



Family Support and Early Intervention Division
FAMILY INFANT TODDLER (FIT) PROGRAM



Early Childhood Evaluation Program – Technical Assistance & Consultation
Continuing Education series for NM FIT Providers

ECEP Office Hours

Fetal Alcohol Spectrum Disorder (FASD)

Presented by

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Introductions and Housekeeping

- Today's ECEP Team
- We want to see you!
- We want to hear you!
 - Please use the chat or un-mute to join the conversation during Q & A at the end of this presentation.
 - Goal is to share experiences and knowledge. Please be mindful that this platform is not HIPAA compliant. Please do not share any identifying information like names, DOB, etc.



Agenda

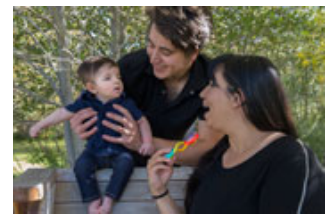


- Background-*What do we know?*
- How can we *support* families and children?
- What to do* if you have concerns?
- Case examples/Questions

Objectives



- Understand the prevalence of FASD
- Describe the physical, developmental and regulatory impacts of prenatal alcohol exposure
- Learn strategies to support young children with FASD and their families



Prenatal Alcohol Exposure (PAE)

- Maternal alcohol use during pregnancy:
 - 1 in 7 reported some use
 - 1 in 20 reported binge drinking
- Variations in pattern and timing of PAE
- Effects of prenatal exposure to alcohol with other substances is not well understood

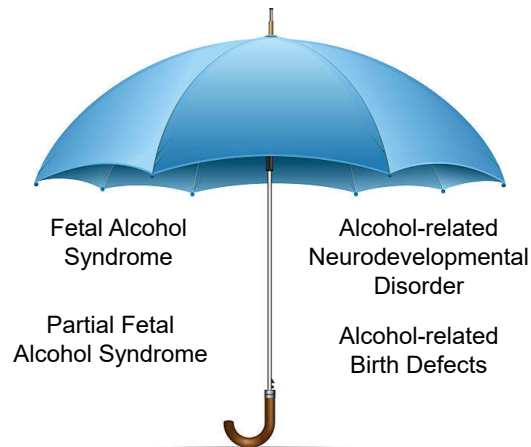


Addressing Stigma

- Maternal alcohol use during pregnancy is under-reported
- We advocate a supportive and empathetic approach for mothers who:
 - May not know that alcohol is potentially harmful to a developing fetus
 - May not have known they were pregnant
 - Wanted to stop using alcohol, but did not get the help they needed



FASD: An Umbrella Term



Prevalence of FASD

- Case ascertainment studies:
 - Up to 50 cases of FASD per 1000 children
 - This is **greater** than the prevalence of Autism and approaches the prevalence of AD/HD
- <1% of individuals that meet criteria for a FASD diagnosis will receive that diagnosis in their lifetime

Effects of Prenatal Exposures

1. Physical
2. Developmental
3. Regulation

Physical Effects: Facial Features

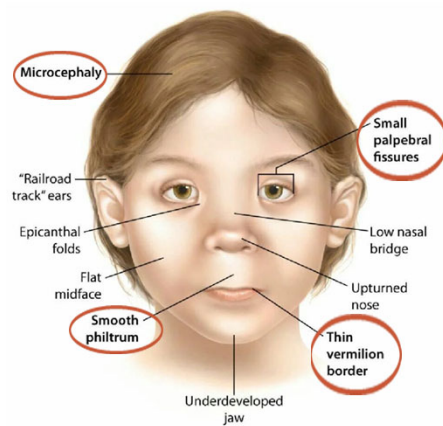


Figure 1.1 Image extract from (Wattendorf and Muenke, 2005), four children of different ethnicities with foetal alcohol syndrome presenting the characteristic facial features of narrow palpebral fissures, thin upper lip and smooth philtrum. (A) European descent. (B) Native American (C) African (D) Mixed ethnic backgrounds (Caucasian, African).

