

# **New River Valley Screening and Referral Resources for Prenatal Substance Use Disorder**



**A Toolbox for Community Health Care  
and Human Service Providers**

# Table of Contents

<i>Dear Colleagues</i> .....	3
<b>1.Behavioral Health Risks Screening tool</b> .....	<b>8</b>
<b>2.Audit-C Questionnaire</b> .....	<b>10</b>
<b>3.TWEAK Screening Tool</b> .....	<b>11</b>
<b>4.CRAFFT Screening Tool</b> .....	<b>12</b>
<b>New River Valley Prenatal Providers</b> .....	<b>13</b>
<b>New River Valley Medication Assisted Treatment Providers</b> .....	<b>14</b>
<b>Recovery, Counseling and Support Services and Programs</b> .....	<b>15</b>
<b>New River Valley Departments of Social Services</b> .....	<b>16</b>
<b>Information for Mom- Using substances during pregnancy</b> .....	<b>17</b>
<b>Effects of Particular Substances</b> .....	<b>18</b>
<b>Tobacco</b> .....	<b>18</b>
<b>Alcohol</b> .....	<b>18</b>
<b>Marijuana</b> .....	<b>18</b>
<b>Cocaine and Methamphetamine</b> .....	<b>18</b>
<b>Heroin and Opiates</b> .....	<b>18</b>
<b>NAS as Indicator of Prenatal Substance Abuse</b> .....	<b>20</b>
<b>Increased Hospitalization Rates and Cost</b> .....	<b>21</b>
<b>Rate of substance</b> .....	<b>22</b>

This toolbox was developed in collaboration with key community stakeholders and representatives from:

***Jessica Fenton, RNC-LRN; Kimberly Simcox, MD  
Carilion New River Valley Medical Center***

***Molly O'Dell, MD, MFA; Brenda Burruss, RN; Katherine Stinnett, RN  
New River Health District***

***Angie Nichols, CHIP/PAT Coordinator  
New River Valley Community Action***

***Rosemary Sullivan, LCSW; Stephanie Whited, LCSW; Cora Taylor, QMHP-C  
New River Valley Community Services***

***Cathy, Callahan, MD, MPH  
Via College of Osteopathic Medicine***

***Laura Nelson, MPH; Kim Collins, LCSW; Mary Beth Dunkenberger, MBA  
Virginia Tech Institute for Policy and Governance***

The goal of this substance use disorder screening and referral toolbox is to provide substance use disorder professionals, physicians, obstetricians/gynecologists, and other providers validated screening tools to capture substance use during pregnancy, and to provide referral resources for women struggling with a substance use disorder. The practice of universal screening increases the likelihood of identifying substance users and allows for the earliest possible intervention or referral to specialized treatment. The following Screening, Brief Intervention, and Referral to Treatment (SBIRT) screening tools can provide community resources to help in substance use recovery. SBIRT is an evidence-based practice used to identify, reduce, and prevent use, abuse, and dependence of alcohol and illicit drugs.



“Routinely, women are less likely than men to be identified as having substance abuse problems yet, they are more likely to exhibit significant health problems after consuming fewer substances in a shorter period of time, especially during pregnancy.”

Buchsbaum DG, Buchanan RG, Lawton MJ, Elswick RK Jr, Schnoll SH. A program of screening and prompting improves short-term physician counseling of dependent and nondependent harmful drinkers. Archives of Internal Medicine. 1993;153(13):1573–1577

**Dear Colleagues,**

**Southwest Virginia, including the New River Valley, has experienced a significant increase in substance exposed births, prenatal substance use disorder and related incidence of Neonatal Abstinence Syndrome. Several workgroups have formed locally and at the state level to examine the causes of this increase and to recommend measures to better coordinate prenatal and postnatal treatment for women struggling with substance use disorder, to reduce the incidence of prenatal substance use, and related maternal and child health risks. Please see the summary data that highlights this public health concern at the end of this document.**

**Outputs of this efforts include this provider resource guide, and a care notebook for pregnant women. These resources are available at the New River Valley Community Services – Services for Moms Using Substances website - <http://www.nrvcs.org/moms/>. Further efforts are focused on increasing the continuum of care for women of child bearing age challenged with substance use disorder, including medication assisted treatment (MAT) while pregnant, regionally accessible residential care, and increased screening practices. If you are interested in being involved in these ongoing regional efforts please contact Dr. Molly O'Dell at the New River Health District) or Rosemary Sullivan at New River Valley Community Services.**

**Sincerely,**

Molly O'Dell, M.D.

