

Prenatal Alcohol and Drug Exposure in Riverside County

Key Findings

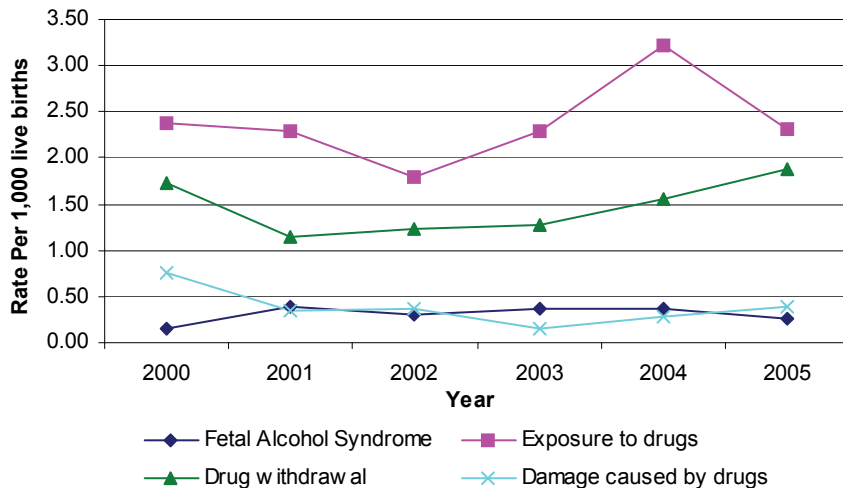
- In Riverside County, preliminary screening data indicates that as many as 4,000 children born in the county may have experienced some level of prenatal exposure to illicit drugs, alcohol, or tobacco.
- Five percent of women continue to use alcohol and/or drugs after learning they are pregnant.
- In 2005, more than 150 newborns were hospitalized with a diagnosis of drug or alcohol exposure.

Introduction

The lifetime impact on children due to maternal substance abuse and prenatal exposure to drugs, alcohol, and tobacco is well documented. The adverse effects of substance use on fetal development include increased risk of low birth weight, birth defects, placental abruption, prematurity, central nervous system impairment, facial dysmorphism, mental retardation, developmental delays, behavior problems, speech and language dysfunction, failure to thrive, and Sudden Infant Death Syndrome (SIDS).

Between 2000 and 2005 nearly five out of every 1,000 newborns in Riverside County were hospitalized with a diagnosis of drug or alcohol exposure. Although relatively few newborns are diagnosed at the time of birth with fetal damage due to alcohol or drug exposure, less severe developmental problems can manifest later in a child's life.

Hospitalizations by Year for Infants less than 1 Year Old, Riverside County, 2000-2005



Source: Office of Statewide Health Planning and Development (OSHPD), 2000—2005

Prenatal Alcohol Exposure

According to the Centers for Disease Control and Prevention, prenatal exposure to alcohol is a leading preventable cause of birth defects, mental retardation, and neuron-developmental disorders in the United States.

Alcohol consumed during pregnancy increases the risk of alcohol related birth defects or fetal alcohol spectrum disorders (FASD). These effects may include physical, mental, behavioral, and/or learning disabilities that can have a lifelong impact. No amount of alcohol consumption is considered safe during pregnancy.

According to community surveys, 47.2% of women of child bearing age in Riverside County report consumption of alcohol during the month prior to the survey. Of those who

drink, 12% reported binge drinking (four or more in a sitting). These women have the potential to become pregnant thus increasing the risk of exposure to the fetus. On average, ten infants a year are hospitalized with a diagnosis of FASD in Riverside County.

Exposure to Illicit Drugs

Children prenatally exposed to drugs can have subtle but significant emotional and behavioral impairments and deficits that can lead to adverse consequences such as poor school performance. In addition to the impact on children's lives, infants exposed to drugs and alcohol have a significant impact on medical services.

