



FASD: a public health perspective

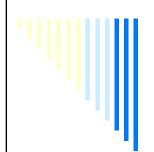
CAMHS Conference Dublin 3rd October 2019 Dr Mary T O'Mahony, Consultant in Public Health Medicine, HSE-S <u>maryt.omahony@hse.ie</u>

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Acknowledgement

- ☐ Foster parents and adoptive parents have led the way in raising awareness and in supporting research into FASD
- □ Need to move towards a more population based approach
- □ Consistent messaging
- Need to mainstream FASD



Prenatal alcohol exposure fulfils causal criteria as a cause of FASD

Bradford Hill Sir Austin. The Environment and Disease: Association or Causation? Proceedings of the Royal Society of Medicine, Section of Occupational Medicine Meeting January 14 1965.

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Prenatal Alcohol Exposure (PAE) & Foetal Alcohol Spectrum Disorders (FASD)

- Alcohol crosses the placenta
 - Complete pathway of exposure
- Foetus swallows and excretes amniotic fluid
 - Cycle of exposure
- It's the social norm to drink including when pregnant
 - Societal factor



Variable outcomes due to biological variability

- Rate of breakdown of alcohol varies
 - Genetic component to risk
- Metabolism of alcohol varies by
 - Speed of intake
 - On an empty stomach, with food, 2 hours after food
 - Body composition
 - Frequency of intake
 - Amount consumed
 - State of health

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From National Geographic of 1992. Copyright photo used for educational purpose with permission of George Steinmetz (not for further circulation)



Prevention of Foetal Alcohol Spectrum Disorder

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PAE and FASD: Causal criteria

- Evidence from true experiments in humans: not possible as not ethical
- Association strong. Association consistent from study to study. √
- ullet Temporal relationship: cause precedes the effect $\sqrt{}$
- ■Dose-response gradient √
- Does the association make epidemiological sense? As women drink more
- Does the association make biological sense? Alcohol know effects on brain
- Is the association specific? Yes Foetal Alcohol Syndrome
- Is the association analogous to a previously proven causal association? Teratogenicity



International evidence

Lancet Jan17; JAMA Pediatr Aug17; BMJ Sep17

- □ 1 in 67 who consume alcohol in pregnancy give birth to a baby with FAS, noting ratio of FASD to FAS is 9/10:1
- □ Ireland prevalence estimate 47.5/1000 (95% CI 28.0 - 73.6) 2.8 - 7.3% of the population.
- ☐ Ireland featured as one of the five countries with the highest prevalence of FASD
 - South Africa, Croatia, Ireland, Italy, Belarus
- ☐ This translates into 600 Irish babies are born each year with FAS, and
- □ that over 40,000 Irish persons are living with the condition.

Popova S, Lange S, Probst C, Gmel G, Rehm J. Estimation of national, regional, and global prevalence of alcohol use during pregnancy and fetal alcohol syndroms systematic review and meta-analysis. Lancet Glob Health 2017; published online Jan 12. http://dx.doi.org/10.1016/S2214-109X(17)90021-9. Lange S, Probst C, Gmel G, Rehm J. Burd L, Popova S. Global Prevalence of Fetal Alcohol Spectrum Disorder among Children and Youth. A systematic review and meta-anlaysis JAMA Pediatr 2017. Doi:10.1001/jamapediatrics.2017.1919

Mamiluk I, Edwards HB, Savović J, et al. Low alcohol consumption and pregnancy and childhood outcomes: time to change guidelines indicating apparently 'safe' levels of alcohol during pregnancy? A systematic review and meta-analyses. BMU Open 2017;7:e015410. doi:10.1136/ bmjopen-2016-015410



Evidence (Ireland_Sep 2019)

Ireland features among the five countries with the highest prevalence of FASD

The evidence indicates that:

- □ Four in five of first pregnancies are exposed to alcohol; nearly one in two (45%) are exposed at high-risk levels
- two in five pregnancies are unplanned, increasing the chance they will be exposed to alcohol
- pregnant women do not consistently receive timely maternity care or support for their Alcohol & Drug issues
- health professionals do not consistently provide information on the risks of drinking during pregnancy or routinely screen for alcohol issues
- most clinicians lack the capability to diagnose FASD
- families of people with FASD struggle to access appropriate support and report a lack of understanding from services, professionals and even other family members
- In NZ, FASD affects about 50 percent of children and young people in Child, Youth and Family (CYF) care.

