

Fetal Alcohol Spectrum Disorder (FASD)

WHAT IS FASD?

Fetal Alcohol Spectrum Disorder (FASD) is now used as a diagnostic term, when prenatal alcohol exposure is considered to be a significant contributor to physical and neurobehavioural effects in children, youth and adults.

CANADIAN DIAGNOSTIC STANDARDS

In 2015, *Fetal alcohol spectrum disorder: a guideline for diagnosis across the lifespan*¹ was published, replacing the original Canadian guidelines for diagnosis (2005). This new guideline was developed as a result of emergent evidence, current practice and clinical experience in this field.

BENEFITS OF DIAGNOSIS

An accurate diagnosis can help to understand the challenges of individuals impacted by FASD:

- ✓ Guide appropriate post-diagnosis interventions and strategies for support
- ✓ Reduce the number of secondary disabilities or mitigate adverse experiences often seen in individuals impacted by FASD (i.e. mental health problems, trouble with the law, homelessness, addictions issues, etc.)²
- ✓ Link birth parents with supports and interventions to prevent further affected births
- ✓ Provide information regarding incidence and prevalence rates of FASD in Canada
- ✓ Support applications for disability tax credits, financial supports and other services for the individual and/or their caregivers
- ✓ Provide important information regarding supports for youth transitioning to adulthood, such as guardianship, trusteeship and legal representation agreements

DIAGNOSTIC PROCEDURE

FASD is a medical diagnosis. The guideline recommends a comprehensive, multidisciplinary approach be used to obtain an accurate diagnosis and a comprehensive assessment of the individual's functional abilities.

CORE CLINIC TEAM MEMBERS

Team membership varies and is dependent on the age of the individual being assessed. A pediatric team should include:

PHYSICIAN

- background training specific to FASD diagnosis

PSYCHOLOGIST

- education, expertise and scope of practice relevant to clinical testing

SPEECH-LANGUAGE PATHOLOGIST

OCCUPATIONAL THERAPIST

CLINIC COORDINATOR

Adult and pediatric teams may include additional stakeholders representing health, social services, justice, education, mental health and cultural representation.

RECOMMENDED SCREENING TOOLS

A reliable, accurate maternal alcohol history is the best screening tool. The Life History Screen⁴, the FASD Screen and Referral Form for Youth Probation Officers⁵ and the The Canadian Association of Paediatric Health Centres National FASD Screening Toolkit⁶ can also validate a referral for FASD diagnosis. All positive screens should prompt a referral for further assessments, keeping in mind that screening is not a diagnosis.

¹ Cook, JL, et al, Fetal alcohol spectrum disorder: a guideline for diagnosis across the lifespan. CMAJ, December 2015. www.cmaj.ca/content/early/2015/12/14/cmaj.141593

² Streissguth A & Kanter J (1997). *The Challenge of Fetal Alcohol Syndrome: Overcoming Secondary Disabilities*. Seattle, WA: University of Washington Press.

³ Cook, JL, et al. (2015)

⁴ Grant, TM et al, Screening in treatment for fetal alcohol spectrum disorders that could affect therapeutic progress. *International Journal of Alcohol and Drug Research*, 2014.

⁵ Conry, J & Asante, KO, Youth probation officers' guide to FASD screening and referral, 2010, The Asante Centre for Fetal Alcohol Syndrome: Maple Ridge, BC

⁶ www.caphc.org/fasd/fasd-national-screening-tool-kit

Manitoba FASD Centre

The Manitoba FASD Centre and Network is a multidisciplinary assessment, education, training and research service in the province of Manitoba.

The Manitoba FASD Network includes eight FASD Diagnostic Coordinators in five health regions who work in partnership with the Manitoba FASD Centre. Their role includes facilitating FASD referrals and assessments for children and youth living in their region and assisting with accessing community resources following an FASD diagnosis.

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