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Boston University
CALL FOR NEW INTERVENTIONS TO TREAT
PREGNANT WOMEN WHO ABUSE ALCOHOL

Boston, Mass.--Current educational efforts that use slogans and mass media education to discourage pregnant women from drinking are inappropriate and possibly counter therapeutic to the women who need help most--those addicted to alcohol. In a paper published in the current issue of The International Journal of the Addictions, researchers at the Fetal Alcohol Education Program at Boston University School of Medicine (BUSM) call for intervention strategies targeted specifically to the needs of addicted women who are at risk of having children with alcohol-related birth defects.

According to Lyn Weiner, M.P.H., an associate professor of psychiatry (public health) at BUSM, it is well documented that alcohol consumption during pregnancy is a risk factor for a wide range of problems in the developing fetus. Fetal alcohol syndrome (FAS)--characterized by growth retardation, facial deformity, central nervous system anomalies and morphologic abnormalities--occurs only in children born to chronic alcoholic women. Other alcohol-related problems occur in children born to women who drink heavily. The earlier during pregnancy that excessive alcohol use is stopped, the fewer abnormalities are observed in newborns.

Intervention programs to date have focused on educating the general population about the risks of alcohol use during pregnancy. The authors speculate that these efforts have not been successful for heavy drinkers because of fear, implied punishment in the message and the lack of information about how to change these behaviors. "Warning labels, information and slogans are not designed for the addicted woman," says Weiner.
She says strategies targeted at those at highest risk—women addicted to alcohol—must be developed. "We know treatment works. We must motivate women to seek treatment, not frighten or scare them," says Weiner. The authors recommend carefully planned, individual intervention strategies offered in a nonjudgmental atmosphere. Studies have shown that addicted women respond to supportive counseling and that they are able to reduce their consumption during pregnancy.

The authors say future efforts must be aimed at both addictive women and health-care providers. Women should be encouraged to seek treatment when pregnant or planning pregnancy. Health-care providers must increase their understanding of the dynamics of addiction and learn to aggressively identify pregnant women with alcohol problems.

The Fetal Alcohol Education Program at BUSM educates professionals about intervention strategies for problem drinkers during pregnancy.

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