Physical Effects: Growth Deficiency



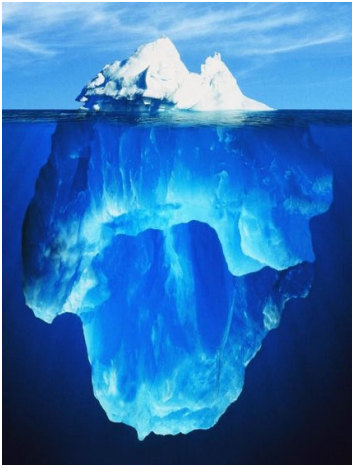
- Height and/or weight $\leq 10^{\text{th}}$ percentile
- Growth parameters at birth, or a pattern of decelerating growth not attributable to other nutritional or medical causes

Physical Effects: Brain Growth/Anomalies

- Microcephaly:
 - Head circumference $\leq 10^{\text{th}}$ percentile
- Structural brain anomalies
 - Example: absent or thin corpus callosum
- Seizures not attributable to other medical conditions



The Tip of the Iceberg



Fetal Alcohol Syndrome

Partial Fetal Alcohol Syndrome

Alcohol-related Neurodevelopmental Disorder

Alcohol-Related Birth Defects

Developmental Effects



Learning/Cognition

- Need more time to master skills
 - *“What is learned one day is gone the next.”*
- Difficulty generalizing skills
- Not connecting consequences to actions
- Difficulty acquiring pre-academic skills:
 - Colors, shapes, counting, letters



Social

- Intact:
 - Imitation
 - Social responding
 - Use of pointing, gestures, eye contact
- Difficulties:
 - Reading facial cues and tone of voice
 - Reciprocity (due to inhibition and attention difficulties)
 - Social approaches (overly friendly)



Language

- Expressive and receptive language delays
- Difficulty following directions



Motor



- Fine and gross motor delays and differences
- Tremor
- Muscle tone differences





Sensory Processing

- Hyper or Hypo-sensitivities to sensory input
- Excessive seeking of input
- Easily overstimulated by environment



Regulatory Effects



Behavior

- Delays in acquiring complex, multi-step adaptive skills:
 - Toileting
 - Dressing
 - Bathing
- Overactive and impulsive
- Difficulty coping with frustration
 - *“Zero to 60 in a nanosecond.”*



Sleep

- Delayed sleep onset
- Frequent night time awakenings
- Shorter overall sleep duration
- Higher rates of sleep disordered breathing



Eating

- Early challenges with suckle
- Delayed transition to solid foods
- Sensory over-reactions or seeking
- Difficulty recognizing of hunger signals



**Nutrition may not be a factor with growth.*

Supports for Children and Families



Addressing Guilt: Parent Perspectives



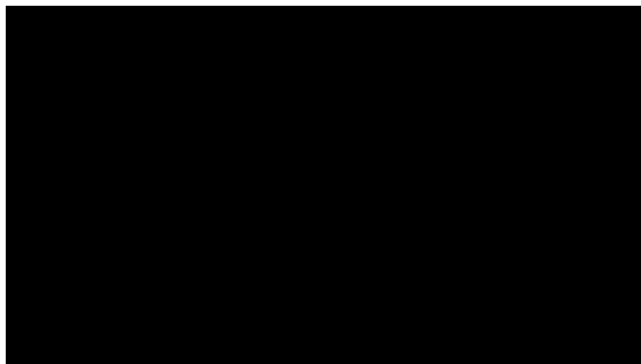
Addressing Guilt: Parent Perspectives



Addressing Guilt: Parent Perspectives



Addressing Guilt: Parent Perspectives



General Strategies

- Re-frame challenging behaviors
- Regulation strategies for everyone!



