

ASSESSMENT OF ALCOHOL CONSUMPTION AMONG PREGNANT WOMEN IN ANTENATAL CLINIC (ANC) AT JIGMI DORJI WANGCHUK NATIONAL REFERRAL HOSPITAL (JDWNRH), THIMPHU, BHUTAN

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ABSTRACT: Drinking alcohol by men, women, and children is widely accepted and practiced in Bhutanese society. Homemade alcohol is used by post-natal mothers with a belief it increases flow of breast milk for the baby and promotes comfort and healing for the mother. This cross-sectional descriptive study was conducted in June 2011 with the objective to assess alcohol consumption among pregnant women attending antenatal clinic at Jigme Dorji Wangchuk National Referral Hospital (JDWNRH) in Thimphu, Bhutan. Structured questionnaires and alcohol use disorder identification test (AUDIT) questions were used for face to face interview with 312 pregnant women. The study found that lifetime alcohol consumption was 203 (65.1%), regular drinking during the last 12 months, 165 (52.9%), last three months, 79 (25.3%), last one month 74, (23.7%) and last week 34 (10.9%). Out of nine types of alcohol listed for this study, pregnant women mostly consumed homemade rice wine called “*changkey*” and distilled alcohol drink “*ara*”. As for commercial products women mostly consume were beer and wine. The main reason for alcohol consumption was tradition, culture and customs and women had positive feelings towards alcohol, especially homemade alcohol. They also drank to promote sleep and comfort.

Keywords: Pregnant women, alcohol consumption, antenatal clinic, Jigmi Dorji Wangchuk, National Referral Hospital, Bhutan

INTRODUCTION

Bhutanese view drinking as social act where drinking and occasionally getting drunk is accepted as a part of everyday's life [1]. In about 50% of household food grains are used to brew alcohol [2]. Homemade alcohol is used by post-natal mothers with a belief it increases the flow of breast milk for the baby and promotes comfort and healing for the mother. No studies on alcohol consumption by pregnant women have been conducted in the past and ANC Clinic does not have any baseline information on this subject. Moreover, the ANC Clinic lacks of alcohol screening program during routine antenatal care checkups for pregnant women.

Information Communication and Education for Health (IECH), the 2001 study on health behavior in 12 of the 20 districts with 1,035 samples, revealed that 40% of the respondents drank alcohol and that the majority of the population drank home brewed alcohol (90%). It was further revealed that 42% female and 50% male respondents drank alcohol [3]. Studies have found out that there is a correlation between alcohol use during previous years and use during current pregnancy [4]. With high

proportion of Bhutanese women drinking, chances are very high that women continue drinking during pregnancy too. No study has been conducted in the past on alcohol consumption in pregnant women at the ANC Clinic in JDWNRH in particular.

The study was conducted to assess alcohol consumption among pregnant women attending the antenatal Clinic at Jigme Dorji Wangchuk National Referral Hospital (JDWNRH) in Thimphu, Bhutan.

METHODOLOGY

A cross-sectional study was conducted on June 2011. Structured questionnaires and alcohol use disorder identification test (AUDIT) questions were used for face to face interview with 312 pregnant women attending the antenatal Clinic at Jigme Dorji Wangchuk National Referral Hospital (JDWNRH) in Thimphu, Bhutan. Data was analyzed by using SPSS version 17.0.

RESULTS

Lifetime alcohol consumption was 203 (65.1%), regular drinking during the last 12 months, 165 (52.9%), last three months, 79 (25.3%) last one month, 74 (23.7%) and last week 34 (10.9%) (Figure 1). Alcohol consumption by the respondents in this study, prior to current pregnancy was 52.9%. According to the Centre for Disease Control and

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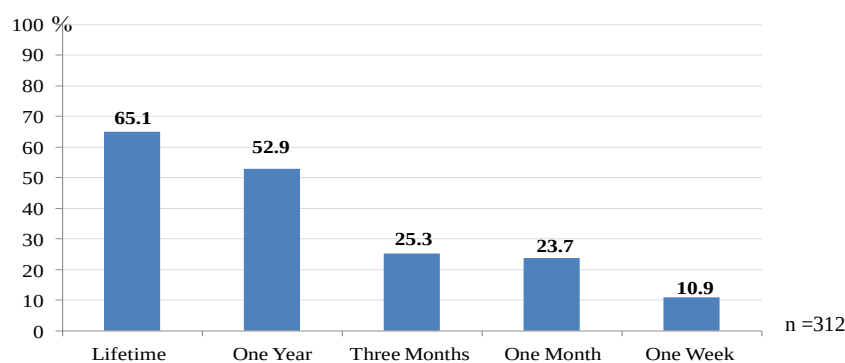


