

WHAT IS FASD?

Fetal Alcohol Spectrum Disorder (FASD) is a diagnostic term used to describe a group of neurodevelopmental (or brain) impairments that result from exposure to alcohol before birth.

These impairments can include difficulties with physical activities, language, memory, learning and behaviour. FASD is a 'spectrum' because there is a wide variation in the type and severity of impairments people experience.

In Australia, health professionals can make a diagnosis using one of the following terms:

- FASD with three sentinel facial features
- FASD with less than three sentinel facial features

Facial features specific to FASD



Not everyone with FASD will have any of these facial features

Small palpebral fissures – small eye openings

Smooth philtrum – no indent between the nose and upper lip

Upper lip is very thin

FACT: Only about 1/3 of people will have any of these facial features, but everyone will have neurodevelopmental impairments.

WHY DOES ALCOHOL CAUSE FASD?

Alcohol is a teratogen (toxin). Teratogens are known to cause abnormalities and birth defects following exposure during pregnancy. Alcohol affects the normal development of a fetus, including the brain and other organs.

A baby's brain develops throughout the nine months of pregnancy and therefore can be impacted at any stage during pregnancy.

Alcohol crosses the placenta and the unborn baby is exposed to the same blood alcohol level as the mother, because the liver of the developing baby is not fully formed until late in pregnancy.

This means the baby has the same (or possibly even higher) blood alcohol content as the mother, and it remains at that level for longer.

HOW MUCH ALCOHOL CAUSES FASD?

The rates of unplanned pregnancy in Australia are almost 50% - and there is a link between binge drinking and unplanned pregnancies.



Any amount of alcohol, at any point during pregnancy can cause FASD.

The actual risk of harm is hard to predict and is different for everyone.

Risk factors

Exposure

- Dose (how much)
- Timing (when during the pregnancy)
- Frequency (how often)

Maternal

- Age
- General health and medical conditions
- Levels of stress
- Other drug use
- Body composition (percentage of fat, muscle, water, bone)

WHY DON'T WE KNOW FOR SURE?

In many areas of medicine, health professionals and researchers can conduct clinical trials to identify what causes a disease or condition.

It would be unethical to do clinical trials and ask women to drink specific amounts of alcohol. We are relying on memory, and accuracy of the information provided by birth mums when a child is being assessed. Many of these children are in out of home care so it is difficult to get this information. This work can be completed in the laboratory using mice; however we then need to factor in real life experiences, trauma, stress etc. There are twin studies where one baby is more severely affected than the other.

The Australian Guidelines to Reduce Health Risks From Drinking Alcohol state:

To prevent harm from alcohol to their unborn child, women who are pregnant or planning a pregnancy should not drink alcohol.

For women who are breastfeeding, not drinking is the safest option.



HOW DO WE MEASURE A STANDARD DRINK?

Health professionals and researchers measure how much a person has been drinking using 'standard drinks'. Many people don't know what a standard drink is.

In Australia, a standard drink is any drink containing 10 grams of alcohol, regardless of container size or alcohol type (e.g. beer, wine, spirit).

One standard drink



285ml of full strength beer
375ml of mid strength beer
425ml of low strength beer



100ml of wine or champagne



30ml of spirits



275ml bottle of ready to drink/
premix beverage

IMPORTANT FACTS ABOUT FASD

- The effects may not be seen at birth
- Although the use of 'fetal' may imply that it only relates to babies, FASD has lifelong consequences and can be diagnosed in children, young people and adults
- People with FASD will have strengths and difficulties
- FASD occurs in all parts of Australian society where alcohol is consumed
- FASD is a social issue not just a medical condition

IMPAIRMENTS AND DIFFICULTIES ASSOCIATED WITH FASD

- Language
- Memory and learning abilities
- Motor skills (balance, co-ordination, handwriting)
- Understanding abstract concepts, time and money
- Unable to plan
- Unable to judge cause and effect
- Sensory – sound, touch
- Social connections and interactions



Lack of diagnosis and early support can lead to:

- Early school disengagement
- Drug and alcohol misuse
- Poor mental health
- Unemployment
- Engagement with the justice system (as victims and offenders)

Health and medical issues associated with FASD:

- Abnormal head circumference (small head size)
- Hearing and vision
- Kidney infections
- Musculoskeletal (rheumatoid arthritis, osteoarthritis)
- Congenital heart defects
- Cleft lip and palate

FASD can co-occur with:

- Trauma
- Intellectual disability
- Attention Deficit Hyperactivity Disorder
- Autism Spectrum Disorder
- Specific learning disorders
- Mental health problems

HOW ARE PEOPLE INFORMED ABOUT THE RISKS OF ALCOHOL USE IN PREGNANCY AND FASD?

It is important that everyone is aware of the risks of prenatal alcohol exposure - women, their partners, families and friends.

- Researchers have been working with health professionals to talk with women who are planning a pregnancy and their partners
- Health professionals, particularly GPs, midwives and obstetricians are being educated to ask and advise women of the risks of drinking alcohol during pregnancy
- Researchers are partnering with communities to raise awareness of the risks of prenatal alcohol exposure
- The government is funding campaigns to raise awareness of the risks of prenatal alcohol exposure
- Social media and websites



Website: www.fasdhub.org.au
Contact us: contact@fasdhub.org.au or 08 6319 1824