Director, New River Health District

**(540) 585-3300**

**[Molly.ODell@vdh.virginia.gov](mailto:Molly.ODell@vdh.virginia.gov)**

*Rosemary Sullivan*

**Director, New River Valley Community Services**

**(540) 961-8300**

**[RSullivan@nrvcs.state.va.us](mailto:RSullivan@nrvcs.state.va.us)**

## Acknowledgements

The New River Valley Innovation Community would like to thank the CAPE collaborative partnership, the Substance Abuse and Mental Health Services Administration (SAMHSA), the United States Department of Agriculture National Institute of Food and Agriculture (USDA, NIFA), the Regional Rural Development Centers (RRDCs), and Virginia Tech for their support throughout this project. We acknowledge the efforts of the following community partnerships and grant funded initiatives that have demonstrated a regional commitment to improving community health and provide a strong foundation for the CAPE 1 and 2 initiatives, as well as other efforts to recognize and address regional health challenges.

- New River Valley Livability Initiative Health Dimension (NRV Regional Commission and Robert Wood Johnson Foundation (RWJF) Roadmaps to Healthy Community Grants)
- RWJF Community Coalition Leadership Program

We express our thanks and gratitude to our community partners which includes many champions for improving community health.

- New River Valley Partners for Access to Healthcare (PATH)
- Kevin Byrd, New River Valley Regional Commission
- Cathy Callahan, Via College of Osteopathic Medicine
- Vicky Collins, Radford Department of Social Services
- Molly O'Dell, New River Health District;
- Rosemary Sullivan, New River Valley Community Services

Finally, we acknowledge several state and regional initiatives that have further supported and shared in our work.

- Virginia Handle with C.A.R.E. Initiative Coordinating Access, Responding Effectively to Maternal Substance Use (Virginia Department of Behavioral Health & Developmental Services National Center for Substance Use and Child Welfare)
- Behavioral Health Integrated Centralized Intake (New River Community Action, Virginia Commonwealth University)  
Smart Beginnings of the NRV (VTIPG, Virginia Early Childhood Foundation)

# CAPE | Community Assessment and Education to Promote Behavioral Health Planning and Evaluation



United States  
Department of  
Agriculture

National Institute  
of Food and  
Agriculture



Edward Via College of  
Osteopathic Medicine

VIRGINIA CAMPUS



If you would like your community health service and contact information added or changed in the NRV Screening and Referral Toolbox please contact Laura Nelson at [lnel1713@vt.edu](mailto:lnel1713@vt.edu).

## High Risk Screening for Women of Childbearing Age

### Addressing Substance Use, Mental Health, Perinatal Depression, Tobacco Use & Intimate Partner Violence

Screening tools are available to assess for mental health, perinatal depression, tobacco use, intimate partner violence and substance use during pregnancy. Screening for these high risk behaviors is considered “Best Practice” (ACOG, SAMHSA) and can take as little as 10 minutes. These links will provide further information about DMAS reimbursement for certain screening tools:

[http://www.communitysolutionsva.org/files/9-16-13\\_CSBS\\_DVPs\\_HighRiskScreening\\_Resource\\_handout.pdf](http://www.communitysolutionsva.org/files/9-16-13_CSBS_DVPs_HighRiskScreening_Resource_handout.pdf)

<http://www.dbhds.virginia.gov/library/mental%20health%20services/scrn-pw-vahighrisktool-providerbackground.pdf>

1. The Virginia Behavioral Health Screening Tool for Women of Child Bearing Age is one simple tool that combines standardized screening tools for substance use, perinatal depression and intimate partner violence including and is used by the New River Health District:
  - 5Ps (screens for substance use including tobacco)
  - Edinburgh 3 (screens for perinatal depression)
  - A comprehensive question regarding experience with intimate partner violence.

