



MICAP RECAP

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*Michigan Council on Alcohol Problems
Celebrating its 111th Anniversary in 2016*

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FETAL ALCOHOL SYNDROME: A State and National Tragedy!

**By Rev. W. J. (Bill) Amundsen, Retired
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PREVENTING A TRAGEDY.

There are some health issues which should never have to be experienced! Fetal Alcohol Syndrome (FAS) is one of those. As long as the baby's mother is willing to fore-go the use of beverage alcohol during her pregnancy, and while she is trying to get pregnant, her baby will not suffer from any FAS injuries. The National Organization of Fetal Alcohol Syndrome (NOFAS) puts it this way:

“No Safe Time! No Safe Amount! No Safe Alcohol During Pregnancy! Period! ¹”

Recently, OB/GYN doctors and health officials in Michigan indicated that they do not expect the Infant Mortality Rate (IMR)² to decline until and unless more women of child-bearing age begin to be more responsible about their lifestyles before, during, and after pregnancy.

The above paragraph speaks to the damages caused by FAS, including mental retardation and other problems associated with the Central Nervous System (Brain Damage), or damage to the heart, arms, eyes, legs, ears, teeth, palate, and/or external genitalia, again, in varying degrees.

The relationship of FAS to the ingestion of beverage alcohol is so clear that physicians and others are able to trace the ingestion of beverage alcohol by the mother. This is done by noting the physical damage sustained by the newborn infant and comparing it with a growth and development chart. This chart 1, available from NOFAS, indicates which body parts might primarily be affected according to weeks of gestation. It can also be used in the other direction. If the mother knows that she ingested beverage alcohol during a particular week of her gestation, OB/GYN physicians can be on the watch for damage to certain areas of the newborn's body which were developing during that time period.

WHAT DOES “FAS” COST OUR SOCIETY?

There are two primary ways of listing costs for FAS. One is the estimated “lifetime” cost of persons afflicted with FAS and averaging them out to a “lifetime”

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cost per person. Several authors and/or groups have studied this and estimates vary widely. In 2002, one group estimated a lifetime cost to be \$1.6 Million for medical treatment, special education, and residential care per person. They also estimated \$0.4 Million for productivity losses. This totals \$2.0 Million. This will only rise as we begin to find ways to include costs of courts, probation, and imprisonment because many individuals afflicted by FAS are picked up by the Criminal Justice System. Prison time, alone, can cost about \$30,000.00 per year per person.

The other costs concern the Total Annual Cost to our nation. These are estimated by several groups at between \$0.5 Billion to \$6.0 Billion annually. Several authors calculate an Annual cost to the U.S. at about \$4.0 Billion per year. This seems like a good average. But this will rise as we find ways to accurately include legitimate costs for the use of the Criminal Justice System by persons afflicted with FAS. It could also decline if we, as a nation and society (and individuals) find ways to prevent FAS, A PREVENTABLE TRAGEDY.

There are no figures for "family costs" widely available. But persons afflicted with FAS are born into families. Extra care costs are needed. Extra home care could/would possibly keep one parent home and thus prevent him or her from earning an income. Taken over years, this will add up to thousands of dollars. Persons afflicted with FAS are often consigned to low-paying jobs, if indeed, they are able to work at all.

WHAT CAN WE DO?

You and I can remind women of child-bearing age who are pregnant or planning to get pregnant that there is: "No Safe Time! No Safe Amount! No Safe Alcohol During Pregnancy! Period!"

Maybe the women of child-bearing age are not in our churches or circles. Perhaps they won't get the message through small groups such as that where you received this information. But we know who they are. And we can remind our daughters, and grand-daughters, great-grand-daughters, friends, and neighbors: "No Safe Time! No Safe Amount! No Safe Alcohol During Pregnancy! Period!"

We can talk to our neighbors and friends and remind them that FAS is preventable! It only happens when a pregnant mother ingests beverage alcohol. They only need to fore-go drinking beverage alcohol for the sake of their unborn child for nine months (38 weeks).

