Executive Summary

Alcohol use in pregnancy

Abusive alcohol use during pregnancy is clearly related with fetus anomalies, the most known being Fetal Alcohol Syndrome. As such, a greater knowledge about patterns of use, risk/protection factors and extent of effects, have relevance in Health, by supporting the definition of guidelines and implementation of interventions in order to reduce the extent of Fetal Alcohol Spectrum Disorder.

This study has the main purpose of contributing to the knowledge of this phenomena in Portugal and to the goal “To prevent and reduce the incidence of fetal anomalies and development disorders caused by addictive behaviors and dependencies and also pathologies in the pregnant woman, related with the use of psychoactive substances and non prescribed medicines” (National Plan to Reduce Addictive Behaviors and Dependencies 2013-2020).

Aims

- To describe patterns of alcohol use in a sample of pregnant woman attended in Primary Healthcare Facilities in Lisbon, Portugal (ACES Lisboa Norte, Central e Ocidental/Oeiras).
- To identify risk/protection factors related with patterns of alcohol use.

Methodology

It is a cross-sectional study, with a self administered questionnaire, presented in the Healthcare Facilities by the doctors and/or nurses that consulted the pregnant woman. 1104 patients participated in the study. Descriptive, bivariate and multivariate statistics were produced.

Results

- 19% of participants drank alcohol beverages at least once since the knowledge of their pregnancy, mostly occasionally, 1% drank until inebriation and/or made binge drinking.
- By comparison with their pattern of alcohol use 12 months before pregnancy, 74% of the woman that dranked, abandoned alcohol use (13,7% even before being aware of their pregnancy, possibly related with family planning, and 60,6% after). Concerning the ones that continued drinking (26% of the woman that dranked before pregnancy), half (13%) reduced drinking.
- The changes on alcohol drinking happened mostly when woman knew about their pregnancy and motivated by the need to avoid health problems to their future child.
- Generally speaking, the data provides reasoning of a certain consensus toward the idea that alcohol drinking during pregnancy has negative effects in the baby, although with some ambiguity to what type of alcohol drinking is damaging.
- The majority of participants reported that, by one side, their family, partner or friends, and, by other side, health professionals, disagree/totally disagree with alcohol moderate drinking during pregnancy. In turn, in most cases, the participant’s partner was himself an alcohol drinker.
- Practically all assessed as being easy or very easy not to drink any alcohol beverage during pregnancy.
- The perceived difficulty of self-control concerning alcohol drinking during pregnancy was the variable more strongly related, increasing the odds, of alcohol drinking in this period, whatever the subgroup of the sample considered: all the participants (increasing the odds of drinking during pregnancy), participants that dranked in the 12 months before pregnancy (in this case, increasing the odds of maintaining alcohol use) and participants that already dranked during current pregnancy (increasing the odds of a riskier pattern of drinking).
- On the other hand, the idea that no glass of alcohol beverage is safe to drink per week in pregnancy was the one that more strongly contributed to the decrease of odds of alcohol drinking in these three subgroups (drinking, maintaining drinking, having riskier patterns of drinking).
- Additionally, the representation that family/partner/friends disagree/totally disagree with alcohol moderate drinking during pregnancy, and also, assessing that the partner drinks the same or less amount of alcohol than herself, decreased the odds of alcohol drinking during pregnancy, considering the total sample of participants and, more specifically, the ones that dranked in the 12 months before pregnancy. This social pressure didn’t have, although, the same effect on the subgroup of participants that already dranked in current pregnancy, concerning the odds of having a riskier pattern of alcohol drinking in this period.

**Conclusions**

These results highlight the need to:
- Disseminate clear, objective and coherent messages concerning alcohol drinking during pregnancy: *it is not safe to drink any glass of alcohol during pregnancy*;
- Consider different communication channels, having in mind that, in this sample, health professionals and internet were the privileged sources of information;
- In communication/intervention, being this generalized or individualized, consider the influence of the more close social network in alcohol drinking by the pregnant woman;
- To consolidate as a general practice in pregnancy health monitoring (and family planning), the screening of alcohol use, and, being the case, to support the pregnant toward the elimination of this drinking, considering, for instance, her perceived self-control skills.