



Policy Briefing: Alcohol and Pregnancy

During pregnancy, many mothers-to-be want to take care of themselves by eating well and resting to ensure that they stay healthy and their baby has the best possible start. Eating well ensures that goodness passes through the placenta to the baby. This is also what happens with alcohol. Alcohol consumed during pregnancy crosses the placenta to the developing baby.

The term Fetal Alcohol Syndrome (FAS) is used to describe a pattern of abnormalities evident in babies of chronic or heavy drinking women. The number of babies being born in Scotland each year with FAS is unclear and part of the problem could be the lack of understanding or recognition by health professionals. However, less obvious forms of damage are thought to be much more common (1) with babies showing signs of other birth defects (alcohol-related birth defects and alcohol related neurodevelopmental delay, collectively known as fetal alcohol spectrum disorder – FASD). As they get older, these children will display behaviour and memory problems.

The stage in pregnancy in which the mother is drinking determines what damage the alcohol may cause. The first 12 weeks of pregnancy are when limbs and organs are developing, and this is when the most severe physical damage can occur. The development of the central nervous system, including brain growth, occurs throughout the pregnancy, so there is no 'safe' period and the baby's nervous system may be damaged at any time.

It is also known that other factors play a part in the development of an unborn baby such as smoking, other forms of drug misuse, nutrition and socio-economic status.

What advice is given to pregnant women or women who are trying to conceive?

For the past twenty five years, advice to pregnant women has been to limit drinking of alcohol to "one or two units, once or twice a week". In December 2006 the UK Chief Medical Officers agreed that the message across the UK should be: *"Pregnant women or women trying to conceive should avoid drinking alcohol. If they do choose to drink, to minimise the risk to the baby, they should not drink more than 1 to 2 units of alcohol once or twice a week and should not get drunk."* They also agreed a shorter message: *"Avoid alcohol if pregnant or trying to conceive."* Guidelines from other medical or health bodies offer variations on this advice which can be confusing for the public as to which one to follow.

Understanding of units

In the UK we currently use the 'unit' system to count how much we drink and whether this is within recommended limits. Units are calculated on the alcohol content (abv) and volume taken of the drink. However, we know that many people struggle with the unit calculation because both strengths of drinks and the size of the glasses vary, so it is understandable that the message gets confusing.

We also know that there has been a substantial increase in consumption – 1 in 4 women are drinking more than the weekly recommended limits – and in alcohol-related health and social harm. Many young women are unaware that they are drinking hazardously.

The AFS Message

Alcohol Focus Scotland believes that the only message to the public should be:

Avoid alcohol while pregnant or trying to conceive*

We believe this advice is the clearest because:

- it is the only way to be sure that women are giving their unborn baby the best chance as fetal alcohol spectrum disorders are entirely preventable
- it is the *safest* advice given that research to-date has been unable to identify the threshold for risky consumption
- many people don't understand units and the strength of drinks – some people consume 3-4 units in a glass of wine mistaking it for 1 unit
- women who are trying to conceive will 1) increase their chances of becoming pregnant and having a viable pregnancy and 2) reduce any worry about alcohol-related damage during the time of trying to conceive and confirmation of pregnancy.

* this advice is aimed at the general population. There will always be individual women – harmful drinkers/alcohol dependent – who will require individual advice about controlling their drinking during pregnancy. Controlling their drinking rather than stopping altogether may be all they can do. Health professionals such as midwives and obstetricians are well placed to advise.

Alcohol Focus Scotland advocates screening for all ante natal women with brief interventions for women whose drinking is at risky levels. Some women may need more intensive support to reduce or stop their drinking during this time and should be referred to appropriate services, such as local alcohol services.

(1) Dr Bruce Ritson, Alcohol and physical harm, p28, *100% Proof*