

# No alcohol during pregnancy is the safest choice.



## Take Action for Healthier Moms & Babies

Massachusetts ranks among the top 5 states in terms of the proportion of women aged 18–44 who drink alcohol.<sup>1</sup> The most recent data indicates that 64.1% of women of childbearing age reported they'd used alcohol in the last month. Almost 1 in 5 had engaged in binge drinking.

According to the American Congress of Obstetricians and Gynecologists (ACOG), **no amount of alcohol is safe in pregnancy.** Because many pregnancies are unplanned, and because critical aspects of fetal development occur before women know they are pregnant, health care providers can help avoid the devastating effects of Fetal Alcohol Spectrum Disorders (FASD) through direct communication with all

women of child-bearing age. This means that medical providers in all specialties who work with women have an opportunity to make a difference, by doing the following:

- Encourage all patients of childbearing age to avoid alcohol at any time they could become pregnant.
- Reinforce that using reliable birth control and condoms is a priority for all those who use alcohol, especially during times when they could become pregnant.
- Help women who want to become pregnant to create a plan to stay alcohol-free, before they try to conceive.

<sup>1</sup> Centers for Disease Control and Prevention [CDC]. State-Specific Alcohol Consumption Rates for 2010. [www.cdc.gov/ncbddd/fasd/monitor\\_table.html](http://www.cdc.gov/ncbddd/fasd/monitor_table.html). Accessed January 31, 2014.





## Alcohol & Pregnancy: The Facts

### *Massachusetts babies are at high risk.*

- Most Massachusetts mothers (61.5%) report drinking in the three months before becoming pregnant.<sup>2</sup> And over a quarter (26.7%) of mothers report binge drinking in the three months prior to becoming pregnant.<sup>3</sup>
- Media reports, friends, family and others may not have all of the factual information. But the science is clear: The safest choice is to abstain from drinking alcohol throughout the entire pregnancy.

### *Alcohol is a teratogen that inflicts serious, lifelong harm to a fetus.*

- Alcohol readily crosses the placenta and may cause neurobehavioral effects quite early in pregnancy.
- Alcohol use during pregnancy is the most common cause of preventable intellectual disabilities.

<sup>2</sup> Massachusetts Department of Public Health [MDPH]. (2013). *Massachusetts Pregnancy Risk Assessment Monitoring System (PRAMS) 2009/2010 Surveillance Report*, p. 89.

<sup>3</sup> MDPH, p. 89.

- Babies impacted by alcohol suffer from a range of serious, lifelong problems from Fetal Alcohol Spectrum Disorder, which can include physical abnormalities, mental impairments and behavioral issues.<sup>4</sup> Many of these problems may not be noticed until children enter school, or later. Even at lower levels of alcohol use, children still may have problems with focusing, memory and organization.<sup>5,6</sup>
- About 50% of women report their pregnancy was unintended.<sup>7</sup> Since most women of childbearing age drink alcohol, many inadvertently drink early in pregnancy.
- **Thus, according to ACOG, the Centers for Disease Control and Prevention (CDC) and the Massachusetts Department of Public Health (MDPH), the healthiest advice for women of child-bearing age is: “do not drink alcohol” when pregnancy may be possible.**

<sup>4</sup> American College of Obstetricians and Gynecologists. (2006). *Drinking and Reproductive Health: A Fetal Alcohol Spectrum Disorders Prevention Tool Kit*, p. 4.

<sup>5</sup> Kearney, M.H., Murphy, S., Rosenbaum, M. (1994). *Mothering on crack cocaine: A grounded theory analysis*. *Soc Sci Med.*, 38, 351-361.

<sup>6</sup> Lewis S.J., Zuccolo, L., Davey Smith, G., Macleod, J., Rodriguez, S., Draper, E.S., Barrow, M., Alati, R., Sayal, K., Ring, S., Golding, J., Gray, R. (2012). *Fetal Alcohol Exposure and IQ at Age 8: Evidence from a Population-Based Birth-Cohort Study*. *PLoS ONE*, 7(11):e49407.

<sup>7</sup> American College of Obstetricians and Gynecologists. p. 9.

## Health care providers should screen and discuss alcohol with all patients who could become pregnant.

- Because many women have unintended pregnancies or may not be aware they are pregnant for several weeks, intervention with **all** women of childbearing age will help prevent alcohol-exposed pregnancies.
- In one multicenter project, nearly 70% of women reduced their risk of an alcohol-exposed pregnancy within six months after brief interventions.<sup>8</sup>
- The U.S. Preventive Services Task Force (USPSTF) recommends that all providers screen all patients for alcohol use. Click on one of these tools **T-ACE**, **CRAFFT** (for younger women) or find other screening tools on the web.