The Virginia Behavioral Health Screening tool **for providers** was adapted by the Virginia Department of Behavioral Health and Developmental Services (DBHDS), the Virginia Department of Medical Assistance (DMAS) and the Virginia Department of Health (VDH) from a tool created by the Institute of Health and Recovery in Massachusetts and is **approved for reimbursement by DMAS for substance use screening and brief intervention services** (only the provider tool is reimbursable).

This tool is currently used as a risk screen for all maternity and Family Planning patients seen at health departments in the New River Health District.

Additional VA Department of Behavioral Health and Developmental Services:

<http://www.dbhds.virginia.gov/individuals-and-families/substance-abuse/substance-abuse-screening/pregnant-women-childbearing-age>

Additional SBIRT screening tools, not reimbursable by DMAS

- 2. AUDIT-C: Dawson DA, Grant BF, Stinson FS, Zhou Y. Effectiveness of the derived alcohol use disorders identification test (AUDIT-C) in screening for alcohol use disorders and risk drinking in the US general population. Alcohol Clin Exp Res 2005;29:844–854.
- 3. TWEAK: Chang G, Wilkins-Haug L, Berman S, Goetz MA. The TWEAK: application in a prenatal setting. J Stud Alcohol. 1999;60:306-309.
- 4. CRAFFT: Knight JR, Sherritt L, Shrier LA, Harris SK, Chang G. Validity of the CRAFFT substance abuse screening test among adolescent clinic patients. Arch Pedia

Additional SBIRT resource and training:

<b>Resource</b>	<b>Cost</b>	<b>Link</b>
SBIRT Training	\$50	<a href="http://www.sbirtraining.com/SBIRT-Core">http://www.sbirtraining.com/SBIRT-Core</a>
Motivational Interviewing	\$20	<a href="http://www.sbirtraining.com/miprogram">http://www.sbirtraining.com/miprogram</a>
AMHSA- HRSA Center for Integrated Health solutions	N/A	<a href="http://www.integration.samhsa.gov/clinical-practice/sbirtraining-other-resources">http://www.integration.samhsa.gov/clinical-practice/sbirtraining-other-resources</a>



Patient/Client Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Screener Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Reviewed by Qualified Provider: \_\_\_\_\_ Date: \_\_\_\_\_

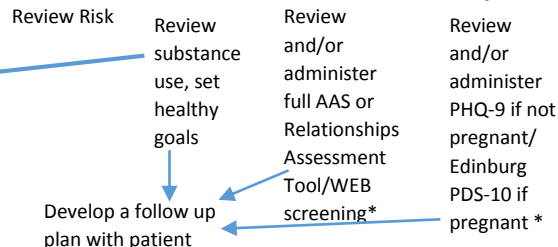
# 1. Behavioral Health Risks Screening tool

For pregnant women and women of childbearing age  
**Provider Tool**

Women and their children’s health can be affected by emotional problems, alcohol, tobacco, other drug use and violence. Women and their children’s health are also affected when these same problems are present in people who are close to them. Alcohol includes beer, wine, wine coolers, liquor and sprits, Tobacco products include cigarettes, cigars, snuff and chewing tobacco.

Have you smoked any cigarettes or used any tobacco products in the past 3 months? <b>TOBACCO</b>		YES			NO
Did any of your parents have a problem with alcohol or other drug use? <b>PARENTS</b>	YES				NO
Do any of your friends have a problem with alcohol or other drug use? <b>PEERS</b>	YES				NO
Does your partner have a problem with alcohol or other drug use? <b>PARTNER</b>		YES			NO
In the past, have you had difficulties in your life due to alcohol or other drugs, including prescription medications? <b>PAST</b>		YES			NO
Circle YES if she agrees with any of these statements: In the past month, have you drunk any alcohol or used other drugs? -How many days per month do you think ___? -How many drinks on any given day ___? -How often did you have 4 or more drinks per day in the last month ___? <b>PRESENT</b>		YES			NO
Circle YES if she agrees with any of these statements: In the past 7 days, have you: -Blamed yourself unnecessarily when things went wrong? -Been anxious or worried for no good reason? -Felt scared or panicky for no good reason? <b>EMOTIONAL HEALTH</b>				YES	NO
Are you currently or have you ever been in a relationship where you were physically hurt choked, threatened, controlled, or made to feel afraid? <b>VIOLENCE</b>			YES		NO

