

**Health Professionals Making a Difference:
Fetal Alcohol Spectrum Disorder, Alcohol and
Substance Use in Pregnancy, and Breastfeeding**

**Westlink Satellite Series 1
Perth, Western Australia**

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A WOMAN CENTRED APPROACH
TO HARM REDUCTION DURING
PREGNANCY AND THE KEMH
CHEMICAL DEPENDENCY
SERVICE

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Antenatal alcohol use is the leading preventable cause of birth defects

- Epidemiology of drug and alcohol use in young women (seminars in fetal and neonatal medicine (2007) 12, 98-105)

New figures show that the number of women admitted to a New Zealand Emergency Department had surpassed men for the first time

Women's drinking behaviour patterns have been altered and now women are encouraged to 'keep up'

Binge drinking is now considered the 'norm' in the younger population

Statistics Western Australia

- 60% POLICE CALLS ARE ALCOHOL RELATED
- 20% POLICE EXPENDITURE RELATED TO ALCOHOL
- Puma Project – West Australian Police Force

- Alcohol use is the worst teratogen in pregnancy
- Women are often at risk from the social aspects of their habits and the environment they often end up having to live in
- It is our responsibility to monitor all pregnant women to confirm alcohol use in pregnancy and at the earliest onset offer brief intervention
- Where feasible these known to be at high risk should be referred to the specialist tertiary centre for care

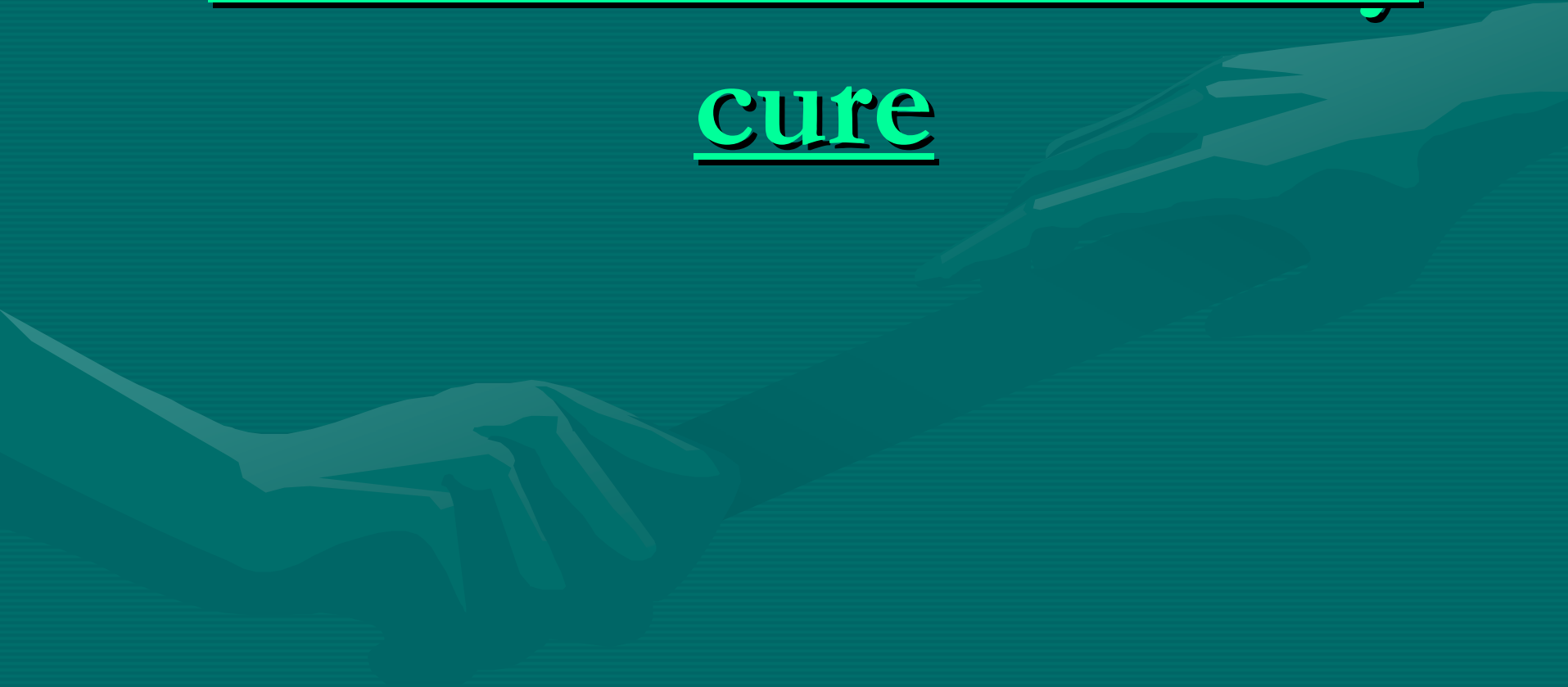
- The use of alcohol in pregnancy is a controversial subject

