

Clinical Tool: Substance Use and Pregnancy

Early intervention and safety planning

It is essential to provide early intervention to young women who are pregnant and experiencing substance use problems. Young women in this situation should be provided with supported referral to specialist services via their maternity care team. In Victoria, a state-wide specialist service for pregnant women with complex substance dependence is available through the [Women's Alcohol and Drug Service](#). This service also provides assessment and care to infants exposed to substance use during pregnancy. Health practitioners in other states need to research what programs are available locally as Victoria is the only state with a state-wide support program (as at July 2020).

Regarding child safety concerns, referral to child welfare or support services may be indicated for an unborn child. Child welfare policies will vary by state on what services and reporting streams are available in relation to safety concerns for unborn children. Health practitioners should contact their local Child Safety department for guidance. It is important to be aware that mandatory reporting requirements vary by jurisdiction as do the list of professions required to make mandatory reports. It is important to be aware of the reporting requirements for your jurisdiction and profession.

What is the effect of daily heavy drinking (over 48–60 gr. ethanol/day) on a developing fetus?

Fetal Alcohol Syndrome (FAS) is the most common, serious and specific syndrome of alcohol effects in pregnancy. The main features of FAS are prenatal and postnatal growth deficiency, short stature, developmental delay, microcephaly, fine-motor dysfunction and facial dysmorphism. In addition, there may be cleft palate, joint and cardiac anomalies and, altered palmar creases.

What is the effect of amphetamines on the developing foetus?

- reduced growth and head circumference.
- antepartum bleeding conditions.
- behaviour and learning difficulties in children who were exposed in utero.
- pregnancy complications including miscarriage and early labour;
- an increased risk of foetal abnormalities (i.e. heart abnormalities); altered foetal nervous system as the drug acts as a stressor to the baby and alteration of (baby) brain structure and development.
- methamphetamine use in pregnancy may increase the incidence of preterm birth.

What does the effect of tobacco use have on pregnancy?

Compared to non-smokers, women who smoke before pregnancy are twice as likely to experience the following conditions:

- Delay in conception.
- Infertility
- Ectopic pregnancy.
- Premature rupture of the membranes.
- Placental abruption.
- Placenta previa.

Compared with babies born to non-smokers, babies born to women who smoke during pregnancy are more likely to have one of the following conditions:

- Premature birth
- Low birth weight.
- Small for gestational age or fetal growth restricted.
- Cleft lip, or cleft palate
- Higher risks of SID (Sudden Infant Death Syndrome)

Clinical guidelines

Clinical guidelines are available on the Women's Alcohol and Drug Service website - <https://www.thewomens.org.au/health-professionals/maternity/womens-alcohol-and-drug-service/> on:

- Managing alcohol withdrawal during pregnancy, and
- Managing methadone stabilisation during pregnancy

References

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- Mater Mothers' Private Hospital: Amphetamine Use During Pregnancy and Breastfeeding. <http://brochures.mater.org.au/brochures/mater-mothers-hospital/amphetamine-use-during-pregnancy-and-breastfeeding>
- Goodmeadow M. Methamphetamine Use During Pregnancy: Maternal and Neonatal Implications. Obstetrics and Gynecology 2010; 116 (2, Part 1): 330-334.
- CDC Information for Health Care Providers and Public Health Professionals: Preventing Tobacco Use During Pregnancy <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/tobaccousepregnancy/providers.html>
- CDC Information for Health Care Providers and Public Health Professionals: Preventing Tobacco Use During Pregnancy <https://www.cdc.gov/reproductivehealth/maternalinfanthealth/tobaccousepregnancy/providers.html>