



“But My Doctor Told Me It Was Ok to Drink....”

A Dialogue About Alcohol, Pregnancy and Community Support

In This Report:

- Why a Focus on Alcohol?
- Just a Little Bit of Alcohol: Research Briefs
- Can You Pick Out the Woman with a Drinking Problem?
- Survey Data from Kentucky OB Providers
- Resources for Support

In February, 2008, ABC’s Good Morning America ran a segment featuring an Obstetrician who stated that there is no risk to moderate drinking during pregnancy. In a statement of response, ACOG reiterated its long-standing position that no amount of alcohol consumption can be considered safe during pregnancy.

This is an opportunity to open up a conversation between women, physicians and Kentucky communities — all of whom who care deeply about supporting the wellness of women, children and families.

Physicians carry a heavy burden on behalf of the community, being named by most women as their most trusted source of medical information. Clear-cut guidance is given to women about other health topics during pregnancy: do not smoke, do not change the cat litter, do not eat raw shellfish. Women report feeling reassured by these unequivocally firm guidelines. They don’t have to guess. However, when it comes to alcohol (a known neurobehavioral teratogen), women are often left to weigh contradictory information on their own. Physicians deserve to feel supported in giving women a clear, no-risk message.

A Timeline of Prevailing Wisdom

1973: Fetal Alcohol Syndrome first identified, published in international medical journal, *Lancet*

1977: Secretary of US Department of Health issued warning to women that drinking 6+ drinks per day constituted clear risk to a fetus

1981: U.S. Surgeon General issued warning that women should abstain from alcohol when pregnant or when planning a pregnancy

1989: Congress passes Anti-Drug Abuse Act, requiring that every alcoholic beverage container carry a warning about not drinking during pregnancy

1992: Kentucky legislature passes Act that requires warning about drinking during pregnancy to be placed at all locations that sell alcohol

2005: U.S. Surgeon General reissues warning that women should abstain from alcohol when pregnant or when planning a pregnancy

Why Focus on Alcohol When So Many Other Drugs Are Also Used?

According to the Institute of Medicine's 1996 Report to Congress, "Of all of the substances of abuse, alcohol produces **by far** the most serious neurobehavioral effects in the fetus." This is due to the ability of alcohol's tiny molecules to pass freely through the blood-brain barrier. The developing brain is highly vulnerable to the effects of alcohol at all stages of pregnancy.

Although illicit substances and tobacco are issues of concern in Kentucky, statistics show that alcohol remains the most commonly used drug. According to Kentucky's 2007 National Household Survey on Drug Abuse, past 30 day use among people 18 and older are as follows:

- *Illicit drugs* (including marijuana): **8%**
- *Illicit drugs* (excluding marijuana): **4%**
- *Tobacco products*: **39%**
- *Alcohol*: **44%**
- *Binge drinking* (5+ drinks in one sitting): **23%**



Just A Little Bit of Alcohol: A Look at The Research

Research is moving from investigating the impact of moderate / high doses of alcohol to studying the effects of alcohol in low doses. Animal studies demonstrate that it requires a **lower** dose of alcohol to cause **neurobehavioral** damage than physical damage, which means that outward signs are not always present when alcohol is used in lower amounts. *This, however, does not mean that the Central Nervous System has escaped harm.*

Many physicians choose to advise abstinence until research proves any amount of alcohol is safe, rather than advising a small amount of alcohol until research proves it harmful.

A study published in *Pediatrics* (Vol 108, No 2, August 2001) demonstrated a link between child behavior at age 7 and low doses of prenatal alcohol exposure. Children with any prenatal alcohol exposure (as little as one drink per week) were 3.2 times as likely to have Delinquent and Aggressive scores in the clinical range, as compared to non-alcohol-exposed children, controlling for other factors with adverse behavioral outcomes.

This study, and other recent studies, indicates that low doses of alcohol during pregnancy **MAY** cause Central Nervous System damage that manifests in behavioral issues later on. Many physicians feels it is not worth the risk.

Chart of Teratogenic Effects: Institute of Medicine's 1996 Report to Congress

	Alcohol	Heroin	Marijuana	Tobacco	Cocaine
Subnormal IQ	x				
Developmental delays	x		x	x	
Sensory deficits	x			x	
Fine motor deficits	x				
Attention deficits	x		x	x	
Hyperactivity	x			x	
Gross brain damage	x				
Neonatal withdrawal	x	x		x	x
Prematurity	x				x

Can You Tell Which Woman Struggles to Control Her Drinking?



Of Course Not.

