

PATIENT EDUCATION

Weeding Out Potential Birth Defects

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Patients Are Unknowingly Exposing Their Children

An important study published last year revealed paternal alcohol consumption increases the likelihood of birth defects by 35 percent. With plenty of studies dating back to the 1960s, most expectant mothers know to stop drinking once they become pregnant or are planning to; but the majority of your patients (if not all) are still unaware that future fathers should curb their alcohol consumption long before conception.¹

There is another societal trend research is just beginning to reveal may be even more harmful to newborns: marijuana use. A study last June found: "Rates of prenatal cannabis use are increasing alongside perceptions that cannabis is a harmless therapeutic for pregnancy-related ailments, while rates of prenatal use of alcohol and tobacco are decreasing."

Sadly, without enough studies to demonstrate otherwise, women are using marijuana to curb morning sickness and other related ailments, unaware of the potential impact on their unborn child.

A systematic review and meta-analysis of 16 studies was published at the beginning of this year. The authors found that "maternal marijuana exposure during pregnancy was associated with increased risk of preterm deliveries and neonatal intensive care unit admission and decreased mean birth weight, 1-minute Apgar score, and head circumference of babies."³

According to the National Institutes of Health (NIH), "Prenatal marijuana exposure is associated with neurocognitive vulnerabilities in children and adolescents, including decreased executive function (problem solving, sustained attention and short-term memory); behavioral problems (impulsivity and hyperactivity); lower academic achievement; and higher levels of self-reported depressive symptoms." Likewise, paternal cannabis use may also play a role, as is suggested by another study. But again, the evidence is sparce. ⁵

Eventually, the public and the media will have a better understanding of the consequences of marijuana use during and prior to pregnancy, but only after years – perhaps even decades – of additional studies. Until then, *you* may be the only person who can help expectant parents understand the damage alcohol and marijuana can do to their babies.

While the conversations can be uncomfortable, they are well-worth the time given the potential outcomes. After all, if not you, their doctor of chiropractic, then who?

References

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