features

 CNS involvement, including cognitive impairment, irritability, hyperactivity, hyperactivity, hypertonia, and behavioral problems

Facial features include hypoplastic maxilla; micrognathia; short palpebral fissures; thinned upper lip; hypoplastic philtrum; short, upturned nose.

One or a combination of these features present in infancy or later (may not appear until later in life).

Children or adults who demonstrate cognitive, behavioral, and psychosocial problems without physical features and growth delay are referred to as having ARND.

Affected infants may display nonspecific signs, such as irritability, lethargy, difficulty establishing respirations, seizures, tremors, poor suck reflex, and abdominal distention. Birth defects may occur but are less common.

Diagnosis is made more difficult by a lack of a single biologic marker and may be made based on maternal history of alcohol ingestion.

A number of terms (including ARND and FASD) have been proposed to describe the combination of findings.

exposure at any period may cause subtle damage to the developing fetus.

Effects of alcohol on CNS are not reversible.

FASD is the leading cause of preventable cognitive impairment in the United States.

Early intervention with mothers is aimed at minimizing fetal effects, education, and involvement in prevention and treatment counseling.

Early intervention with newborns focuses on reducing the effects of alcohol exposure on growing child, especially in relation to cognitive deficits and learning disabilities.

Treatment in the neonatal period is similar to that of drug-exposed infants and should involve extensive assessment and individualized developmental care.

Provide resources to help decrease or eliminate alcohol intake. During Your Pregnancy: Alcohol During Pregnancy is available at the March of Dimes' website.*

Further information is available from the National Organization on Fetal Alcohol Syndrome[†] and Centers for Disease Control and Prevention.[‡]

Maternal Tobacco Smoking

Smoking is associated with significant birth weight deficits; positive dose-response relationship is related to size of fetus.

Counseling regarding fetal and postnatal effects should be made available to all pregnant women, and they are encouraged to stop smoking. Smoking cessation during pregnancy decreases the chance of fetal complications.

Encourage pregnant women to enroll in smoking cessation programs.