Imagine this scenario: A young woman, pregnant, is visiting her doctor for a regular prenatal visit. She is well-dressed, on time and happy to talk about her pregnancy and her baby. *What isn't apparent is this: she has struggled with a drinking problem in the past and is white-knuckling it not to drink when she's pregnant.* She hears her doctor say this: "It's ok for you to drink a little bit of alcohol. Maybe a glass of wine with dinner every once and a while."

What did she just hear? **"My doctor said it's ok for me to drink. Some women should just drink a little, but I could drink more than that because I have a higher tolerance / I can handle alcohol better than most women / I have more stress in my life."**

Women with addictions look like all other women and can be kindergarten teachers, soccer moms, lawyers.

No one can control how she might interpret any advice about drinking, so "nine months without alcohol" is the only 100% risk-free medical opinion, according to ACOG, and AMA and the U.S. Surgeon General.

Women with addictions live and work in our communities, often keeping their secret hidden. Don't assume that you will recognize her when she walks into your office.

Physicians who routinely talk with pregnant women about alcohol use give the following advice about having this conversation:

- "I talk about addiction like I would talk about any other medical issue. It's not a moral issue. She needs me to be brave enough to have this conversation with her because she might be too afraid to bring it up on her own. I tell her that she has a treatable disease and that I am recommending treatment as a part of her care."
- "Personally, I am not convinced that an occasional glass of wine will cause harm, but I always give a message of "absolutely no alcohol during pregnancy" because it is my responsibility to give medical guidance that carries the least possible risk."
- "There are many reasons she might not tell the truth about her alcohol use. She may be afraid, embarrassed or ashamed of what you will think of her. Think about your deepest, most hidden secret. What could someone do to help you feel safe enough to share that secret? Those are the same things I need to do to help her feel safe enough to share."



Kentucky OB/GYN Providers: Opinions and Practices

In 2009, the University of Louisville conducted a survey with OB/GYN providers through the Kentucky Medical Association. **112** providers responded to the survey, representing both urban and rural practices in all regions of the state. The following information was reported in this statewide survey:

The majority of Kentucky OB providers state that there is no proven safe time or safe amount of alcohol during pregnancy, and that it is difficult to identify which patients may be struggling with a drinking problem.

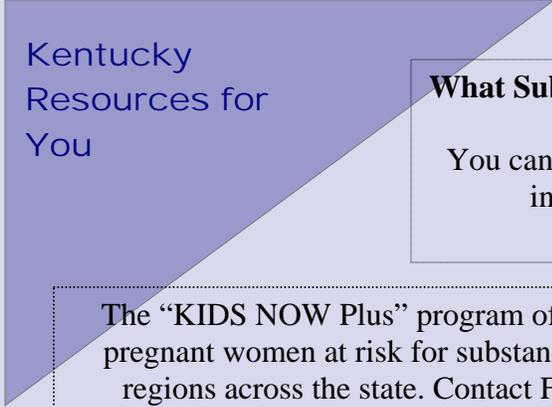
In your opinion, when is the safest time for a pregnant woman to drink alcohol?	
It's ok if she drinks during the third trimester	6.70%
No time is safe	78.90%
It's safe for her to drink any time during pregnancy	4.40%
Not Sure	10%

It is easy for me to identify a patient with an alcohol abuse problem.	
Strongly Agree	2.20%
Agree	12.20%
Disagree	61.10%
Strongly Disagree	24.40%

In your opinion, how much alcohol is safe for a pregnant woman to drink?			
Absolutely None	An occasional glass of wine will not cause harm	A couple of drinks each week will not cause harm	Not Sure
67.80%	27.80%	3.30%	1.10%



When asked how much alcohol was safe for a pregnant woman to drink, 88.6% of female providers answered "Absolutely None", as compared to 54.5% of male providers.



What Substance Abuse Treatment Programs are Available in My Area?
 You can use the online "Treatment Locator" to find specific inpatient and outpatient resources in your area:
<http://dasis3.samhsa.gov/>

The "KIDS NOW Plus" program offers free case management and support services to pregnant women at risk for substance abuse issues. This program is available in many regions across the state. Contact Fran Belvin, the Program Administrator, for more information: Fran.belvin@ky.gov OR 502-564-4456.

For more information about research / information in this report, the effects of alcohol during pregnancy, screening tools, substance abuse referrals or other resources, please contact the Fetal Alcohol Spectrum Disorders Prevention Enhancement Site. Coordinator: Laura Nagle (Lmnagle@bluegrass.org OR 859-624-3622)