Breathing to Calm

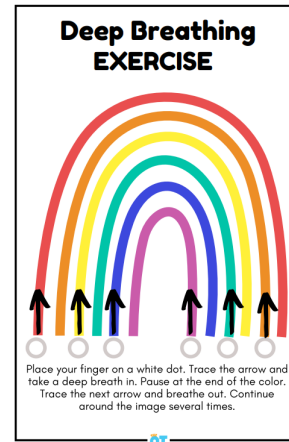
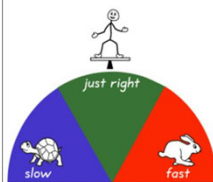


<https://www.youtube.com/watch?v=gLbK0o9Bk7Q>

Interventions/Strategies

- Ways to teach Regulation

Concepts from
the Alert
Program: Self-
Regulation
Made Easy



Interventions/Strategies

- Reduce sensory stimulation
 - “Cozy corner”



Interventions/Strategies

- Minimize change, maximize structure (try a visual schedule)
(*Mealtimes, self-care routines, bedtime, etc.*)
- Give simple, specific directions (1-step)
- “In a little bit” does not compute (try a visual timer)



Interventions/Strategies

- Allow for extra practice to gain skills
 - Have realistic expectations (e.g. slower progress)
- Need extra time to process
- Provide immediate feedback on behavior



Interventions/Strategies

PEOPLE WITH FASD HAVE IMPORTANT STRENGTHS



Kautz-Turnbull et al., in press

FASD CLINIC at CDD

- Questions about a child with possible PAE?
- Need support talking to parents about concerns for PAE?
- Want to refer a child for a FASD evaluation?
- FASD Clinic can help! We serve children aged birth to 21 years
 - **Social Worker:** Melissa Walker, LCSW (505) 272-5969
mecwalker@salud.unm.edu
 - **Psychologist:** Cassandra Cerros, PhD (505) 228-5937
caceros@salud.unm.edu

For more Information

UNM CDD Information Network



Library Services:

844-231-5003 or 505-272-0281

HSC-InfoNet@salud.unm.edu

<https://unmhealth.org/services/development-disabilities/programs/other-disability-resources/information-network/>



Q & A

Please share your experiences!



Resources



- FASD United
 - <https://fasdunited.org/>
- CDC
 - FASD's: <https://www.cdc.gov/ncbddd/fasd/index.html>
- 8 Magic Keys:
 - <https://www.youtube.com/watch?v=8YgluFJdFpY&t=12s>
- Alert Program: Self-Regulation Made Easy
 - <https://www.alertprogram.com/>

Resources



<https://healthy-kids.com.au/kids/primary-school/mindful-munching/>

References



- Prevalence and patterns of sensory processing behaviors in a large clinical sample of children with prenatal alcohol exposure, *Research in Developmental Disabilities*, Volume 100, May 2020.
- Hoyme HE, Kalberg WO, Elliott AJ, Blankenship J, Buckley D, Marais AS, Manning MA, Robinson LK, Adam MP, Abdul-Rahman O, Jewett T, Coles CD, Chambers C, Jones KL, Adnams CM, Shah PE, Riley EP, Charness ME, Warren KR, May PA. Updated Clinical Guidelines for Diagnosing Fetal Alcohol Spectrum Disorders. *Pediatrics*. 2016 Aug;138(2):e20154256. doi: 10.1542/peds.2015-4256. Epub 2016 Jul 27. PMID: 27464676; PMCID: PMC4960726.

References



- <https://ncsacw.acf.hhs.gov/files/five-points-family-intervention-infants-with-prenatal-substance-exposure-and-their-families.pdf>
- https://greatergood.berkeley.edu/article/item/how_four_deep_breaths_can_help_kids_calm_down
- YouTube Video (breathing to calm): Relaxed Breathing Training, Version B, Mark Connelly, July 23, 2015
<https://www.youtube.com/watch?v=gLbK0o9Bk7Q>
- YouTube Video (parent perspectives): FIRST 5 Santa Clara County
<https://www.youtube.com/watch?v=MM6t9IpDgl0&t=140s>

Complete our Survey!

<https://www.research.net/r/XQ2XJJH>

Join us in December:

Session 4: Topic Review: Talking to families about specific diagnostic concerns, case-based and referral questions answered

Wednesday 12/14/22 at 3:30 pm or Friday 12/16/22 at 8 am