Learn about...

Fetal Alcohol Spectrum Disorder

What is Fetal Alcohol Spectrum Disorder?
Fetal Alcohol Spectrum Disorder (FASD) is a term used to describe a range of problems affecting babies whose mothers drank alcohol during pregnancy. The names of individual diagnoses are:

- Fetal Alcohol Syndrome (FAS)
- partial Fetal Alcohol Syndrome (pFAS)
- Alcohol-Related Neurodevelopmental Disorder (ARND)
- Alcohol-Related Birth Defects (ARBD)

Nobody knows exactly how much alcohol causes mental and physical damage in an unborn child. Every mother and every fetus is different. But all babies’ brains are sensitive to alcohol. And some babies are affected by very little alcohol. This is why women who are pregnant (or who are planning to get pregnant) should not drink any alcohol. It is the only way to ensure their baby will not be diagnosed with FASD.

How common is FASD?
In Canada, FASD affects approximately 1% of the population or 350,000 people. It’s not limited to one population. There are people of all ages, economic backgrounds and nationalities affected with FASD.

Are some types of FASD worse than others?
Fetal Alcohol Syndrome (FAS) is the most severe form of FASD. It involves physical deformities and mental defects. However, some people believe other forms of FASD are harder on the people affected by the disorders because their disabilities are not easy to see. As a result, they may be ridiculed and abused because they look “normal” but cannot function like other people. They may suffer from social, economic and legal problems beyond their control but not receive support or compassion from other people.

“No one knows exactly how much alcohol causes mental and physical damage in an unborn child.”
What are some of the signs of FAS?

Babies with FAS tend to be small in size and weight. They also have distinct facial features including:

- small eye openings
- a short snub nose and no nasal bridge
- no groove beneath the nose
- a thin top lip
- large, low-centred ears with ridges on the outside edges

Other defects a person with FAS may develop as they grow older include malformed teeth and sight and hearing problems.

It is possible for a person to have some of these features and not have FAS. But a person with MANY of these features is more likely to have FAS.

Other signs of FAS include:

- behavioural problems
- sensory dysfunction
- hyper/hypo activity
- learning disabilities
- attachment issues

The best way to know for sure if a person has FAS is through official diagnosis. For more information about all FASD diagnoses, visit the BC Ministry of Children and Family Services website at www.mcf.gov.bc.ca/fasd/assessment.htm.

What are the effects of other forms of FASD?

People with other forms of FASD may not have any physical abnormalities or disabilities. But they may have learning and behavioural problems. Typically, a person with FASD will have trouble:

- remembering things
- adding and subtracting numbers and money
- using their reasoning skills
- learning from experience
- understanding the consequences of their actions
- getting along with others

What happens to people with FASD?

A person with FASD may grow up and develop a number of important skills. They may be loyal, friendly, affectionate, artistic and work well with animals and plants. But most people with FASD need life-long help with basic tasks such as finishing school, getting and keeping a job, managing their money and socializing with other people. People affected with FASD often develop mental health problems and have trouble with the law. They are also more likely to develop alcohol and other drug problems. As a result, they are more likely to end up homeless.

With assistance, however, some people with FASD are able to find paid work or go to school.

Is alcohol itself the only factor in FASD?

Some women are more likely than others to have a baby with FASD. Women who are at highest risk of having a child affected by FASD include:
• older mothers who drink during pregnancy
• mothers with a long history of alcohol use who drink during pregnancy
• mothers who are dieting, overly thin or undernourished and who drink during pregnancy
• mothers with risky drinking habits (i.e., they drink to the point of getting drunk, drink daily or very regularly, or use other substances when drinking)

Is “not drinking” the only way to prevent having a baby with FASD?
The only cause of FASD is a woman’s consumption of alcohol during pregnancy. Therefore, the only way to guarantee a baby won’t have FASD is to avoid alcohol.

In the case of an unplanned pregnancy, a woman may find out she’s pregnant and then realize that she has been consuming alcohol. According to some researchers, the risk of transferring alcohol to a fetus is low in the first 10 days after ovulation.

Ways to prevent or lower the risk of FASD
1. If you’re not using birth control, do not drink alcohol. This way, if you become pregnant, your baby will be at zero risk of developing FASD.

2. If you’ve just found out you’re pregnant and have been drinking up until now, avoid alcohol from now on. If you need help stopping, talk to your doctor about treatment options and support groups. Or you can do the research yourself by looking on the internet, visiting your community health facility or talking to friends or family members.

Did you know...?
• Only a mother’s consumption of alcohol—not a father’s—can cause an unborn baby to develop FASD.
• FASD is not genetic and cannot be transferred from a mother with FASD to an unborn baby.
• FASD is not transferred through breastmilk. However, alcohol itself is transferred through breastmilk and can cause problems for the infant.
• FASD is the leading known cause of mental retardation.
3. If you’re pregnant and cannot quit drinking completely, try your best to cut back on how much and how often you drink. If you cannot do this on your own, talk to a health care provider, counsellor, friend or family member about way to manage your alcohol use.

What to do if you or someone you know is experiencing a problem with FASD


You can also find information on a wide variety of substance use issues on the Centre for Addictions Research of BC website: www.carbc.ca.