

PATIENT EDUCATION



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Alcohol and Women

Many women in the United States drink alcohol responsibly, but some drink in amounts that exceed a safe level. It is important to educate yourself about drinking in moderation. At-risk drinking can affect fertility, cause menstrual disorders, increase the risk of many types of cancer, and lead to injuries. It also can affect your judgement and lead to risky sexual behavior. Knowing when alcohol use is unsafe is the first step in getting help.

This pamphlet explains

- *at-risk drinking*
- *how alcohol can affect your health*
- *the risks of drinking alcohol during pregnancy*
- *how to tell if you have a drinking problem*
- *how to get help*

At-Risk Drinking

For women, moderate drinking means drinking one drink a day. At-risk drinking means drinking more than seven drinks a week or three drinks on a single day. At-risk drinking also includes binge drinking. For women, binge drinking is having more than three drinks per occasion. Binge drinking is a major problem among women in the United States. About one in eight women 18 years and older report binge drinking in the past 30 days. For girls younger than age 18, one in five report binge drinking.

For some women, drinking any amount of alcohol is at-risk drinking. These include women who are

- unable to keep their drinking at a moderate level
- younger than 21 years
- pregnant or planning to become pregnant
- about to drive or perform a task that may result in injury
- taking prescription or over-the-counter medications that interact with alcohol

What Is a Drink?

One standard drink is equal to



*Depending on the type of alcohol and the recipe, one mixed drink can contain one to three or more standard drinks.

How Alcohol Can Affect Your Health

Women and men react differently to alcohol. A chemical in the body that breaks down alcohol is less active in women than in men. This means that more of the alcohol that women drink enters their bloodstreams. Women typically weigh less than men and have less body water, so the alcohol a woman drinks is not diluted as quickly as the alcohol a man drinks. A woman will become intoxicated more quickly and have a higher blood alcohol level than a man who drinks the same amount. Heavy alcohol use puts women at risk of many health problems (see box “Health Risks of At-Risk Drinking for Women”).

Regular at-risk drinking can lead to alcohol dependence (also called alcoholism). Women who are alcohol dependent keep using alcohol even when it causes problems with their health, safety, or relationships. Alcohol dependence is a disease with the following symptoms:

- Craving—A strong urge to drink
- Loss of control—After starting to drink, not being able to stop
- Dependence—Alcohol withdrawal symptoms, such as nausea, sweating, shakiness, and anxiety after stopping drinking
- Tolerance—The need to drink greater amounts of alcohol to feel the same effect

Risks of Drinking Alcohol During Pregnancy

Drinking alcohol during pregnancy is a leading cause of **birth defects**. There is no known safe level or timing of alcohol use during pregnancy. Alcohol can harm a **fetus** throughout pregnancy. This includes the first few weeks before a woman may know she is pregnant and during the last weeks of pregnancy when the fetal brain is maturing.

Health Risks of At-Risk Drinking for Women

Increased physical risks include the following:

- Injuries—Alcohol is a factor in over one half of all burn injuries and over one third of car crashes. It also plays a role in a large number of falls and drowning accidents.
- **Interpersonal violence**—At-risk drinking increases your risk of becoming a victim of interpersonal violence, which includes emotional and physical abuse and sexual assault.
- **Sexually transmitted infections** and unintended pregnancy—Excessive alcohol intake, especially binge drinking, can affect your judgment and decisions. You may be more likely to have unprotected sex. This increases your risk of sexually transmitted infections and unintended pregnancy.
- Birth defects—Drinking any amount of alcohol during pregnancy increases the risk of physical, intellectual, and behavioral problems in children.
- Menstrual disorders and altered fertility
- Nutritional problems—At-risk drinking may reduce the amount of healthy food you eat. It may impair your body’s ability to use vitamins and minerals.
- Liver disease, including **cirrhosis**
- Heart disease
- Seizures
- Certain types of cancer, such as cancer of the breast, mouth, throat, esophagus, liver, and rectum

Other risks include the following:

- Problems with personal and work relationships
- Loss of income
- Child neglect or abuse and loss of child custody
- Drinking and driving
- Depression and suicide

Fetal alcohol spectrum disorders (FASDs) are health problems that can occur in a person whose mother drank alcohol during pregnancy. The most severe is **fetal alcohol syndrome (FAS)**. FAS causes

- problems with brain development
- lower-than-average height and weight
- smaller-than-normal head size
- abnormal facial features

For every child born with FAS, many more are born with other FASDs. These children may have problems with coordination, behavior, attention, learning, and understanding consequences without any of the physical signs of FAS.

Even moderate alcohol use during pregnancy can cause lifelong problems with a child's learning and behavior. Any amount is risky for women who are pregnant or trying to become pregnant. All types of alcohol are harmful, including beer and wine.

Birth defects related to alcohol are 100% preventable by not drinking during pregnancy. Prevention involves these three steps:

1. If you do not want to get pregnant and you drink alcohol, use effective birth control.
2. If you are planning to become pregnant, do not drink.
3. If you are pregnant and have been drinking, stop. This will reduce the risk of harm to your baby.

You may be concerned that you drank a small amount of alcohol before knowing you were pregnant. Although it is true that no amount of alcohol use is safe during pregnancy, serious harm from this kind of use is unlikely. The important thing is to not drink any alcohol for the rest of the pregnancy.

If you are pregnant and find that you cannot stop drinking, talk honestly to your *obstetrician-gynecologist (ob-gyn)* or other members of your health care team. They can refer you to programs that offer specialized treatment. You also can contact the resources listed later in this pamphlet.