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Neurodevelopmental disorder gross indicator data_Ireland

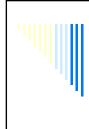
- ☐ HSE Annual Rep 2018 on use of service
 - CAMHS referral rate (RR) 14.5 /1000 pop aged 0-18
 - CAMHS referrals seen (RS) 8.2 /1000 pop aged 0-18
 - Adult Mental Health RS/RR 7.8/ 1000 pop aged 19+
- □ NDA profile of school leavers 2016
 - Seeking RT or Day Service (286 CHO4)
 - 20.6% had no ID (56% no/ borderline/ mild ID)
- □ Dept of Education report on SNA
 - "the SNA scheme currently supports over 34,600 students in primary, post-primary and special settings".



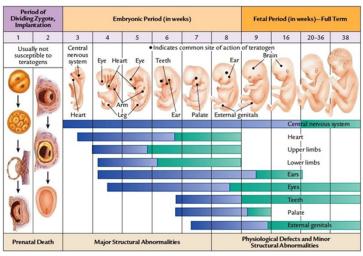
Public health risk assessment

- □ Identify the population
 - ♀ earning >\$50,000 (€35,000/£31,000)
 - Students and lower SEG_binge drinking
- Assess the risk
 - 1 in 67 risk of FAS
 - 1 in 13 risk of (non-FAS) FASD
- □ Recommend measures to remove or mitigate risk
 - Screening & brief intervention (SBI, MECC)
 - Parent child assistance programmes (PCAP)
- Communicate risk to key health & other professionals
- □ Communicate risk to the public

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Abstaining from alcohol for the remainder of pregnancy has benefit



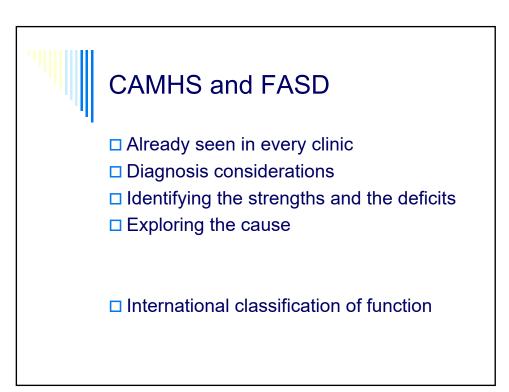














Economic perspective

Economic impact – Alberta Canada 2008 10 Strategic Plan to prevent FASD

- □ Pop 3.6m (2013),36000 with FASD (estimate 1%); 450 FASD babies born/a
- □ Lifetime cost to state per child with FASD estimated: \$1.1m(£680K/€760K)
- □ Prevention of 10 cases p.a. covers cost of comprehensive services
- □ Alberta FASD Services- Estimated to save \$20m p.a. in reduced demand for services – 2013 Year 5 Evaluation

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Societal perspective

- ☐ "Children with FASD fill our Foster Care places.
- □ Adults with FASD fill our jails."

Lange S, Shield K, Rehm J, Popova S. Prevalence of fetal alcohol spectrum disorders in child care settings: a meta-analysis. Pediatrics. 2013 Oct;132(4):e980-995.

Popova S, Lange S, Bekmuradov D, Mihic A, Rehm J. Fetal alcohol spectrum disorder prevalence estimates in correctional systems: a systematic literature review. Can J Public Health Rev Can Sante Publique. 2011 Oct;102(5):336–40.