Brief Intervention	YES	NO	NA
Did you <b>State</b> your medical concern?			
Did you <b>Advise</b> to abstain or reduce use?			
Did you <b>Check</b> patient’s reaction?			
Did you <b>Refer</b> for further assessment?			
Did you <b>Provide</b> written information?			



\*For additional screening tools visit:  
<http://www.dbhds.virginia.gov/library/mental%20health%20services/scrn-pw-yahighrisktool-providerbackground.pdf>

Patient/Client Name: \_\_\_\_\_

Date: \_\_\_\_\_

Reviewed by Qualified Provider: \_\_\_\_\_

Date: \_\_\_\_\_

## Behavioral Health Risk Screening Tool For Pregnant Women and Women for Childbearing Age Client tool

Women and their children’s health can be affected by emotional problems, alcohol, tobacco, other drug use and violence. Women and their children’s health are also affected when these same problems are present in people who are close to them. Alcohol includes beer, wine, wine coolers, liquor and spirits. Tobacco products include cigarettes, cigars, snuff and chewing tobacco.

1. Have you smoked any cigarettes or used any tobacco products in the past three months?		<b>YES</b>			<b>NO</b>
2. Did any of your parents have a problem with alcohol or other drug use?	<b>YES</b>				<b>NO</b>
3. Do any of your friends have a problem with alcohol or other drug use?	<b>YES</b>				<b>NO</b>
4. Does your partner have a problem with alcohol or other drug use?		<b>YES</b>			<b>NO</b>
5. In the past, have you had difficulties in your life due to alcohol or other drugs, including prescription medications?		<b>YES</b>			<b>NO</b>
6. Circle <b>YES</b> if you agree with any of these statements. In the past month, have you drunk any alcohol or used other drugs? - How many days per month do you drink? __ - How many <b>drinks</b> on <b>any given day</b> ? - How often did you have <b>4 or more drinks per day</b> in the last month? _		<b>YES</b>			<b>NO</b>
7. Check <b>YES</b> if you agree with any of these statements. In the past 7 days, have you: - Blamed yourself unnecessarily when things went wrong? - Been anxious or worried for no good reason? - Felt scared or panicky for no good reason?				<b>YES</b>	<b>NO</b>
8. Are you currently or have you ever been in a relationship where you were physically hurt, choked, threatened, controlled, or made to feel			<b>YES</b>		<b>NO</b>

Developed by the Institute for Health and Recovery (IHR), Massachusetts, February, 2007; September 2010; Adapted by Virginia Department of Behavioral Health and Developmental Services, Virginia Department of Medical Assistance Services and Virginia Department



## 2. Audit-C Questionnaire

Circle the patient's response to each question, and add the point values given for each answer to determine if a screening is positive. A score of 4 or more for women indicates a positive screen for at risk drinking.

Ask the following questions and score accordingly	0 points	1 point	2 points	3 points	4 points
1. During the last 12 months, about how often did you drink ANY alcoholic beverage?	Never	Monthly or less	2-4 times a month	2-3 times a week	4 or more times a week
2. Counting all types of alcohol combined, how many drinks did you USUALLY have on days when you drank during the last 12 months?	1-2	3-4	5-6	7-9	10 or more
3. During the last 12 months, about how often did you drink 4 or more drinks in a single day?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily
<b>A score of 4 or more for women is positive for at-risk drinking</b>					

For provider use only:

Brief Intervention	YES	NO	NA
Did you <b>State</b> your medical concern?			
Did you <b>Advise</b> to abstain or reduce use?			
Did you <b>Check</b> patient's reaction?			
Did you <b>Refer</b> for further assessment?			
Did you <b>Provide</b> written information?			

