

Fetal Alcohol Spectrum Disorders (FASD)

The CDC reports as many as 1 in 20 children in the US may have FASD.

Do you see behavioral concerns in your patients?

Are the usual medications and treatment modalities not working?

FASD MAY BE THE REASON.



FASD may affect neurocognitive, adaptive, and behavioral functioning. It is an under-diagnosed disorder with a range of symptoms that may present like ADHD, ID, LD, CD, ODD and/or other common behavioral disorders.

However, the usual strategies to manage those disorders are not effective with FASD.

See the reverse side of this card for common FASD indicators.

FASD indicators include:

- Suspected or documented prenatal alcohol exposure

▶ **Physical**

- Impaired growth/failure to thrive
 - Height and/or weight <10th percentile
 - Head circumference <10th percentile
- Facial abnormalities
 - Thin upper lip
 - Flattened philtrum
 - Small eyes

▶ **Memory and learning difficulties**

- Working memory issues
- Difficulty learning and remembering new information

▶ **Executive functioning difficulties**

- Problem solving skills
- Planning and organization
- Learning from mistakes
- Shifting

▶ **Self regulation difficulties**

- Temper tantrums, anger, rigidity
- Hyperactivity
- Impulsivity
- Emotional reactivity

▶ **Adaptive functioning deficits**

- Difficulties with comprehension and abstraction
- Difficulties understanding social cues/body language
- Excessive friendliness with strangers/social immaturity
- Struggles with daily living skills (telling time, managing money)
- Safety issues/need for close supervision and monitoring

For additional information on FASD, visit:

mha.ohio.gov

mha.ohio.gov/fasd

nofas.org

nofas.org/circleofhope

doublearc.org

cdc.gov/ncbddd/fasd

