



Alcohol Consumption in Pregnancy

September 2024

Information in this leaflet is general in nature and should not take the place of advice from your healthcare provider. With every pregnancy there is a 3 to 5% risk of having a baby with a birth defect or developmental problem.

There is currently no safe level of alcohol intake established during pregnancy. Alcohol in the bloodstream of a pregnant woman crosses the placenta producing levels in the developing baby's bloodstream that are as high as those in the mother. In sufficient quantities it may disrupt the unborn baby's normal development.¹⁻³

It is well known that women are more quickly affected by alcohol than men. Women are more vulnerable to both the short-term and long-term effects of alcohol because of their size and the way their bodies process alcohol compared to men. Even between women, blood alcohol levels can vary depending on their genetics (and other factors) which may affect how they as individuals process alcohol. This means the sensitivity to alcohol varies between individual pregnant women and their babies. This sensitivity also depends on the stage in the pregnancy when the alcohol is consumed.

The risk of harm increases when alcohol is consumed frequently and in large amounts over a short period, so binge drinking may be especially harmful. The risk to the unborn baby also increases when drinking alcohol is associated with lifestyle factors such as smoking, substance use and poor diet. ¹⁻³

Overall, there is good quality evidence that alcohol consumption at excessive levels can be damaging to the unborn baby. However, the minimum or threshold level at which alcohol poses a significant threat to pregnancy and a baby is not known.¹⁻³

For these reasons the current Australian Guidelines to Reduce Health Risks from Drinking Alcohol^{1,2} advise

- Maternal alcohol consumption can harm the developing unborn baby.
- For women who are pregnant or planning a pregnancy, not drinking is the safest option as there is no safe level of alcohol established in pregnancy.

The level of risk to the unborn baby is likely to be low if a woman has consumed only small amounts of alcohol before she knew she was pregnant or during pregnancy.¹⁻³ **Stopping drinking at any time in the pregnancy will reduce the risk to the baby. For individual advice, call MotherSafe:** Sydney Metro (02) 9382 6539, NSW non-metro 1800 647 848.

When considering your alcohol intake, remember that one Australian standard drink contains 10g of alcohol. This approximates to 285mL of full-strength beer, 425mL of light beer, 100mL of wine or 30mL of spirits. If you are concerned about your alcohol intake or are finding it hard to reduce or stop drinking, you should consider discussing this with your doctor or midwife or with a specialist alcohol counselling service (see below).

- Alcohol and Drug Information Service (ADIS) is a 24-hour confidential telephone counselling service. Call 1800 250 015.
- Area Health Services also offer specialised support for alcohol management. Discuss where you may be able to go for assistance with your healthcare provider.



What are the consequences associated with high level and/or sustained alcohol consumption in pregnancy?¹⁻⁵

- Increased risk of miscarriage, stillbirth, poor growth and premature birth.
- Increased risk of a baby experiencing withdrawal symptoms after birth. If the mother has been drinking heavily close to delivery, her baby may experience withdrawal symptoms that include tremors, increased muscle tone, restlessness and excessive crying.
- Fetal Alcohol Spectrum Disorders (FASD).
 This is a diagnostic term for severe effects on a baby's physical and neurological development that can occur due to exposure to alcohol while in the womb. Women who are chronic heavy drinkers are at increased risk of having a baby with FASD.
- A child with FASD has damage to the nervous system that may result in disabilities associated with learning, development and behaviour. These effects are generally not seen at birth.
- Some babies with FASD who were exposed to prolonged high level of drinking in the womb may also have birth defects, distinctive facial features and decreased growth and head size (which can be detected by ultrasound during pregnancy). It is the most severe and clinically recognisable form of alcohol damage caused during pregnancy.

Any concerns about your child's development after birth should be discussed with a healthcare professional. Early diagnosis and treatment have been found to considerably improve the long-term outcome for affected children.

Fermented drinks

Fermented drinks such as kombucha contain some alcohol as part of the manufacturing process. In general, these products contain only trace amounts of alcohol but there have been some recalls of commercial products because they contained more significant amounts of alcohol. Home brewed products have no regulation and should be avoided in pregnancy as alcohol levels may be higher and they may also contain other contaminants.⁶

References

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Other resources

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