Alcohol

This sheet is about exposure to alcohol in pregnancy and while breastfeeding. This information is based on available published literature. It should not take the place of medical care and advice from your healthcare provider.

**What is alcohol?**

Alcohol is the ingredient in beer, malt liquor, wine, and spirits (“hard liquor”) that can cause feelings of being “buzzed” or drunk. Alcohol can be found in some canned and bottled beverages such as hard lemonade, hard iced tea and others. Alcohol is also an ingredient in some over-the-counter and prescription medications such as cough syrup, liquid vitamins and others. Alcohol can be listed in products as ethanol, ethyl alcohol or alcohol.

One standard serving of beer (12 ounces), malt liquor (8 ounces), wine (5 ounces), and spirits (1.5 ounces), all contain similar amounts of alcohol. Medications and liquid vitamins may contain from 5% alcohol to 12% or more.

The measurement of the amount of alcohol in the blood is called blood alcohol concentration (BAC). Binge drinking has been defined as a pattern of drinking alcohol that results in a BAC of 0.08% or more. This typically happens if a female has 4 or more drinks in about 2 hours. (For males, it is typically 5 or more drinks within about 2 hours). Heavy alcohol use in females has been defined as consuming 4 or more drinks on any day or 8 or more drinks per week. (For males, it has been defined as consuming 5 or more drinks on any day or 15 or more per week.) While this can vary from person to person, it is recommended to avoid all alcohol use in pregnancy.

**Help is available:** Talk with your healthcare provider as soon as possible about your drinking. They can go over what resources are available to help you stop. If you do not have a healthcare provider or cannot get a hold of them and need help quitting, there is free help available. Call 800-662-HELP (4357) or visit https://alcoholtreatment.niaaa.nih.gov/.

**Is it OK to drink beers labeled “no-alcohol” or “low-alcohol” during pregnancy?**

Beers labeled “no-alcohol” or “low-alcohol” may contain higher levels of alcohol than reported or suggested by the label. For this reason, these beverages should be avoided in pregnancy.

**I drink alcohol. Can it make it harder for me to get pregnant?**

It is not known if drinking alcohol can make it harder to get pregnant.

**Does drinking alcohol increase the chance of miscarriage?**

Miscarriage is common and can occur in any pregnancy for many different reasons. Studies on the chance of miscarriage with alcohol exposure during pregnancy have had mixed results. Some studies have found an increased chance of miscarriage and others have not. Studies have shown that some people who drink during pregnancy may have an underlying condition (such as depression) or other exposures (such as cigarette smoke) that can increase the chance of miscarriage.

**Does drinking alcohol increase the chance of birth defects?**

Every pregnancy starts out with a 3-5% chance of having a birth defect. This is called the background risk. Drinking alcohol in pregnancy can cause Fetal Alcohol Spectrum Disorder (FASD). FASD includes a range of effects related to alcohol exposure in pregnancy, from physical birth defects (including defects of the heart, kidneys, and bones) to changes in brain development. These effects can range from mild to severe. Depending on the specific effects or combination of effects, healthcare providers use different terms to describe different kinds of FASD.

The most severe form of FASD is Fetal Alcohol Syndrome (FAS). Children with FAS have a pattern of birth defects that includes specific facial features, a smaller head and body size, and effects on brain development that can cause significant challenges in learning and behavior.

The chance of FASD is related to how much a person drinks while pregnant, how often they drink, and other factors like genetics and nutrition. The chance of FASD may be different for the same person in different pregnancies. Studies have associated daily drinking and binge drinking with risks for FASD. Effects of smaller amounts of alcohol exposure
are less clear. Talk to a MotherToBaby specialist about FASD and your pregnancy.

_I just found out I am pregnant and last weekend I had one beer. Will my baby have FASD?_

Having a single serving of alcohol one time is much less concerning than heavy or binge drinking and is considered less likely to cause alcohol-related problems for the baby. However, it is recommended that you avoid further use of alcohol during your pregnancy.

**Does drinking alcohol in pregnancy increase the chance of other pregnancy-related problems?**

Drinking alcohol may increase the chance of preterm delivery (birth before week 37) and for the fetus to be smaller than expected. Studies have reported higher rates of stillbirth among people who drink alcohol during pregnancy.

**If I drink alcohol in pregnancy, will it cause withdrawal symptoms in my baby after birth?**

Drinking alcohol late in pregnancy can cause temporary symptoms in newborns soon after birth. These symptoms are sometimes referred to as withdrawal. Symptoms of withdrawal can include involuntary shaking movements (tremors), increased muscle tone, restlessness, and excessive crying. Talk with your healthcare providers about any alcohol use in pregnancy so that if symptoms occur your baby can get the care that is best for them.

**What screenings or tests are available to see if my pregnancy has birth defects or other issues?**

There are no tests available to diagnose FASD during pregnancy. Prenatal ultrasounds can be used to screen for some birth defects. Ultrasound can also be used to track the growth of the pregnancy. Talk with your healthcare provider about any prenatal screenings or testing that are available to you. There are no tests available during pregnancy that can tell how much effect there could be on future behavior or learning.

**Does drinking alcohol during pregnancy affect future behavior or learning for the child?**

Prenatal alcohol exposure is the leading cause of problems with brain development in the United States. The effects of alcohol on brain development include problems with learning and memory, speech and language, aggression, attention, controlling emotions (tantrums, mood issues, impulsivity, communication, depression/anxiety), and problems with daily life skills such as bathing and playing with others.

Talk to your baby’s healthcare provider about your alcohol use during pregnancy. They can evaluate your child after birth for any effects from alcohol and continue to monitor for learning and behavioral issues as the child gets older. Although FASD cannot be cured, children can benefit from an early diagnosis and services. Your child’s healthcare provider can talk with you about what is available for families and children with problems related to alcohol exposure in pregnancy.

**Breastfeeding while drinking alcohol:**

Alcohol gets into breast milk. The amount of alcohol in a person’s breast milk is about the same as in their blood. Alcohol passes back and forth between the bloodstream and the breast milk. Only time can lower the amount of alcohol in breast milk. Pumping and discarding milk, drinking water, taking caffeine, or exercising do not help the body get rid of alcohol faster. It takes about 2 to 2.5 hours for each standard drink to clear from breast milk. For each additional drink, a person must wait another 2-2.5 hours per drink. If needed, the person may pump during this time to stay comfortable and keep up their milk supply. Discarding this pumped milk will help avoid exposing the baby to any alcohol in the milk. Drinking alcohol can also make it harder for the body to make milk.

The infant brain continues to grow after birth. Effects on child development from alcohol in breast milk are not well studied. One study suggested problems with motor development following exposure to alcohol in breast milk, but other studies did not show the same results. Some reports found that babies exposed to alcohol through breast milk may eat less and/or have changes in their sleeping patterns. If you suspect the baby has any symptoms, contact the child’s healthcare provider.

Having more than one drink per day is not recommended while breastfeeding. However, since breastfeeding has known benefits for the baby, talk with your baby’s healthcare provider about how much and how often you drink so they can help you weigh the risks and benefits of continuing to breastfeed. Be sure to talk to your healthcare provider about all your breastfeeding questions.

**If a male drinks alcohol, could it affect fertility or increase the chance of birth defects?**
Some studies have shown that drinking alcohol lowers male fertility (ability to get partner pregnant). Male exposure to alcohol is not known to increase the chance of birth defects above the background risk. In general, exposures that fathers or sperm donors have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/.

Please click here for references.