

CONTACT: Susan Rutherford Office: 214/688-3404 Home: 214/349-7820

* * * Doctor tells how outward features of Fetal Alcohol Syndrome indicate possible

DALLAS--Offspring of alcoholic mothers sometimes show the outward signs of Fetal Alcohol Syndrome. They include short eye slits with drooping eyelids, a long space between nose and upper lip, a low nasal bridge, narrow upper lip, small chin and flat midface. Hands can have an altered crease pattern on the palms, common in birth defects, indicating that fetal movement was not normal early in pregnancy. And FAS infants are smaller than their gestational age infers.

These FAS features are often subtle, and may go unnoticed by the layperson. But to Dr. Mary Jo Harrod, genetic counselor and assistant professor of Obstetrics and Gynecology at The University of Texas Southwestern Medical School, they are distinctive. She is frequently called upon to diagnose birth defects in newborns, and she says these outward features are indicators of inward abnormalities as well. Brain malformation and heart defects are not uncommon in FAS babies.

Dr. Harrod will be speaking on this preventable birth defect on Friday, December 5 at the Twenty-fifth Annual Postgraduate Seminar in Nutrition and Dietetics at Gooch Auditorium on the UT Health Science Center campus, 5323 Harry Hines. The seminar, which runs Friday and Saturday, is being sponsored by the Department of Nutrition and Dietetics of the School of Allied Health Sciences at UTHSCD.

She says there is no question that alcohol is a "teratogen"--that is, it causes the production of physical defects in the developing embryo. Alcohol passes freely across the placental barrier and studies show that alcohol concentrations in the fetus are at least as high as in the mother. Physicians report smelling alcohol on these newborns' breath and in the amniotic fluid. And blood alcohol concentrations show that many of these infants are legally intoxicated at birth. In the most severe cases FAS can cause intrauterine death, while milder cases result in growth deficiencies, mental retardation, learning problems, hyperactivity, brief attention spans, and a constellation other atypical features.

"Alcohol is toxic to developing cells--after all, it's used to sterilize and as a fixative," says Dr. Harrod. "Babies with Fetal Alcohol Syndrome tend to be small at birth, even if the pregnancy goes to term, and they don't catch up later on. Studies indicate that not only the body but also the brain is smaller than it should be, and this decrease in the number of cells means impairment of some significant degree.

"Abnormalities from poisoning and killing off cells don't end at birth. If the alcohol kills off certain brain cells at various stages of pregnancy, the function of those cells after birth is not what it should be."

One formidable question, she says, is how much alcohol is too much--what are the lower levels of "heavy drinking." In most studies performed by medical researchers, the lower levels of heavy drinking have been well within what is generally thought of as "social drinking." One major study taking place at the University of Washington at Seattle labeled as "heavy drinkers" those who reported one ounce or more of absolute alcohol per day on the average. That is the equivalent of two or more drinks of wine, liquor or beer per day.

"What about the people who drink on weekends or who indulge in binge drinking a couple of times during the early part of pregnancy?

"There are those who drink a lot and still have bright healthy kids with no problems," says Dr. Harrod. "And there are those who drink less and have children who do have problems. You never know which group you'll fall into.

"Parents of a child with any birth defect often want to put the blame on someone or something. Most of the time brith defects are out of their control. But this is one terrible exception where you can place blame, and it's devastating psychologically to realize this could have been prevented."