In Riverside County, infants hospitalized for drug and alcohol exposure, on average, remain in the hospital six times longer with costs up to eight times more than traditional births. The hospitalization rate for infants exposed to drugs nearly doubled between 2002 and 2004. However, in 2005 there was a 28% decrease. Hospitalization data may mask the severity of the problem because hospitalized infants are those requiring acute and often critical care, thus overlooking chronic and long term consequences.

Prenatal Screening for Substance Use

In 2007, more than 12,000 substance use screenings were conducted during regular prenatal visits in Riverside County. Unlike hospitalization data, which is a measure of the most severely and immediately affected infants, data from these screenings is a more sensitive measure of the true exposure rate. Based on this preliminary screening data it is estimated that even after learning they were pregnant, five percent of women continued to drink, smoke, and/or use illicit drugs.

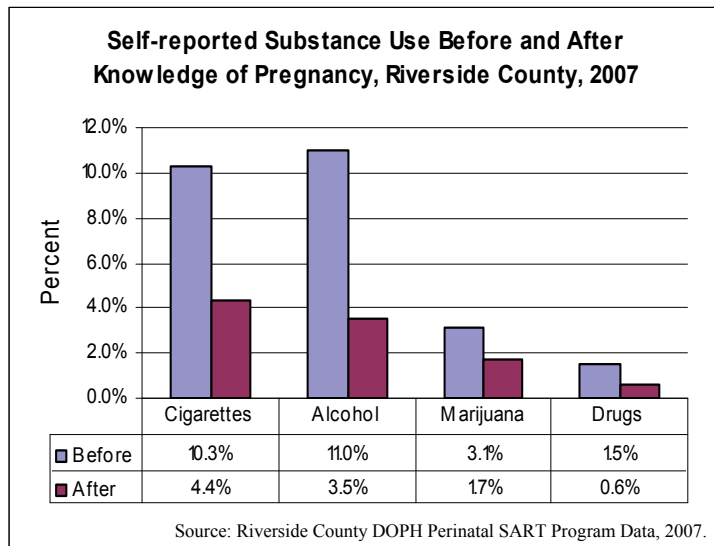
Future Directions

The American College of Obstetrics and Gynecology documented the low priority that obstetricians place on advising their patients about substance use during pregnancy. Legal, social, and attitudinal barriers often restrain open communication between physician and patient. This reluctance to screen and discuss the risks associated with substance use limit the ability to prevent negative health outcomes. It also limits access to sensitive data. Current measures, such as that of hospitalization and fetal deaths are sparse and in some instances nonexistent. Therefore, thorough analysis of outcomes and risk factors is challenging. Often, available data produce relatively small sample sizes yielding non-generalizable estimates. These limitations imply the need for enhanced screening and reporting practices among providers allowing for greater clinical intervention and more robust epidemiological analysis.

From the Desk of – Diane Ewing, Nurse Manager—Maternal, Child and Adolescent Health

Pregnancy is a window of opportunity for the identification and treatment of substance-abusing women. The desire to have and raise a healthy child can provide powerful motivation for women who realize that their use of harmful substances is out of control. Stopping substance abuse at any point during the pregnancy can increase the chance that a baby will be born healthy. Pregnancy is therefore a critical time at which to provide clear messages, non-judgmental screening, and available resources for the treatment of substance abuse.

Riverside County's Department of Public Health, Maternal Child and Adolescent Health Branch has been successfully recruiting, educating, and training providers in Riverside County, to screen their patients for substance use. Current programs target prenatal providers and primary prenatal care sites to screen and identify pregnant women who are using drugs and/or alcohol, educate, and refer them to drug treatment or other resources as needed. In addition, Nurse Case Managers follow high-risk women referred by screening providers throughout the duration of their pregnancy.



Suggested Citation

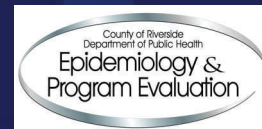
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