The NHMRC guidelines recommends fewer than 7 standard drink a weeks and no more than 2 standard drinks per day

Polarisation and confusion has emerged in giving information to pregnant women

However these guidelines are scheduled for review this year

- Prevention is our only
cure



Alcohol Misusing Women

Issues to consider when Pregnant

- Contraception
- BBV
- Mental Health
- Confidentiality
- Pregnancy Care Facilities
- Child Protection
- Medical Factors: Oral Health, Nutrition, Constipation
- Domestic Violence

Suboptimal individual and family functioning has a considerable impact on the health and development of the children in the family (Kendall and Li 2005) as well as significant implications for the wider community (Wills 2000)

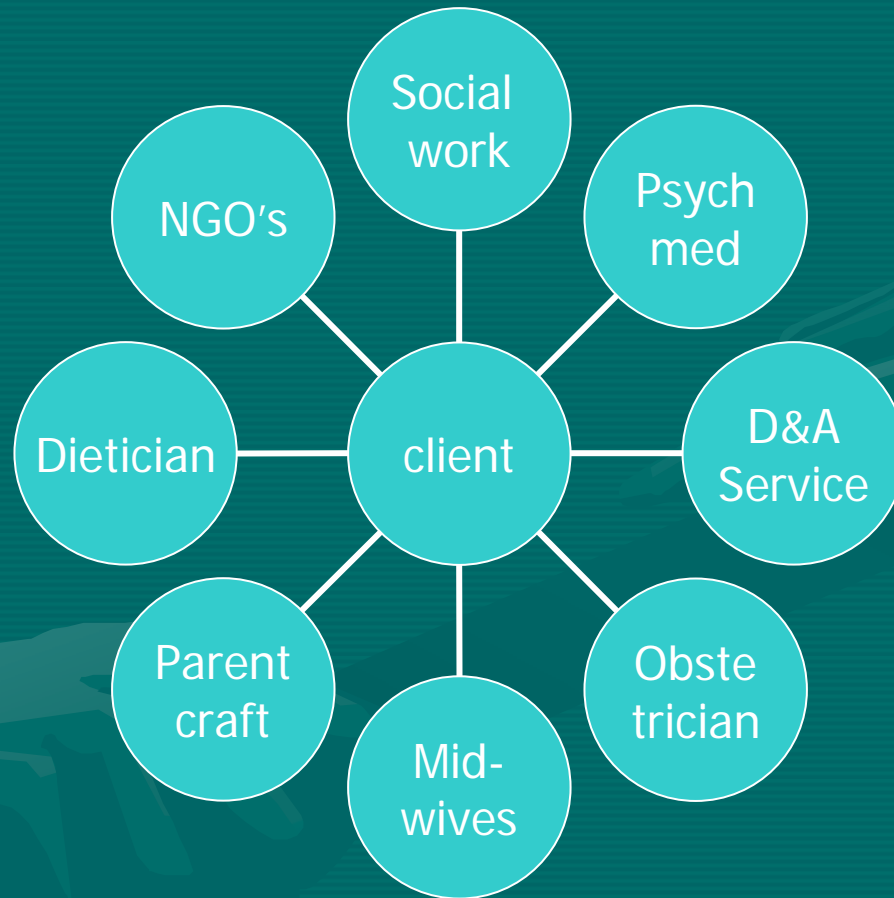
Who To Refer To

- When alcohol problems are recognised
- Where possible refer to King Edward Memorial Hospital CDC (Chemical Dependency Clinic) Service ASAP
- Referrals taken via referral form or via telephone on 0893402222 Pager 3425
- Women should be informed that they shall be referred to appropriate service at tertiary hospital

