## Clinical Psychiatry News.

Commentary

## Fetal alcohol syndrome: Context matters

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Recently, there was a lot of hoopla in the popular press caused by the report by Philip A. May, PhD, and his team showing that the rates of fetal alcohol spectrum disorder (FASD) ran between 1.1 to 5.0% in first graders in four U.S. communities (<u>JAMA. 2018;319[5]:474-82</u>). This publication and the press it received made my heart sing because the findings made national news – meaning the issue would be in the public's consciousness for a day or two. That is progress.



Dr. Carl C. Bell

Unfortunately, urban communities I have been serving for 50 years rarely get such press unless there is a stink. Based on the literature and my own studies, I am convinced that the problem is worse in communities of color with lower incomes. Dr. May's study population had an average yearly annual income of \$53,500 a year, while the community I serve has an annual average income of \$33,800 a year. My population is 96% black and non-Hispanic, and Dr. May's study population was only 12.6% black and non-Hispanic – leading me to suspect that his research was not conducted in predominantly African American neighborhoods, where research has documented a disproportionate per capita number of package liquor stores.

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As psychiatrists, we should know that context is important. For example, I was at the Northeast Conference on Fetal Alcohol Spectrum Disorders in 2017 in Colby, Maine, and heard Larry Burd, PhD, a longstanding expert in the area of FASD, describe the drinking habits of the Native American women who had children with FASD. He described them as being alcoholics. I was floored, because the African American population of women I studied who had children with FASD told me they did not know they were

pregnant, engaged in social drinking during this time, but stopped cold when they realized that they were pregnant. I only saw two of 500 women that I would consider alcoholics, and one went on a 3-day binge with her girlfriends when she learned that she was pregnant. Clearly, context matters.

I continue to maintain that increasing choline in prenatal vitamins is a way out of this mess the United States is in with its hidden epidemic of FASD.

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