FASD In The Spotlight: MotherToBaby Experts Featured On CTV

TORONTO, CANADA – Ahead of the Fetal Alcohol Canadian Expertise (FACE) Research Network's 15th anniversary, as well as the international MotherToBaby/Organization of Teratology Information Specialists (OTIS) joint conference with the European Network of Teratology Services (ENTIS), MotherToBaby experts landed a primetime opportunity on CTV, Canada's largest privately-owned television network, to raise awareness of Fetal Alcohol Spectrum Disorders (FASD).

In the following video, reporter Pauline Chan tells the story of Savannah Pietrantonio, 47, who struggles daily with her symptoms of FASD. Dr. Kenneth Lyons Jones, MotherToBaby/OTIS president, as well as Dr. Gideon Koren, director of MotherToBaby's Canadian affiliate Motherisk, explain why it's often underdiagnosed:

Click here for video

If you have questions about alcohol during pregnancy or breastfeeding call MotherToBaby toll-FREE at 866-626-6847. You can also read our Alcohol and Pregnancy Fact Sheet here

MotherToBaby is recommended by many agencies including the Centers for Disease Control and Prevention (CDC).

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Featured On CTV

TORONTO, CANADA – ***Experts Will Examine Canadian Strategies For Ideas To Improve FASD Awareness Around The World.***

The world's leading teratology experts at MotherToBaby USA and Motherisk Canada, members of the international non-profit Organization of Teratology Information Specialists (OTIS), will converge with the European Network of Teratology Information Services (ENTIS) in Toronto on September 19th – 21st to share breakthrough research and discuss how to prevent alcohol consumption during pregnancy.

Since the sensitivity to alcohol varies from one pregnancy to the next, no safe level of alcohol during pregnancy has been established. The exposure to the fetus can result in a range of neurobehavioral disabilities, now known as Fetal Alcohol Spectrum Disorders (FASD). Globally, September is commemorated as FASD Awareness Month.

"FASD is the leading cause of developmental disability in Canada and this area of research is critical," said Gideon Koren, MD, FRCPC, director of the Motherisk program at The Hospital For Sick Children (SickKids) in Toronto and program host of this year's conference. "When prenatal alcohol exposure affects as many as one in 100 babies to some degree, FASD really should be considered more than a problem… it's a health crisis," he added.

It's been more than 40 years since Kenneth Lyons Jones, MD, OTIS and MotherToBaby's president, along with David Smith, MD, first identified Fetal Alcohol Syndrome (FAS) after examining several children with similar traits who had all been born to chronic alcoholic mothers, yet there is still misinformation circling the globe about prenatal alcohol exposure.

"Studies, primarily out of Europe, suggesting that low to moderate levels of alcohol during pregnancy are safe add to one of the biggest health challenges today," said Jones. "Learning from each other is an obvious and important focus of the conference."

Jones acknowledges that Canada is farther ahead of most of the world in its awareness of FASD and is, as a result, a fitting host for the international joint meeting with ENTIS, which only takes place every four years. "There are important things about intervention strategies, providing services to underserved populations and getting certain professional groups such as the Canadian Bar Association involved that can be learned from the Canadians."

Despite this progress and the well-documented spectrum of negative physical and mental effects alcohol can have on the developing fetus, as many as 15% of Canadian women report drinking during pregnancy, according to The Society Of Obstetricians And Gynaecologists of Canada.

Motherisk Canada is home to the Fetal Alcohol Canadian Expertise (FACE) Research Network, which will celebrate its 15th anniversary on September 17th at SickKids and will feature Jones as the keynote speaker.

All North Americans can be connected with experts through the MotherToBaby and Motherisk programs. Women can receive personalized risk assessments regarding alcohol, medications and other exposures during pregnancy and breastfeeding toll-free at MotherToBaby 1-866-626- 6847 and Motherisk 1-877-439-2744.

Help spread the word about preventing FASD by sharing the following PSA link.

Media Contact: Nicole Chavez, 619-368-3259, nchavez@MotherToBaby.org.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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BRENTWOOD, TN – Experts at MotherToBaby, a service of the international non-profit Organization of Teratology Information Specialists (OTIS), call the recent New York Times article suggesting use of antidepressants during pregnancy is more harmful than previously thought "incomplete" and "weak." The story takes a strong stance suggesting depression treatments during pregnancy may lead to more birth defects. "This kind of information can scare women into taking drastic measures, like stopping her medication suddenly," said Julia Robertson, teratogen information specialist and MotherToBaby/OTIS Board of Director member. "The article fails to include the overwhelming research that supports treating mental illness during pregnancy, which may be a contributor to healthier pregnancy outcomes, compared with women who stop their treatment cold turkey," she added.

The MotherToBaby/OTIS BOD strongly supports two responses to the NY Times article:

http://womensmentalhealth.org/posts/response-new-york-times-article-ssris-pregnancy-moving-toward-balanced-view-risk

http://www.huffingtonpost.com/seleni-institute/the-new-york-times-irresp_b_5761090.html

In addition, the MotherToBaby issued the following statement Monday to mothers and those planning pregnancies, in which the article has caused unnecessary anxiety:

To Concerned Moms,

Each day members of the Organization of Teratology Information Specialists (OTIS), experts behind the MotherToBaby service, review the new information on medications that are used in pregnancy and while breastfeeding. When we look at the research studies we look at how well each study was done and we note the strengths and weaknesses. Many studies are done well, but many are not. The recent article on antidepressant use in pregnancy from the New York Times did not give a careful and a complete review of all the available studies. In looking at all the studies that have been completed in the last 30 years with more than 100,000 pregnancies in which the mother used an antidepressant, we conclude that if there is a risk for a birth defect, the risk is very low.