Figure 1
Number of women who consumed alcohol

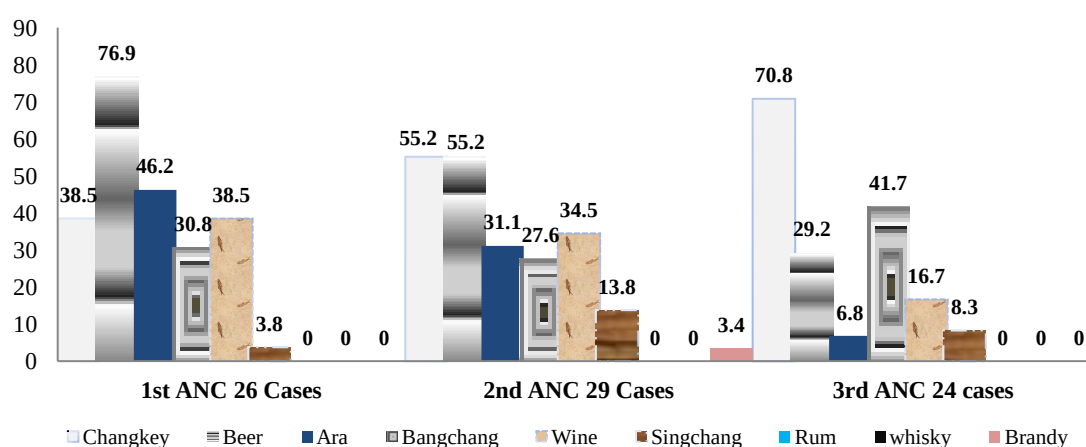


Figure 2 Types of alcohol consumed in Three months %

Prevention, alcohol use levels prior to pregnancy are a strong predictor of alcohol use during pregnancy [5]. It is not safe for pregnant woman to consume any amount of alcohol as there is no safe level of alcohol during pregnancy for the fetus [6, 7]. The type of alcohol mostly consumed by pregnant women was homemade rice wine called “changkey” followed by beer and other commercial products (Figure 2). The main reason for alcohol consumption was tradition, culture, and customs and women have positive feelings towards alcohol, especially homemade alcohol. Women usually drank 1-2 standard drinks for 1 - 5 days a month, most women consumed 1-2 drinks, 1-2 times/week. The 1st ANC visit of the pregnant women revealed more beer compared to the 2nd and 3rd visit while Changkey consumption was high at the 3rd visit compared to 1st and 2nd visit.

DISCUSSION

Relating to information about the pathological effects of alcohol on the fetus, 92.0% had heard about, whether by television (44%) and/or health staff (49.4%), radio (44.2%), friends, relatives, newspaper, books, and magazines. Nevertheless, 38.9% of women still continued consuming alcohol

during pregnancy.

About 79.5% of women agreed that they should pay attention to alcoholic drinks and for 92.3% women “it is harmful to the fetus if woman drink more than five alcoholic drinks on a single occasion”. But only 4.2% of women answered correctly that a pregnant woman should **not consume** any amount of alcohol during pregnancy. As pointed out by some pregnant women one or two drinks were alright during pregnancy and women had in general no idea that alcohol consumption should be avoided during this period.

Results also showed that half of the women were pregnant for the first time (53.8%). If ANC staffs can educate this group of women during their first pregnancy thoroughly these women would probably abstain from drinking during their subsequent pregnancies, as the habit of consuming alcohol during pregnancy has shown a positive correlation with alcohol consumption during previous pregnancy (p value < 0.001.) Alcohol abuse during pregnancy is the leading preventable cause of mental retardation in offspring in the United States. As only 22.1% of women had no formal educational background, the majority of them was able to read and write and could understand the

ANC Clinics leaflets and pamphlets prevention measures about fetus exposure to maternal alcohol consumption distributed on the occasion of their first ANC visit. Moreover 161 respondents were housewives (51.6%) followed by 80 civil servants (25.6%) and 41 private employees (13.1%). The majority of women preferred information by television (80.4%) or radio (53.8%). About 51.0% found that messages can be disseminated by health workers. Study by Testa and Reifman [8] found out that risk perception play very important role in drinking behavior among pregnant women. This strategy can also be adopted by the ANC clinic staffs.

CONCLUSION

As alcohol consumption throughout pregnancy may lead to a significant risk of brain injury to the developing fetus, it is recommended that the ANC clinic, JDWNRH hospital incorporates alcohol screening tools into regular ANC care schedule and screens all pregnant woman at their first contact. All pregnant women should be encouraged to visit the clinic as early as possible and women should be advised to abstain from drinking during the entire pregnancy period as well as during lactation. Further studies are recommended in other hospitals of the country where homemade alcohol use is abundant.

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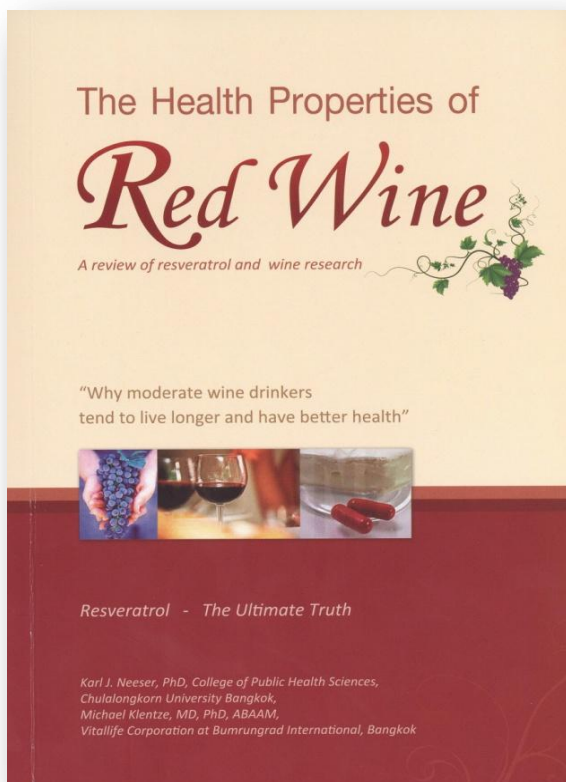
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