### 3. TWEAK Screening Tool

**T** Tolerance: How many drinks does it take to make you feel high? No. of drinks  
Score 2 points for more than 2 drinks

**W** Have close friends or relatives Worried or complained about your drinking in the past year?  
Yes No  
Score 2 points for yes

**E** Eye-opener: Do you sometimes take a drink in the morning when you get up?  
Yes No  
Score 1 point for yes

**A** Amnesia: Has a friend or family member ever told you about things you said or did while you were drinking that you could not remember?  
Yes No  
Score 1 point for yes

**K(C)** Do you sometimes feel the need to cut down on your drinking?  
Yes No  
Score 1 point for yes

**Total Score =**  
**2 or more points suggests risky drinking**

For provider use only:

Brief Intervention	YES	NO	NA
Did you <b>State</b> your medical concern?			
Did you <b>Advise</b> to abstain or reduce use?			
Did you <b>Check</b> patient's reaction?			
Did you <b>Refer</b> for further assessment?			
Did you <b>Provide</b> written information?			

## 4. CRAFFT Screening Tool

For young adults and adolescents

An answer of 'yes' indicates a positive result.

Have you ever ridden in a **Car** driven by someone (including yourself) who was high or had been using alcohol or drugs?

Do you ever use alcohol or drugs to **Relax**, feel better about yourself, or fit in?

Do you ever use alcohol or drugs while you are **Alone**?

Do you ever **Forget** things you did while using alcohol or drugs?

Do your **Family** or **Friends** ever tell you that you should cut down on your drinking or drug use?

Have you ever gotten in **Trouble** while you were using alcohol or drugs?

**Scoring: 2 or more positive items indicate the need for further assessment.**

For provider use only:

Brief Intervention	YES	NO	NA
Did you <b>State</b> your medical concern?			
Did you <b>Advise</b> to abstain or reduce use?			
Did you <b>Check</b> patient's reaction?			
Did you <b>Refer</b> for further assessment?			
Did you <b>Provide</b> written information?			

## New River Valley Prenatal Providers

### **Carilion New River Valley Medical Center- The Birth Place**

2900 Lamb Circle Christiansburg VA 24073

540-731-4578

Dr. Kimberly Simcox

Dr. Jill Devlin

Dr. Robert Heineck

Dr. David Roberts

Kris Conrad, CNM

Rebecca White, CNM

### **Carilion Obstetrics and Gynecology-Affiliated Practitioners**

2900 Lamb Circle Christiansburg VA 24073

540-639-2037

Dr. James Weston

Dr. John Colby

### **Carilion Family Practice**

205 Roanoke Street

Christiansburg, VA 24073

540-731-7624

-and-

2900 Lamb Circle Christiansburg VA 24073

540-639-2037

Dr. Julianna Snow

Dr. Leslie Badillo

### **Montgomery Obstetrics and Gynecology**

826 Davis Street

Blacksburg, VA 24060

540-250-9024

Dr. Margarita Abrams

Dr. Carrie Champine

Dr. Laurie Hudgins

Dr. George Zolovick

### **New River Health District- VA Department of Health**

Floyd: 540-745-2142

Giles: 540-235-3135

Montgomery: 540-585-3300

Pulaski: 540-440-2188

Radford City: 540-267-8255

## New River Valley Medication Assisted Treatment Providers

### **Carilion New River Medical Center**

#### **Dr. Kimberly Simcox and Dr. Julianna Snow**

2900 Lamb Circle  
Christiansburg VA 24073  
540-731-4578

#### **Dr. Cooke, MD**

Psychiatrist  
700 University City Blvd, Blacksburg, VA 24060  
(540) 961 – 8300

#### **Dr. Laura Wolfe, MD**

5060 Valley View Blvd NW  
Roanoke, VA 24012  
540-278-1051

### **New River/Galax Comprehensive Treatment Center**

140 Larkspur Lane  
Suite D  
Galax, VA 24333  
844-637-9510

### **Pulaski Medical**

1006 E. Main Street  
Pulaski, VA 24301  
540-980-1125

### **Quality Medical Care**

#### **Dr. Moses Quinones**

2955 Market St. Suite B4  
Christiansburg, VA 24073  
(540) 381 7326

#### **Dr. Stella Bassey**

80 college St Suite R  
Christiansburg, VA 24073  
(540) 382-1024

---

Other MAT Providers (Do Not Typically Treat During Pregnancy)

