Possibilities for Prevention of Fetal Alcohol Syndrome in Bhutan

Introduction: During the last decade there has been an increasing focus worldwide on Fetal Alcohol Syndrome (FAS). This is reflected in two articles published in the Lancet: The international charter on prevention of fetal alcohol spectrum disorder (FASD) in 2014, and a comprehensive literature review in 2017. This poster will focus on factors in Bhutan that can promote prevention of FAS in the country, with referral to these articles and to health statistics from Bhutan.

Aims and objectives: Create awareness about FAS and its life-long implications, and initiate discussion on diagnosing and prevention of FAS in Bhutan.

Methodology: Review of literature

Discussion: Worldwide prevalence of FAS is 15/10.000. Figures for Bhutan seem uncertain and most likely underestimated. A WHO report shows concern about alcohol related diseases in the country. Moreover, rates of alcohol use and binge drinking are increasing among young women in a number of countries. Risk factors include general alcohol consume in pregnancy, lack of family support, as well as mental illness and social factors. Total avoidance of alcohol is recommended whenever a pregnancy is planned. In Bhutan we find some important factors that can facilitate prevention of FAS. A high proportion of women are using safe family planning methods and the rate of adolescent births is relatively low. Bhutan has well-functioning public health services that reach most of the population.

Conclusion: Even if the prevalence of FAS is uncertain in Bhutan there are good reasons to focus on preventive measures. FAS is a life-long avoidable disorder.

Suggested key measures for prevention are:

1. Give public information about the importance of total avoidance of alcohol in pregnancy
2. Identify risk groups attending MCH-clinics, in particular alcohol abuse and untreated mental health disorders.
3. Access to reliable contraceptives in order to minimize number of unplanned pregnancies

Suggested framework is developing different teaching material for High Schools and MCH-clinics:

1. In High Schools focus on how to plan a healthy family in the future, responsibility for both the coming mother and the coming father.
2. In MCH-clinics focus on identifying risk groups and the importance of reliable contraceptives.