## Women Welcome Information about Alcohol

- At least two studies have shown that women who are pregnant welcome information on alcohol or other drugs.<sup>9,10</sup>
- The more comfortable providers are with discussing alcohol use, the more likely women will be forthcoming with their alcohol use patterns.
- Motivational Interviewing (MI) is an evidence-based approach in which providers ask pros and cons of substance use, provide feedback, help establish a goal, and summarize the interaction. Visit <http://www.masbirt.org> for more details and information on training.

## A Few Minutes Help Prevent a Lifetime of Health Issues

A short conversation with women who may be, or become, pregnant can help avoid a lifetime of challenges for unborn babies and their families. It's critical to talk with patients *before* they conceive. Providers can help prevent FASD by explicitly discouraging the use of any alcohol when women are at risk of pregnancy, or by encouraging effective contraception. As always, the developmental level of younger women will shape your approach.

*Here are some examples of what you can say:*

- *"No alcohol during pregnancy is the safest choice, I recommend you to stop before you start trying to become pregnant."*
- *"Your baby could be harmed by alcohol before you even realize you're pregnant. Alcohol can have harmful effects when your embryo is still small enough to fit inside of the zero on a penny's date."<sup>11</sup>*
- *"No alcohol during pregnancy is the safest choice; if you drink, use condoms and effective protection."*



## Discuss Alcohol with Women Who Are Already Pregnant

If a woman uses alcohol and then finds she is pregnant, it is never too late to stop. The screening results can put her use into perspective. A healthy lifestyle without alcohol for the rest of her pregnancy is essential.

<sup>8</sup> Ingersoll K, Floyd L, Sobell M, Velasquez MM. Reducing the risk of alcohol-exposed pregnancies: a study of a motivational intervention in community settings. Project CHOICES Intervention Research Group. *Pediatrics* 2003; 111:1131-5.

<sup>9</sup> Kearney M.H. et al.

<sup>10</sup> Murphy, S., Rosenbaum, M. (1999). *Pregnant women on drugs: Combating stereotypes and stigma*. New Brunswick (NJ): Rutgers University Press.

<sup>11</sup> Collaborative Initiative on FASD [CIFASD]. (2012). *Fetal Alcohol Spectrum Disorders*, slide 8. <http://cifasd.org/>. Downloaded February 3, 2014. CIFASD Funded by National Institutes of Health/National Institute on Alcohol Abuse and Alcoholism.



### You can say:

- ***“If you have been drinking alcohol, you can still benefit your child by stopping now.”***
- ***“Try a festive mocktail.”*** Having something fun to drink can make it easier to avoid alcohol in social situations. Websites offer mocktail recipes you can drink from a cocktail glass.
- ***“If you are having trouble stopping alcohol use, I can help you find the support you need.”*** Pregnant women are a priority for the Massachusetts Department of Public Health Bureau of Substance Abuse Services. Women who have trouble avoiding alcohol during pregnancy may need a referral to an outpatient or residential program. The Institute for Health and Recovery staffs the Central Access Line for pregnant women seeking treatment for substance use issues and those who serve them. Call **617-661-3991** or **866-705-2807/TTY 617-661-9051**. Professionals or patients can also call **(800) 327-5050/TTY (888) 448-8321** or visit <http://www.helpline-online.com> 7 days a week. Health plans can give you counseling referral information. In Massachusetts state-funded and private programs address alcohol and other drug issues.

## Begin the Conversation. Get the Tools You Need.

For more information for patients on how alcohol and drugs affect birth, please download or order the following informative pamphlets from <http://mass.gov/maclearinghouse> at no charge:

- **When You’re Pregnant Your Baby Drinks What You Drink (English & Spanish)**  
<http://massclearinghouse.ehs.state.ma.us/product/SA3501kit.html>
- **Would We Give Our Baby Alcohol? No Way. (English & Spanish)**  
<http://massclearinghouse.ehs.state.ma.us/product/SA3503kit.html>
- **It’s the Same Risk for Every Pregnant Woman Everywhere (English & Spanish)**  
<http://massclearinghouse.ehs.state.ma.us/product/SA3507kit.html>

To protect children from the well-documented danger of prenatal alcohol exposure, be clear and consistent with pregnant women *“No alcohol during pregnancy is the safest choice.”*

**Thank you for your leadership in keeping Massachusetts women and babies healthier.**