AND, yes, we can talk to our doctors about FAS because some doctors still believe it is okay for a pregnant woman to have one or two drinks per day while she is pregnant, even though their professional guidelines indicate the contrary: "No Safe Time! No Safe Amount! No Safe Alcohol During Pregnancy! Period!"¹

FOR MORE INFORMATION:

Contact the following agencies for more information:

The Michigan Council on Alcohol Problems (contact information on masthead)

The National Institute on Alcohol Abuse and Alcoholism (NIAAA)

5635 Fishers Lane, MSC 9304

Bethesda, MD 20892-9304,

Phone: 301-443-3860

E-Mail: web Sponsor (niaaaweb-r@exchange.nih.gov)

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Alcohol Problems Affect Us All, But Too Often Go Untreated

By Dr. Vernon K. Smith, AADIF/MICAP Vice President

Alcohol problems are more common than often thought. Unfortunately, even when alcohol problems are acknowledged, they often go untreated.

Over 30% of Americans self-reported that they had alcohol – related problems now or in their lifetime. These included problems that were classified as either alcohol abuse problems, or alcohol dependence, according to a study published in the *Archives of General Psychiatry*.

About 42% of men and 19% of women in the U.S. had a history of alcohol abuse or alcohol dependence.

Alcohol abuse involves excessive drinking, and is associated with interpersonal problems, and with social, legal or financial problems such as drinking-related failure to meet obligations in daily life at home, school or work. A total of 18% of Americans self-reported that they had or had experienced alcohol abuse at some time in their lifetime, of whom one-in-three had experienced alcohol abuse in the past year.

Alcohol dependence is a more serious condition, which involves a pre-occupation or compulsion to drink, tolerance to drinking or withdrawal symptoms, along with impaired control and also the problems associated with alcohol abuse. A total of 13% of Americans indicated that they had experienced alcohol dependence at some time in their lives, of whom one-third acknowledged alcohol dependence in the past year.

The study included interviews with over 43,000 adults across the U.S. The lead researcher was Dr. Bridget Grant, Chief of the Laboratory of Epidemiology and Biometry at the NIAAA (the U.S. National Institute on Alcohol Abuse and Alcoholism.)

In an interview with *The Washington Post*, Dr. Grant said a major issue is the delay before any treatment begins for alcohol problems. That delay typically is 8 to 10 years and that those 10 years “can be devastating.” Equally significant, she indicated that “only 24% of people who had alcohol dependence are ever treated.”

Commenting on the study in *The Washington Post*, another expert in this field, Dr. James Garbutt, professor of psychiatry at the University of North Carolina, found the low rate of treatment for alcohol dependence to be troubling: “The findings speak to the continued lack of adequate awareness and treatment of these disorders and the devastating consequences this has for public health.”

Even beyond public health, almost every American is affected through the alcohol problems experienced by family members, friends, co-workers and even complete strangers on our streets and highways. As the authors conclude: “Alcohol abuse and dependence remain highly prevalent and disabling.”

This article was prepared by Vernon Smith, based on news reports and: “Results from the National Epidemiologic Survey on Alcohol and Related conditions,” <http://archpsyc.jamanetwork.com/article.aspx?articleid=482349> accessed online 1/13/2016.

Our Speaker's Bureau

If your group or church or class/school would like to hear something more about MICAP, or Alcohol Problems in Michigan or the USA, please contact Rev. Bill Amundsen at (517) 323-2445. Please leave a message if no one answers. He will return your call to arrange a mutually convenient time. We are a temperance organization concerned with under-age and abusive drinking. We work with the State Legislature to encourage a better social policy on beverage alcohol.



MICAP/AADIF

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FETAL ALCOHOL SYNDROME

The National Organization on Fetal Alcohol Spectrum (NOFAS)

Website: <http://www.nofas.org>

FOOTNOTES:

1. National Organization on Fetal Alcohol Syndrome, Poster, Your Baby in Weeks.
2. IMR = the number of deaths of infants before their first year of age, per 1000 live births.

Donation to MICAP Would be Wonderful

MICAP is a small non-profit organization with a mission to provide information about the consequences of alcohol abuse, and to promote public policies that address these issues. It is a big task, and we are committed to doing our part.

For this work, MICAP depends 100% on gifts from people like you. Our work year-around depends directly on these gifts. MICAP could not do its work without your financial support, which truly makes a difference in this important work.

MICAP is a non-profit 501(c)(3) organization. Your gift to MICAP is tax deductible to the extent allowed by the tax code. Please use the enclosed envelop, or send your check to: MICAP, P.O. Box 10212, Lansing, MI 48901. From the bottom of our heart, we thank you.