What does the CDC at KEMH offer

- Clinics held every Wed afternoon (triage with specialist midwife) and Friday morning
- Friday Morning = access to:
 - Specialist Obstetrician
 - Specialist Midwives
 - Psychiatry
 - Social Work
 - Dietician
 - PEPISU
 - Next Step Drug and Alcohol Workers

CDC Service



Services offered at KEMMH

- Medical Obstetric Service (High Risk Pregnancy)
 - Routine scans
 - BBV screening
 - Smears and swabs
- Parent craft support
- Psychiatric support
- Midwifery Support
- Drug and Alcohol Misuse support
- Nutritional Support
- BBV specialist support

Engagement Skills

- NOW (No Opportunity Wasted)
- Aim to develop trusting relationship
- Develop goals in partnership with client
- Awareness of issues and commitment to addressing and preventing problems
- Safe environment – physical and emotional and cultural

Antenatal Care

- Post Natal Expectations
- Assessment of past, current, and intended patterns of alcohol use and implications
- Provision of advice regarding use
- Harm minimisation options
- Psychiatric Well being/ Post Natal Depression
- Screening including LFT and Gamma GT

Continuity of Care

- Women with drug & alcohol issues are a vulnerable group
- Continuity of care relies on:
 - Engagement skills
 - Case Manager
 - Individualised Care Plan
 - Documentation & Communication
 - Seamless Referral System

Current Drug and Alcohol Trends within CDC service



Alcohol Use and Psychological Wellbeing

- Use of alcohol can increase depression and suicidal thoughts and behaviours. Whilst the role of alcohol in intensifying depression is well established, it is not yet clear whether it plays any part in triggering schizophrenic illness or causing a relapse

Current Trends in Psychological Wellbeing Within CDC Service

Common:

- Anxiety disorders – panic disorder
- Major depressive episode
- Personality disorders – borderline, antisocial

Uncommon:

- Schizophrenia (2 cases so far this year)
- Organic personality disorder (1 case)
- Bipolar Affective disorder (often mislabelled) (1 case this year)
- Attention deficit disorder (?)

Diagnostic dilemmas:

- Withdrawal states vs. anxiety disorder
- Amphetamine withdrawal state could include mood disorder
- Drug induced psychosis versus Schizophrenia
- Affective lability vs. affective disorder

Screening For Depression/Psychiatric Illness

- Most common used tool
- Edinburgh Postnatal Depression Scale (EPDS)
used antenatally/postnatally to screen women
- Score = 12 above.....refer to psychological
medicine
- However talking to the women, being empathetic,
building a rapport, building trust is equally
important
- Many do not want contact with psychological
medicine
- COMPLIANCE IS AN ISSUE.....

National clinical guidelines for the management of drug use during pregnancy birth and the early development years of the newborn

- All pregnant women should be given information regarding drinking when pregnant
- All women should be given an explanation of the measurement of alcohol – i.e. standard drink of 10g alcohol
- Healthcare workers should become familiar with local drinking habits, patterns and terminology and be culturally aware

National Guidelines continued

- All women who are drinking should have priority access to whichever health care provider they have been referred to
- All neonates who are exposed to regular excessive maternal alcohol consumption in utero should be monitored during their first days of life
- Follow up should be arranged with a health professional with specialist knowledge of FAS
- Follow up should continue if FAS/FASD recognised
- When children present for paediatric assessment around ADHD symptoms, FASD/FASD should be considered

The Way Forward

- HealthCare system which meets the needs of this vulnerable client group, this includes:
- Promotion of prevention and early intervention
- Integrating and improving the health care system, in particular links between services.
- Participation in the community including outreach services.
- Appropriate inpatient facilities/ outreach support services for mothers (and their infants)

National Guidelines

- http://www.health.nsw.gov.au/pubs/2006/pdf/ncg_druguse.pdf
- Contact Details

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