Brief Intervention Curbs Prenatal Alcohol Use

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TORONTO — A single-session intervention can reduce prenatal alcohol use among at-risk pregnant women, especially those with higher reported alcohol consumption at baseline, Dr. Grace Chang reported at the annual meeting of the American Psychiatric Association.

The predefined risk criteria for study enrollment included a total score of two or more on the four-item T-ACE alcohol screening instrument and any alcohol use in the 3 months before study enrollment (while pregnant), consumption of any alcohol per day in the 6 months before study enrollment, or drinking during a previous pregnancy. The T-ACE instrument asks four questions: How many drinks does it take to make you feel high (Tolerance)? Have you ever felt you ought to cut down on your drinking (Cut down)? Have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover (Eye-opener)? The need for more than one drink to achieve this second effect (Eye-opener)?

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