

MANITOBA ADDICTIONS AWARENESS WEEK

| | |
|------------------|--|
| TOPIC: | Fetal Alcohol Spectrum Disorder |
| AUDIENCE: | Grades 7 - 12 |
| OUTCOME: | <p>Explain the different consequences, related to different variables of taking harmful and beneficial drugs or other substances.</p> <p>Identify community agencies and resources available to support the prevention of substance use and abuse.</p> <p>Describe responsible behaviours for a healthy pregnancy.</p> <p>Analyze issues concerning the use and abuse of legal and illegal substances.</p> |

Fast Facts on Fetal Alcohol Spectrum Disorder

What is Fetal Alcohol Spectrum Disorder (FASD)?

Fetal Alcohol Spectrum Disorder (FASD) is the overall term currently used to describe the entire range of disabilities, birth defects, etc. associated with damages resulting from alcohol use by a mother during pregnancy. This range includes Fetal Alcohol Syndrome and partial Fetal Alcohol Syndrome (FAS/pFAS), Alcohol Related Brain Disorder, Alcohol Related Neurological Disorder, etc. Partial Fetal Alcohol Syndrome (pFAS) was previously known as Fetal Alcohol Effects therefore FAS/FAE = is now better defined by the terms FAS/pFAS.

Fetal Alcohol Syndrome (FAS) is: A cluster of birth defects caused by consumption of alcohol during pregnancy.

- The damage caused by fetal alcohol exposure is permanent.
- FAS is preventable.
- FAS should be determined by a medical diagnosis.

Features of Fetal Alcohol Syndrome (FAS)

- *Growth retardation* - Babies may grow at a slower than normal rate during pregnancy and after birth. Children are typically small and skinny, growing into short adults.
- *Appearance* - The FAS child has distinct facial features, these may include some or all of the following: shortened eye slits, flattened mid-face, a flattened midline ridge between the nose and lip, thin upper lip, and other features.
 - Please note: Facial features may fade as the child grows. Using facial features alone to identify FAS is not advised, as this can promote a stereotypical image of the FAS affected person.

- *Brain and central nervous system* - The most critical effect of alcohol on the fetus is the permanent damage to the brain and central nervous system. This can include:
 - Small brain and head circumference
 - Brain malformations
 - Developmental delay
 - Intellectual impairment
 - Behavioral disorders,
 - Learning disabilities
 - Attention Deficit Disorder
 - Hyperactivity.

What is Partial Fetal Alcohol Syndrome (pFAS)?

pFAS (Partial Fetal Alcohol Syndrome) previously referred to as FAE : Refers to an individual who has been exposed to maternal drinking and has one or two FAS characteristics.

- Like FAS, pFAS is preventable.
- pFAS is not the less severe form of FAS.
- FAS and pFAS are known as the leading causes of birth defects and developmental delay in North American children.

Features of Partial Fetal Alcohol Syndrome (pFAS)

- *Appearance* - A child with pFAS may look normal but still suffer damage to the brain and nervous system.
- *Behavior and learning* - The most critical effect of alcohol is permanent damage to the fetal brain and central nervous system. The learning and behavioral characteristics of FAS and pFAS are similar.
 - pFAS will show itself in the child as developmental delay, intellectual impairment, behavioral disorders, learning disabilities, attention deficit disorder and hyperactivity
 - Persons with pFAS may function far below their actual age in school and socially.
 - Poor judgement, learning difficulties, impulsive behavior and poor social and communications skills are common characteristics.

Reference: Information from *It Takes a Community Resource Manual* - Aboriginal Nurses Association of Canada & Health Canada

Where is Information on FAS/pFAS available?

- FAS/E Resource Centre - 944-6321
- Addictions Foundation of Manitoba Library – 1-866-638-2568
- AFM website: www.afm.mb.ca
- Canadian Centre on Substance Abuse Website - <http://www.ccsa.ca/fas/> visit this database for a list of current resources, terms and acronyms
- NorthFASD Northern and rural MB discussion group/information source - <http://groups.google.com/group/northfasd>

Other sites and resources are listed in the drug awareness curriculum *Tough Kids and Substance Abuse* available at AFM Library.

FAST FACTS ABOUT FETAL ALCOHOL SYNDROME/Pfas

- ◆ FAS is preventable.
- ◆ Drinking [alcohol] at any time during pregnancy may damage [fetal] brain tissue.
- ◆ The current recommendation in Canada and the U.S.A is to abstain from alcohol completely during pregnancy.
- ◆ FAS is now recognized as the number one known cause of mental handicap and birth disorders in North America.
- ◆ Women who drink and have an unplanned pregnancy should quit drinking as soon as they suspect that they are pregnant.
- ◆ All women of childbearing age who consume alcohol are at risk of having a child with Alcohol Related Birth Defects.
- ◆ Women planning a pregnancy should receive the support of their partners, family, friends and community to stop drinking before conception and to not drink throughout pregnancy and breast-feeding.
- ◆ FAS is permanent and irreversible, and raises challenges at each developmental stage [continuing beyond puberty] of the affected children
- ◆ FAS is common, expensive, and preventable.
- ◆ Individuals with pFAS may look and seem normal; as a result this condition is often not diagnosed. Of individuals with pFAS between the ages of 12 and 51:
 - 95% will have mental health problems.
 - 68% will have disrupted school experiences.
 - 68% will experience trouble with the law.
 - 55% will be confined in prison, a drug or treatment centre or mental institution.

[Understanding the Occurrence of Secondary Disabilities in Clients with Fetal Alcohol Syndrome (FAS) and Fetal Alcohol Effects (FAE), Streissguth, 1996.]