



Alcohol and pregnancy frequently asked questions

The National Health and Medical Research Council's *Australian Guidelines to Reduce Health Risks from Drinking Alcohol* (2009) recommend:

- For women who are pregnant or planning a pregnancy, not drinking is the safest option; and
- For women who are breastfeeding, not drinking is the safest option.

Q) How much can I drink while I'm pregnant, planning a pregnancy or breastfeeding?

Q) I have been drinking while pregnant and I'm concerned my child might be affected, what should I do?

- Every pregnancy is different, there's no certainty that a child will experience harm due to maternal alcohol consumption.
- The risk of harm to the baby from alcohol is hard to predict. The risk to the baby increases with increasing amount and frequency of alcohol consumption.
- Damage to the baby is more likely to occur with high amounts of alcohol and, of particular risk, is a pattern of drinking in which high amounts of alcohol are consumed on any one occasion
- Reducing or stopping drinking at any stage of pregnancy will be beneficial for the mother and baby.
- Alcohol can affect the development of the baby throughout pregnancy – there is no known safe time to drink alcohol during pregnancy.
- If you have been drinking during pregnancy and are concerned, seek support from your GP, midwife or other health care professional.
- As no level of consumption has been proven safe, a conservative, public health approach has therefore been taken in recommending that 'not drinking alcohol is the safest option' for pregnant women and women planning a pregnancy.

Q) Why did my GP/obstetrician/midwife not tell me about these Guidelines or tell me that some alcohol use is okay?

- Previous Guidelines recommended that low-risk drinking was low-risk. The current Guidelines are still relatively new and some health professionals are unaware that they have changed or that they exist.



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Q) I've heard drinking alcohol is good for my health, even when pregnant?

- Health experts do not encourage people to take up drinking to get health benefits. Recent scientific evidence suggests that any potential health benefits from consuming alcohol have probably been overestimated.

Q) What about drinking alcohol and breastfeeding?

- While breastfeeding, alcohol enters the breast milk and may stay in breast milk for some time after the alcohol was consumed. Alcohol can affect breast milk production and affect the baby's development and sleep patterns.

Q) What about my (male) partner's drinking leading up to conception?

- Alcohol can reduce a male's fertility but there is no evidence that paternal alcohol use causes the same level of harm as maternal alcohol consumption (during conception).
- However, men are advised to stick to the *Australian Guidelines to Reduce Health Risks from Drinking Alcohol* which recommends no more than two standard drinks on any day reduces the lifetime risk of harm from alcohol-related disease or injury.
- Males who cut down their drinking can help to support their partner cut down or stop alcohol consumption during pregnancy.

Q) What are some of the potential effects of maternal alcohol consumption?

- The effects on the unborn fetus, of drinking alcohol during pregnancy may include:
 - brain damage;
 - birth defects;
 - cell damage;
 - behavioural problems;
 - developmental delay;
 - low IQ; and
 - poor growth.

Q) Does it matter what type of alcohol I drink?

- It doesn't matter if it is beer, wine or spirits. No type of alcohol is safe.

Q) Is this a problem for particular people in the community?

- Harmful alcohol use is a problem for the broader community. We have a drinking culture that tolerates and accept harmful alcohol use.