How to Tell if You Have a Drinking Problem

It may come as a surprise to learn that your drinking exceeds a safe level. You may have family members or friends who drink similar amounts of alcohol and think that this kind of drinking is "normal." But you do not have to be dependent on alcohol to have a drinking problem. Recognizing that your drinking is risky is the first step in getting help. Use the questions in the box "Test Yourself" to find out whether you have a drinking problem.

How to Get Help

If you want to reduce your drinking or stop drinking, help is available. Your ob-gyn or health care professional can refer you to resources near you. You also might find it helpful to visit "Rethinking Drinking," a National Institute on Alcohol Abuse and Alcoholism web site, at www.rethinkingdrinking.niaaa.nih.gov. This site also includes contact information for self-help groups you can join.

Willpower alone cannot control alcohol dependence. If you are dependent on alcohol, you need specialized, professional care. The following treatment options are available:

- Support groups—Support groups can help prevent relapse. They may be led by professionals or other people who have struggled with alcohol dependence. One such group is Alcoholics Anonymous (AA).

Test Yourself

Do you have a drinking problem? To find out, answer these questions:

1. On average, how many standard-sized drinks containing alcohol do you have in a week?

If your answer is more than 7 drinks per week, that is at-risk alcohol use.

Note: If you are pregnant, any amount of alcohol use is at-risk use.

2. When you drink, what is the maximum number of standard-sized drinks you have at one time?

If your answer is 3 drinks or more, that is at-risk alcohol use.

Note: If you are pregnant, any amount of alcohol use is at-risk use.

If you do drink alcohol, answer the following questions:

T How many drinks does it take to make you feel high (Tolerance)?

A Have people Annoyed you by criticizing your drinking?

C Have you felt you ought to Cut down on your drinking?

E Have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover (Eye-opener)?

Scoring:

- If your answer to the tolerance question (**T**) is more than two drinks, give yourself a score of 2. If your answer is two drinks or less, give yourself a score of 0.
- Score 1 for each yes answer to the other questions (**A**, **C**, and **E**).

A total score of 2 or more may mean that you have a drinking problem. Talk to your ob-gyn or other member of your health care team about your drinking habits. He or she can give you more information and refer you for counseling or treatment.

Modified from Sokol RJ, Martier SS, Ager JW. The T-ACE Questions: practical prenatal detection of risk-drinking. *Am J Obstet Gynecol* 1989;160:865.

- Counseling—Therapy can help you and your friends and family cope with the stresses and the effects of alcohol dependence.
- Outpatient treatment—In outpatient treatment, patients go home at the end of each day of treatment. The Substance Abuse and Mental Health Services Administration keeps a list of programs. To find one near you, use their "locator" tool at www.findtreatment.samhsa.gov.
- Medication—Prescription medication can help reduce craving or prevent relapse.

- Residential care—In residential care, patients live at the treatment facility. These programs offer intense treatment where recovery is the main focus of the patient’s daily activities.

Resources

If you are seeking help with an alcohol problem, your state or local health department may have a list of resources you can contact. The following national organizations also have information about at-risk drinking, alcohol dependence, and treating alcohol problems:

Alcoholics Anonymous

PO Box 459
Grand Central Station
New York, NY 10163
(212) 870-3400
www.aa.org

This international nonprofit helps alcoholics stop drinking.

National Institute on Alcohol Abuse and Alcoholism

5635 Fishers Lane, MSC 9304
Bethesda, MD 20892-9304
(301) 443-3860
E-mail: niaaweb-r@exchange.nih.gov
www.niaaa.nih.gov

This government agency provides information about the health effects of alcohol as well as support and treatment.

National Council on Alcoholism and Drug Dependence, Inc.

217 Broadway, Suite 712
New York, NY 10007
(212) 269-7797
Fax: (212) 269-7510
E-mail: national@ncadd.org
www.ncadd.org

For information and referral: (800) NCA-CALL
This advocacy group provides programs on prevention, education, intervention, and treatment through state and local affiliates.

National Organization on Fetal Alcohol Syndrome

1200 Eton Court, NW Third Floor
Washington, DC 20007
(800) 666-6327 or (202) 785-4585
Fax: (202) 466-6456
E-mail: info@nofas.org
www.nofas.org

This organization offers education and information about fetal alcohol spectrum disorders and provides a resource directory.

Substance Abuse and Mental Health Services Administration

SAMHSA’s Health Information Network
1 Choke Cherry Road
Rockville, MD 20857
(877) 726-4727
TTY: (800) 487-4889
Fax: (240) 221-4292
www.samhsa.gov

This government agency helps locate mental health and substance abuse programs and health care professionals.

Finally...

Many women drink responsibly, but some women do not. Recognizing when your drinking exceeds a safe level is the first step to addressing the problem. Many resources are available that can help.

Glossary

Birth Defects: Physical problems that are present at birth.

Cirrhosis: A disease caused by loss of liver cells, which are replaced by scar tissue that impairs liver function.

Fetal Alcohol Spectrum Disorders (FASDs): A group of physical, mental, behavioral, and learning disabilities that can occur in a person whose mother drank alcohol during pregnancy.

Fetal Alcohol Syndrome (FAS): The most severe disorder resulting from alcohol use during pregnancy. It can cause abnormalities in brain development, physical growth, and facial features.

Fetus: The developing organism in the uterus from the ninth week of pregnancy until the end of pregnancy.

Interpersonal Violence: The use of physical, sexual, or emotional threats or actions against another person.

Obstetrician–Gynecologist (Ob-Gyn): A physician with special skills, training, and education in women’s health.

Sexually Transmitted Infections: Infections that are spread by sexual contact, including chlamydia, gonorrhea, human papillomavirus infection, herpes, syphilis, and infection with human immunodeficiency virus (HIV, the cause of acquired immunodeficiency syndrome [AIDS]).

This information was designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. Please check for updates at www.acog.org to ensure accuracy.

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