n = 162)	Community (n = 162)
All admissions (adm/pt)	2.2	2.1	1.4
Trimester 1 (adm/pt)	0.3	0.2	0.1
Trimester 2 (adm/pt)	0.4	0.2	0.1
Trimester 3 (adm/pt)	1.4	1.6	1.2
Post-partum (adm/pt)	0.1	0.1	0.0
Pregnancy adm (adm/pt)	1.4	1.8*	1.3
Alcohol adm (adm/pt)	0.7	0.2	0.0*

* P < 0.05

**What about the
babies?**



Mortality

	Acamprosate	Alcohol	Community
	(n = 54)	(n = 162)	(n = 162)
Stillbirth	0.0%	1.2%	1.9%
Neonatal (0 – 28 days)	0.0%	0.0%	0.0%
Infant (29 – 365 days)	0.0%	0.6%	0.0%

Congenital Abnormalities

	Acamprosate	Alcohol	Community
	(n = 54)	(n = 162)	(n = 162)
Reportable abnormalities	<9.3%	4.9%	6.2%
Fetal alcohol syndrome	<9.3%	0.0%	0.0%

Birth Outcomes

	Acamprosate	Alcohol	Community
	(n = 54)	(n = 162)	(n = 162)
Est gestation (wk)	38.8	38.7	38.4
Pre-term birth (<37 weeks)	< 9.7%	11.7%	11.7%
Apgar, 5 mins	9.0	8.8	8.9
Length of stay (median, IQR)	3 (2 – 4)	4 (2 – 5)	3 (2 – 5)
Special care/NICU (%)	27.8%	30.2%	15.5%*

* P < 0.05

Birth size

	Acamprosate	Alcohol	Community
	(n = 54)	(n = 162)	(n = 162)
Birth Weight	3,187g	3,143g	3,165g
Small for GA	14.8%	21.6%	17.9%
Birth weight <2500g	11.1%	10.5%	11.1%

Infant health - Hospitalisation

	Acamprosate (n = 54)	Alcohol (n = 162)	Community (n = 162)
Hospital admissions/pt	1.2	1.4	1.2
Days in hospital/pt	4.3	5.9	5.8
Median LOS/admission	3 (2 – 4)	3 (2 – 5)	3 (2 – 5)

Conclusions

- Very low rates of acamprosate use during pregnancy
- Generally unremarkable health outcomes
- Promising given the prevalence and harm associated with alcohol use in pregnancy
- Limited sample size
- Further research



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Questions



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