

What Are the Characteristics of FAS and FASD?

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Babies diagnosed with Fetal Alcohol Syndrome (FAS) may have some but not necessarily all of the following physiological characteristics:

- Small birth weight
- Small head circumference
- Small, widely spaced eyes
- Flat midface
- Short, upturned nose
- Smooth, wide philtrum
- Thin upper lip

Note: *Facial characteristics may not be as apparent immediately after birth or during adolescence or adulthood as they are between the ages of two and ten. Facial characteristics may not be present at all if the mother did not drink alcohol during the brief period that the midface was forming - around the 20th day of pregnancy.*

If the facial characteristics are not visible, the child may not get a diagnosis of FAS, but may have the same neurological symptoms and behavior challenges as children with full FAS. Only about 20% of affected children receive a diagnosis of FAS. The other 80% have partial FAS or Fetal Alcohol Effects (FAE), also called Alcohol Related Neurological Disorder (ARND). Together FAS and FAE make up the broad category called Fetal Alcohol Spectrum Disorders (FASD).

Most infants with FASD are irritable, have trouble eating and sleeping, are sensitive to sensory stimulation, and have a strong startle reflex. They may hyperextend their heads or limbs with hypertonia (too much muscle tone) or hypotonia (too little muscle tone) or both. Some infants may have heart defects or suffer anomalies of the ears, eyes, liver, or joints.

Most children with FASD have developmental delays and some have lower than normal intelligence. Only 15% of children with FASD have an IQ under 70. Most children with FASD have IQ in the normal or above normal range.

The most serious characteristics of FASD are the invisible symptoms of neurological damage from prenatal exposure to alcohol. These symptoms persist into adulthood and include the following:

- Attention deficits
- Memory deficits
- Hyperactivity
- Difficulty with abstract concepts
- Inability to manage money
- Poor problem solving skills
- Difficulty learning from consequences
- Immature social behavior
- Inappropriately friendly to strangers
- Lack of control over emotions
- Poor impulse control
- Poor judgment

These symptoms are not just "behavior problems" but are "soft signs" - symptoms of permanent, unchanging damage to the brain (static encephalopathy) and are not within the child's control. Although psychological factors such as abuse and neglect can add to the intensity of the problems, the behaviors should be viewed first and foremost as a result of brain damage from alcohol.

Adults with FASD have difficulty maintaining successful independence. They have trouble staying in school, keeping jobs, or sustaining healthy relationships. They require long-term support and some degree of supervision in order to succeed.

Without appropriate support services, these individuals have a high risk of developing secondary disabilities such as mental health issues, getting into trouble with the law, abusing alcohol and other drugs, and unwanted pregnancies.

Children and adults with FASD are also quite vulnerable to physical, sexual, and emotional abuse.