## WASHINGTON STATE MEDICAL HOME PARTNERSHIPS PROJECT Child Health Notes - July 2021

Promoting early identification and partnerships between families, primary health care providers & the community.

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# How to Ask About Prenatal Alcohol Exposure

"Of all the substances of abuse, including cocaine, heroin, and marijuana, **alcohol** produces by far the most serious neurobehavioral effects in the fetus." – Institute of Medicine, 1996.

According to a <u>2011 Report of the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect</u>, prenatal alcohol exposure (PAE) is the most common preventable cause of developmental and intellectual delay and disabilities in the United States. Fetal Alcohol Spectrum Disorders (FASD) is an umbrella term for diagnoses describing the effects of prenatal alcohol exposure (PAE) with a prevalence estimated to be 2-5%. It is certain that all primary care providers (PCP) see patients with PAE in their practices.

Notably, 80% of children with PAE and FASDs do not have identifiable physical features. This makes gathering information about PAE when taking a history of utmost importance. However, many providers feel uncomfortable with asking—these are some reasons for the discomfort:

Stigma	Personal biases, judgements, and stereotypes	Time	Don't know what do next
"If I ask, I could say something wrong" "Asking could cause self-blame or stigma"	"This isn't the type of family that would have a child with FASD"	"There are so many other things we have to ask"	"I don't know what to do with the information!"

Some providers may also believe that if there is a positive history of PAE, it must be reported to Child Protective Services (CPS). *Exposure to alcohol during pregnancy is not considered abuse or neglect*. Child Abuse Prevention and Treatment Act (CAPTA) laws for developing a plan of safe care do apply to infants who have been identified as being affected by substance abuse or withdrawal symptoms or who are diagnosed with an FASD as an infant.

## Why PAE Occurs

- <u>Lack of knowledge</u>: 30% of women and 50% of men believe daily alcohol consumption is safe during pregnancy
- Community and partner norms: PAE is 34 times more likely with risky paternal drinking
- <u>Not aware of pregnancy</u>: 50% of pregnancies are unplanned
- Alcohol use disorders: though this is not the only cause of FASDs

## Not Asking Because of Stigma Results in 2 Missed Opportunities

The opportunity to provide appropriate care to the child



The opportunity to reduce stigma and provide a supportive experience for a parent

## **Creating a Supportive, Non-Judgmental Environment**

- 1. Ground yourself in your purpose. Knowing about prenatal exposures can help us better understand, support, and know what to look for developmentally in children dealing with behavior problems.
- 2. Cultivate a mindful stance and open heart. Take note of any experiences, thoughts, and biases you might have about alcohol use.
- Be "matter of fact."
   Be aware of nonverbal communication that might communicate your opinion about 'correct' answers.

## **Asking About PAE**

#### When to Ask

• Ask at all new (to you) patient visits within the context of asking about general health including during pregnancy as a part of the history and intake.

#### How to Ask the Person Who Gave Birth to the Child

day?

vou drink?

After you found out

you were pregnant,

how much alcohol did

- Before gathering information on pregnancy, acknowledge that unexpected illnesses, events, and exposures are very common.
  - "Now I am going to ask you some questions about your pregnancy with CHILD. We know that every pregnancy is different (and often full of surprises!) so I'll ask about some of the most common experiences. Just let me know if I missed one that was important for your pregnancy with CHILD."
- Consider talking to the person who gave birth to the child by themselves, instead of with their partner.
  - "We've learned that the best way to learn about pregnancy is to talk to the person who gave birth. COPARENT can you fill out XYZ questionnaire and we will call you back in in a moment?"
- Start with general topics (i.e., prenatal care, general health), then move to exposures (i.e., stress, medication, teratogens, etc.)
- Sample prompts from the <u>PAE Clinician Toolkit</u> by Families Moving Forward:

Prompt		Follow Up Questio	ns	Response	
How far along were y when you found out were pregnant?				weeks	
Before you knew wer pregnant, how often you drink beer, wine, liquor?	did	What type of alcoh drink? Would you drink at make your own drin If making own drin much would you po How much do you drink? (fl oz, # of du	a bar or nks? ks, how our? usually	Frequency: Type: Amount:	
DECISION F	POINT	Continue if answer	ed more th	an "none" to previous ques	stion.
ompt	Follo	w Up Questions	Respon	se	
<u>the 3 months before</u> bu knew you were regnant, how many mes did you have 3 more drinks in a			tir	nes over 3 months	Refer if 1+

Response:

Refer if more than minimal exposure (3 or more drinks on any occasion, 14 or more drinks in 30 days)

DECISION POINT: Continue if answered more than "none" to previous questions.

