

Pregnancy and alcohol

Understanding how much you can drink when you're pregnant can be confusing.

Previously Government guidelines said it was OK to have the occasional drink, but now the official advice is to abstain during pregnancy. Yet other guidelines say it's OK to drink lightly after the first three months.

So what's the real story? What are the risks if you drink while pregnant?

FACTS and FIGURES

The official guidelines

- The Department of Health's current guidelines state that pregnant women should avoid drinking alcohol. If they do choose to drink, they should not drink more than one to two units of alcohol once or twice a week, and should not get drunk.
- These guidelines were laid out in 2007, when the Government decided to clarify its advice on drinking during pregnancy. The Department of Health was concerned that many pregnant women believed it was safe to drink small amounts of alcohol. Unfortunately, these 'small amounts' varied from person to person, meaning that some women were drinking too much.⁽¹⁾
- In 2008, the National Institute for Health and Clinical Excellence (NICE), the independent organisation that monitors standards in the NHS, published a separate set of guidelines. Its advice is that women shouldn't drink at all in the first three months of pregnancy, because there may be an increased risk of harm to the unborn baby and/or miscarriage, and if women choose to drink alcohol thereafter they should drink no more than one to two units once or twice a week. NICE says at this low level there is no evidence of harm to the unborn baby.⁽²⁾

How will drinking affect your baby?

There is little concrete evidence to show that drinking a maximum of one or two units, once or twice a week will have any adverse effect on your baby:

- In 2006, before issuing their new guidance, the Department of Health commissioned a review of existing evidence on the effects of alcohol on developing foetuses. The review found that there is no consistent evidence that low consumption of alcohol during pregnancy has any adverse effects.

However, the review also stated that the evidence is probably not strong enough to rule out any risk absolutely.⁽³⁾

- A 2008 study, involving more than 12,000 children, found those born to mothers who drank up to one to two drinks per week or per occasion during pregnancy were not at increased risk of behavioural difficulties or cognitive deficits, compared with mothers who didn't drink at all.⁽⁴⁾
- However, as the NICE guidelines warn, some studies have shown links between light drinking and miscarriage, although other studies on the issue have found no link or have proven inconclusive.⁽⁵⁾

PROGRESSION

Will it affect your baby if you drink more?

Drinking any more than one to two units, once or twice a week, means you could be putting your baby's health at serious risk from a variety of problems.

When you drink, alcohol passes from your blood, through the placenta, to your baby. A baby's liver doesn't mature until the second half of pregnancy. Therefore, your baby cannot process alcohol as well as you can.⁽⁶⁾

It is not yet known at what exact level of alcohol intake the risk of miscarriage or damage to your

baby starts to increase. But if you drink more than the recommended guidelines, you are taking a risk with your baby's health. The more you drink, the more of a risk you are taking.

- Miscarriage, stillbirth, premature birth and small birth weight have all been associated with the mother binge drinking.⁽⁷⁾ Binge drinking in women is defined as drinking more than six units on one occasion.
- Other effects of drinking heavily in pregnancy include Fetal Alcohol Spectrum Disorder (FASD). Around 6,000 children are born with FASD each year.⁽⁸⁾ Symptoms of FASD include:
 - Learning difficulties, problems with emotional development and behaviour, memory and attention deficits, hyperactivity, difficulty in organising and planning, and problems with language
 - Facial deformities
 - Being small, at birth and throughout life
 - Poor muscle tone
 - As a result of their difficulties with learning, judgement, planning and memory, people with FASD may experience additional problems. These include psychiatric problems, a disrupted education, trouble with the law, alcohol and drug problems, and inappropriate sexual behaviour.⁽⁹⁾

Children with FASD can have one or several of these symptoms. Children who display all of the symptoms are defined as having Fetal Alcohol Syndrome (FAS).⁽¹⁰⁾

How a baby will be affected depends on how much its mother drinks and at what point in her pregnancy. For example, damage to the organs through heavy drinking is most likely to happen in the first three months.⁽¹¹⁾

ADVICE and GETTING HELP

Although the healthiest option is to not to drink at all while pregnant, if you drink **no more than** one to two units, no more than once or twice a week, the risk of harming your baby is minimal.

However, if you do drink, it is **extremely important** that you realise what a unit of alcohol actually is. One drink is hardly ever just one unit. Even a small (125ml) glass of wine or a half pint of standard beer has one-and-a-half units.

Our unit calculator www.drinkaware.co.uk/tips-and-tools/drink-diary has all the information about how many units are in different measures of different drinks and brands.

What if you didn't know you were pregnant and have been drinking?

The Government advises that if you're trying for a baby, you should stop drinking to avoid this situation. However, a lot of women drink in the early stages of their pregnancy – sometimes heavily – before they know they're expecting. Stop as soon as you find out and if you're concerned at all talk to your GP or midwife.

For more information and advice on Fetal Alcohol Syndrome or Spectrum Disorder, go to the National Organisation on Fetal Alcohol Syndrome UK's website, www.nofas-uk.org, or call their helpline on 08700 333 700.

References

- 1 Department of Health, Updated alcohol advice for pregnant women, <http://nds.col.gov.uk/environment/fullDetail.asp?ReleaseID=287152&NewsAreaID=2&NavigatedFromDepartment=False>
 - 2 NICE, *Antenatal care: Routine care for the healthy pregnant woman*, <http://www.nice.org.uk/nicemedia/pdf/CG062NICEguideline.pdf>
 - 3 Gray, R & Henderson, J 2006, Report to the Department of Health: Review of the fetal effects of prenatal alcohol exposure from the National Perinatal Epidemiology Unit, University of Oxford, May <http://www.npeu.ox.ac.uk/downloads/reports/alcohol-report.pdf>
 - 4 Kelly, Y, Sacker, A, Gray, R, Kelly, J, Wolke, D & Quigley, M 2008, 'Light drinking in pregnancy: A risk for behavioural problems and cognitive deficits at three years of age?', *International Journal of Epidemiology*, October.
 - 5 Gray, R & Henderson, J 2006, Report to the Department of Health: Review of the fetal effects of prenatal alcohol exposure from the National Perinatal Epidemiology Unit, University of Oxford, May <http://www.npeu.ox.ac.uk/downloads/reports/alcohol-report.pdf>
 - 6 NHS Choices, *Alcohol and Pregnancy*, <http://units.nhs.uk/pregnancy.html>
 - 7 Gray, R & Henderson, J 2006, Report to the Department of Health: Review of the fetal effects of prenatal alcohol exposure from the National Perinatal Epidemiology Unit, University of Oxford, May <http://www.npeu.ox.ac.uk/downloads/reports/alcohol-report.pdf>
 - 8 National Organisation on Fetal Alcohol Syndrome, www.nofas.org.uk
 - 9 BMA Board of Science, 2007, *Fetal alcohol spectrum disorders: A guide for healthcare professionals*, May, www.bma.org.uk/images/FetalAlcoholSpectrumDisorders_tcm41-158035.pdf
 - 10 Ibid.
 - 11 Ibid.
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