The experts at MotherToBaby are here to talk with you about the medications you are taking and to provide you with the most up-to-date information and research. Hundreds of women and their health care providers seek information about birth defect prevention from OTIS and MotherToBaby every year. Our personalized, FREE counseling service is just a phone call away at 1-866-626-6847.

You can also view our Fact Sheets,(under the Resources button) which summarize information about antidepressant use in pregnancy and breastfeeding.

Sincerely,

OTIS Board of Directors along with the OTIS Website and Public Affairs Committees.

MotherToBaby's expertise is suggested by many agencies including the Centers for Disease Control and Prevention

(CDC).

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MotherToBaby is joining the cause to increase awareness of the risks of drinking alcohol while pregnant as September's Fetal Alcohol Spectrum Disorders (FASD) Awareness Month kicks off. It is estimated that 40,000 babies are born each year with FASDs, which describe a range of effects that can happen to a fetus when a woman drinks alcohol during her pregnancy.[1] The U.S. Surgeon General advises pregnant women and women who are considering becoming pregnant to abstain from alcohol consumption to eliminate FASD.[2]

When alcohol is consumed during pregnancy, the mother's blood passes the alcohol to the baby through the placenta and the umbilical cord. There is no known safe amount or type of alcohol to drink during pregnancy. There is also no safe time to drink during pregnancy, including before a woman knows she is pregnant. FASDs can impact children's physical, mental, behavioral, or cognitive development. It considered the most preventable form of mental retardation.

To prevent FASDs, a woman should not drink alcohol while she is pregnant or if she might be pregnant. "There is a huge number of women that don't know that they're pregnant so they are behaving in that period of time the same way they would behave if they weren't pregnant," said Kenneth Lyons Jones, MD, MotherToBaby president and one of two doctors who first identified the most severe form of FASD, Fetal Alcohol Syndrome (FAS), in 1973. "It's a major problem when it comes to FASD, but it's important to note that it's never too late to stop drinking." Because brain growth takes place throughout pregnancy, the sooner a woman stops drinking, her baby's chances for a healthier outcome increases.

For a personalized risk assessment, as well as resources about the effects of alcohol during pregnancy, contact MotherToBaby toll-FREE from anywhere in North America at 866-626-6847. We also have a Fact Sheet on alcohol in pregnancy available in English and in Spanish. You're also encouraged to read information from our partners at the Centers for Disease Control and Prevention.

[1]*May PA & Gossage JP. Estimating the prevalence of fetal alcohol syndrome: A summary. Alcohol Research & Health 2001;25(3):159–167.*

[2]*US Department of Health and Human Services. US Surgeon General releases advisory on alcohol use in pregnancy. Washington, DC: US Department of Health and Human Services; 2005.*

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(Salt Lake City, UT) – For three decades, the Pregnancy Risk Line's (PRL) MotherToBaby service has helped mothers and health care providers keep babies safe during pregnancy and while breastfeeding. On May 30, the program celebrates 30 years of service and will take its 230,000th call, give or take a few.

The experts at MotherToBaby answer questions about a variety of potential exposures like foods, prescriptions, OTC medications, diseases, and immunizations a baby can be exposed to through Mom. "Health care providers ask about pain medications, moms want to know if it's safe to paint the nursery, even grandmothers call to ask whether mom is doing too much exercise," says program coordinator Lynn Martinez. "Every call is important. We're happy to be helping families feel safer and navigate through a stressful time."

Geneticist John C. Carey, M.D., founder and MotherToBaby medical director, remembers getting the idea for the service in 1979 when he first started his practice in pediatric genetics. "We struggled with helping moms without making them feel guilty about birth defects, not caused by the exposure they had, but by genetic factors they had no control over," said Carey. "The service still faces some of the same challenges today," he added. "With access to information more available but not always reliable, moms feel the risk to baby is higher than what has been proven, and providers often find conflicting information in published research."Experts at MotherToBaby review new studies, compare findings to past studies, and work with professionals from other disciplines to determine the risks for exposures.

"The personalized risk assessments we provide help clinicians and mothers determine the best course for each

situation," Martinez said, "Sometimes there are risky conditions and risky medications, such as using an antiepileptic medication versus the danger of leaving the mom's epilepsy uncontrolled. We provide the latest evidence-based information to help the primary care provider and mom make an informed choice, together."

Former First Lady Norma Matheson was on hand 30 years ago and said hello to the first caller. She is happy to return to help celebrate the anniversary. "The Risk Line has been a reassuring resource for moms who just want to do what's best for their growing baby," said the First Lady. I'm proud of the work MotherToBaby staff have been doing for Utah mothers-to-be and wish them another 30 year of helping save babies' lives."

PRL's MotherToBaby is a joint partnership between the Utah Department of Health and the University of Utah. It is one of 16 member services of the North American Organization of Teratology Information Specialists, now known as MotherToBaby. The service is open for calls Monday through Friday from 8:00 am to 5:00 pm. at 1-800-822-2229 or 801-328-2229. For more information visit https://mothertobaby.org//a> or follow them on Facebook and Twitter.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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