### What Information is Needed

- Was there <u>any</u> PAE?
- Was there relatively higher-risk PAE?
  - <u>Any</u> binge episodes? ( $\geq$ 3 drinks on one occasion)
  - Periods of consistent exposure? (Even if at a lower dose, such as one standard drink on a daily or every other day basis for several weeks.)

Dose	Frequency	Duration	Pattern	Source
<ul> <li>What type of alcohol?</li> <li>How many/ much?</li> </ul>	• How many days per week/month?	• How many weeks/ months?	<ul> <li>Which weeks/ months?</li> <li>May have stopped and restarted.</li> </ul>	<ul> <li>Who reported the information?</li> <li>How reliable is it?</li> <li>How did they obtain the information?</li> </ul>

## **Documentation Considerations for PAE**

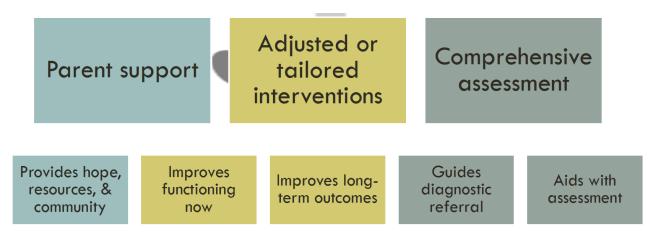
## Source and reliability:

- CAREGIVER indicated that there was not prenatal exposure to alcohol.
- CAREGIVER does not have access to information regarding pregnancy or birth.
- CAREGIVER indicated that there was confirmed/suspected prenatal exposure to alcohol, as reported by/recorded in SOURCE.

Dose/frequency/duration/pattern:

- (Consistent use) There was exposure to between # and # standard drinks # of times per WEEK/MONTH over the TRIMESTER/WEEK RANGE. <repeat if use resumed>
- (Episodic) There was exposure to approximately # standard drinks during one drinking occasion during the # week of pregnancy.

## How Does Asking Help?



Regional:	Families Moving Forward Program for FASD	http://familiesmovingforwardprogram.org/		
	PAE Clinician Toolkit	https://familiesmovingforwardprogram.org/?page_id=2518		
	The National Organization on Fetal Alcohol Syndrome (NOFAS) WA State	https://www.nofaswa.org/		
	FASD Diagnostic & Prevention Network (DPN)	https://depts.washington.edu/fasdpn/htmls/4-digit-code.htm		
	Specialized Neurodevelopmental Assessment and Consultation Service (SNACS) at Seattle Children's Autism Center	https://www.seattlechildrens.org/globalassets/documents/for-patients- and-families/pfe/pe2300.pdf		
	Help Me Grow Washington Hotline – a program of WithinReach	1-800-322-2588, 1-800-833-6388 TTD <u>http://www.parenthelp123.org/</u> Spanish: <u>http://www.parenthelp123.org/es/</u>		
National: P	Pediatrics – American Academy of Pediatrics (AAP) Journal	The Role of Integrated Care in a Medical Home for Patients With a Fetal Alcohol Spectrum Disorder		
	AAP FASD Webinar Series	https://www.aap.org/en-us/advocacy-and-policy/aap-health- initiatives/fetal-alcohol-spectrum-disorders-toolkit/Pages/Upcoming- Webinars.aspx		
	AAP FASD Toolkit	https://www.aap.org/en-us/advocacy-and-policy/aap-health- initiatives/fetal-alcohol-spectrum-disorders-toolkit/Pages/default.aspx		
	CDC Fetal Alcohol Spectrum Disorders (FASD) Training and Resources	https://nccd.cdc.gov/FASD/		
	CDC Basics about FASDs	https://www.cdc.gov/ncbddd/fasd/facts.html		
	Substance Abuse and Mental Health Services Administration (SAMHSA) Find Treatment website	https://www.findtreatment.gov/		