

CDC's Activities: Fetal Alcohol Spectrum Disorders

- Fetal alcohol spectrum disorders (FASDs) are a group of conditions that can affect a person whose mother drank alcohol during pregnancy. These effects can include physical problems and problems with behavior and learning.
- FASDs are 100% preventable.

Understanding Fetal Alcohol Spectrum Disorders

- **About 1 in 13 pregnant women in the United States reports drinking alcohol in the past 30 days. And, about 1 in 71 pregnant women reports binge drinking (having four or more drinks at one time) in the past 30 days.**
- **Centers for Disease Control and Prevention (CDC) studies have shown that 0.2 to 1.5 cases of fetal alcohol syndrome (FAS) occur for every 1,000 live births in some areas of the United States.**
- **In the United States, in 2002, the lifetime cost of care for a person with FAS was estimated at \$2 million. In 1998, the estimated annual cost to the nation was over \$4 billion.**

CDC has been involved in fetal alcohol spectrum disorder (FASD)-related activities since 1991. CDC plays a major role in (1) monitoring alcohol use among women of reproductive age and the prevalence of fetal alcohol syndrome (FAS), (2) developing and testing multiple approaches to prevent FASDs, (3) developing interventions for individuals and families living with FASDs, and (4) improving awareness of and knowledge about prenatal alcohol exposure among health care providers and the general public.

Preventing Alcohol-Exposed Pregnancies

CDC is engaged in a series of prevention activities to reduce alcohol-exposed pregnancies (AEPs). CDC is:

- Working on multiple efforts supporting implementation and adoption of alcohol screening and brief intervention within primary care systems and OB/GYN settings and reaching out to employers, insurers, and other groups to help promote demand for this effective clinical preventive service.
- Promoting widespread adoption of CHOICES through multiple efforts, including assessing the feasibility and acceptability of integrating CHOICES into sexually transmitted disease clinics, community health centers, family planning clinics, and in American Indian communities. CHOICES is an evidence-based intervention for non-pregnant women to reduce their risk for an AEP by reducing drinking, using effective contraception, or both.
- Conducting intervention research to investigate the effectiveness of bundling interventions to reduce risks for both alcohol- and tobacco-exposed pregnancies.
- Working with CityMatCH to plan and implement a multicity urban practice collaborative to promote substance-free (alcohol, tobacco, and other drugs) pregnancies.

Tracking

CDC tracks alcohol use among women of reproductive age in the United States and the prevalence of FAS in several areas. CDC is:

- Tracking alcohol use and associated risk factors of reproductive-age women.
- Providing technical assistance to support state-based surveillance systems monitoring the prevalence of FAS.
- Partnering with the National Center for Health Statistics to better estimate and describe the population of women at risk for an AEP.



Increasing Awareness and Knowledge

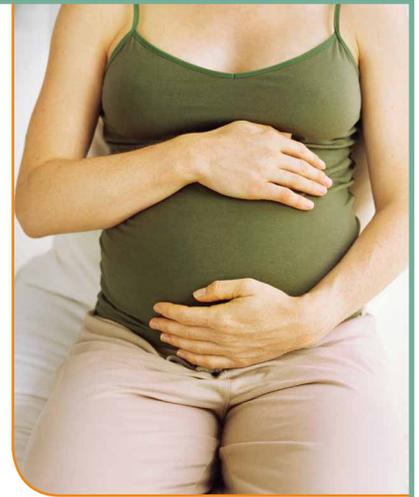
CDC engages in activities to increase awareness of and knowledge about FASDs among health care providers and women of reproductive age. CDC is:

- Supporting FASD regional training centers (RTCs) to train medical and allied health students and practitioners in the prevention, identification, and management of FASDs.
- Supporting formative research activities to help inform future educational and media efforts.

Collaborating With and Engaging Partners

CDC collaborates with multiple partners on various FASD-related issues. CDC is:

- Collaborating with the National Organization on Fetal Alcohol Syndrome (NOFAS) to increase availability and coordination of FASD-related prevention, intervention, and support services at the national, state, and local levels, and to increase awareness about FASDs.
- Working with the American Academy of Pediatrics on a variety of activities, including the development of professional education materials to promote recognition, diagnosis, referral of, and intervention with children with FASDs among pediatric health care providers.
- Collaborating with the American College of Obstetricians and Gynecologists to promote new resources for identifying and intervening with women drinking at risk levels, integrate FASD prevention information into its ongoing communication efforts, and partner with CDC's FASD RTCs to integrate primary prevention materials into their training activities.
- Participating on the Interagency Coordinating Committee on FASDs and with related workgroups.
- Playing a leadership role in federal interagency efforts to address diagnostic issues about conditions other than FAS that result from prenatal alcohol exposure.



Recent FASD-Related Accomplishments

- Published *CHOICES: A Program for Women About Choosing Healthy Behaviors*, designed for use by professionals who will be conducting the CHOICES program and for trainers providing instruction on how to conduct the intervention (2011).
- Published survey findings in the *Journal of Addiction Medicine* on FASD knowledge, attitudes, and behaviors of obstetricians and gynecologists (2010).
- Released two reports from the National Task Force on Fetal Alcohol Syndrome and Fetal Alcohol Effect, *Reducing Alcohol-Exposed Pregnancies* and *A Call to Action: Advancing Essential Services and Research on Fetal Alcohol Spectrum Disorders* (2009).
- Published the *Fetal Alcohol Spectrum Disorders Competency-Based Curriculum Development Guide for Medical and Allied Health Education and Practice*, developed by CDC, the FASD RTCs, and NOFAS (2009).
- Completed and published findings from five successful interventions developed for children with FASDs (2009).
- Published a report monitoring 15 years of any alcohol use and binge drinking among pregnant and nonpregnant women of reproductive age and characterized women most likely to drink (2009).
- Completed the Project CHOICES study (2007), a brief motivational counseling intervention for women to reduce their risk for an AEP by decreasing their alcohol use, by using effective contraception, or both.



**For more information on CDC's FASD activities,
go to www.cdc.gov/fasd.**

National Center on Birth Defects and Developmental Disabilities

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