Incidence of Fetal Alcohol Syndrome in South Africa

In collaboration with researchers in South Africa, the NIAAA has been investigating the incidence of FAS in South Africa. A preliminary prevalence rate of 5% has been reported (NIAAA, 1999).

In a prevalence study of FAS among first graders in the Western Cape Province of South Africa, 3% of four hundred children examined were diagnosed with FAS, as reported by the NIAAA and CDC in 1998.

In the same region, May et al. reported rates of fetal alcohol syndrome that were 18 to 141 times higher than in the US. The rate among first graders was 46.4 per 1000.

Reference:

FAS: An International Perspective

Russian Orphanages Sites for FAS Research

An international collaborative study is being done to examine the unique characteristics of children with fetal alcohol syndrome (FAS). Moscow, Russia was chosen as a study site because women there drink more heavily than those in many other countries so that a high incidence of FAS and alcohol-related disabilities is expected. In addition, treatment for the developmentally disabled and orphaned children is provided through a system of boarding schools and orphanages. This system allows comparison of children with FAS with those who have disabilities for other reasons while controlling their educational and caregiving environment. In the United States, many secondary disabilities and behavioral problems have been reported in individuals diagnosed with FAS or partial FAS but it has not been possible to control the effects of the sometimes negative environments of these clinical samples.

In the Russian study, which was carried out in 2000, 20% of 1000 children examined in Moscow orphanages and boarding schools were diagnosed with the physical features of FAS. Thirty of these children were matched to 30 children of the same gender, age and IQ, also living in orphanages. When the groups were compared on a general battery of neuropsychological tests, no differences attributable to alcohol-exposure could be identified. Further research will evaluate specific cognitive processes as well as behavior patterns in these children.

This study, sponsored by the National Institute on Alcohol Abuse and Alcoholism, is a joint effort of Galina Marincheva, MD and Alexandra Mateeva, MD of the Institute for Psychiatry in Moscow and several investigators in the United States, including, Edward Riley, Ph.D., Sarah Mattson, Ph.D. and Kenneth Lyon Jones, MD of San Diego State University, Luther Robinson, M.D., from Buffalo, NY, and Claire D. Coles, Ph.D., from Emory University School of Medicine.

"... 20% of 1000 children examined in Moscow orphanages and boarding schools were diagnosed with the physical features of FAS"
Research from Finland
Twelve-year follow-up of children exposed to alcohol in utero

Eighty-two women who were consuming alcohol while pregnant attended a special clinic at the University Central Hospital, Helsinki with the aim of reducing heavy drinking during pregnancy. The children born to these women were followed up regularly. Of the original children, 70 of 82 could be traced at the age of 12 yrs. Information was gathered about schooling, family structure, whether help had been sought for behavioral difficulties and major adverse events in the family. The longer the intrauterine alcohol exposure and the more severe the diagnosis related to prenatal alcohol exposure, the more often the children required special education, were temporarily or permanently taken into care, and had behavioral problems. There is a considerable need for prolonged multidisciplinary follow-up and support of all children whose mothers have not been able to reduce drinking in early pregnancy, whether or not cognitive disturbances are evident in early childhood.


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The Maternal Substance Abuse and Child Development Project is dedicated to the study and prevention of the effects of maternal substance abuse. Since 1978, the project has studied the development of children exposed to alcohol and other drugs prenatally and their caregivers and provided training for Prevention statewide. For additional information call (404) 712-9800.