### **Roanoke Comprehensive Treatment Center**

3208 Herschberger Road  
Roanoke, Virginia 24017  
844-758-7646

### **TASL (Treating Addiction Saves Lives) Clinic**

2609 Sheffield Dr, # 100  
Blacksburg, VA 24060  
540-443-0114

## Recovery, Counseling and Support Services and Programs

### **New River Valley Community Services -Special Deliveries**

<http://www.nrvcs.org/specialdeliveries/>

For emergencies, call Access Services at 540-961-8400

Non-emergency/business calls: 540-961-8300

Fax: 540-961-8465 (Montgomery Center)

### **New River Health Departments**

Referrals may be made to the Resource Mothers and Baby Care Programs by calling the local health department at:

**Giles - (540) 235-3135**

**Floyd - (540) 745-2142**

**Montgomery - (540) 585-3300**

**Pulaski - (540) 440-2188**

**Radford - (540) 267-8255**

### **Women's Resource Center**

P.O. Box 477, Radford, VA 24143

Office: (540) 639-9592

Hotline: (540) 639-1123

TTY: (540) 639-2197

Toll Free: (800) 788-1123 (regional access)

Fax: (540) 633-2382

E-mail: [adminservices@wrcnrv.org](mailto:adminservices@wrcnrv.org)

Website: [www.wrcnrv.org](http://www.wrcnrv.org)

### **Pulaski Medical**

1006 E. Main Street

Pulaski, VA 24301

540-980-1125

### **New River/Galax Comprehensive Treatment Center**

140 Larkspur Lane

Suite D

Galax, VA 24333

844-637-9510

### **Roanoke Comprehensive Treatment Center**

3208 Herschberger Road

Roanoke, Virginia 24017

844-758-7646



## New River Valley Departments of Social Services

### **Montgomery County Health and Human Services**

210 S. Pepper St., Ste. B  
Christiansburg, VA 24073  
Phone: (540) 382-6990

### **Floyd County Social Services**

120 West Oxford Street, Building A-2  
Floyd, Virginia 24091  
Phone: (540) 745-9316

### **Giles County Department of Social Services**

211 Main Street, Suite 109  
Narrows, VA 24124  
Phone (540) 726-8315

### **Pulaski County Department of Social Services**

53 Commerce St.  
Pulaski, VA 24301-0110  
Phone (540) 980-7995

### **Radford City Department of Social Services**

928 West Roanoke Street  
Radford, VA 24141  
Phone: 540-731-3663

## Information for Mom- Using substances during pregnancy

When a pregnant woman uses tobacco, drinks alcohol or uses drugs during pregnancy, so does her baby. These substances can pass through the placenta and to the baby through the umbilical cord. When a baby is exposed to a substance, a number of things could happen. Below is a list of problems more likely to happen to babies exposed to alcohol, tobacco, and drugs:



**Neonatal abstinences syndrome (NAS):** a group of conditions experienced by a newborn who withdraws from a drug or drugs used by the birth mother during pregnancy. What type and how serious an infant's withdrawal symptoms depend on the drug(s) used, how long and how often the mother used while pregnant, and whether the infant was born full term or premature.

**Premature birth:** a baby is born more than three weeks before the baby is due. Premature babies often have medical problems.

**Low birth weight:** a baby is born weighing less than 5 pounds, 8 ounces. Some low birth weight babies are healthy, even though they are small. But being low birthweight can cause serious health problems for some babies.

**Fetal alcohol spectrum disorder:** health problems that can happen to babies when their mother drinks alcohol during pregnancy. The most serious of these is fetal alcohol syndrome. Fetal alcohol syndrome can seriously harm your baby's brain and body.

**Miscarriage:** when a baby dies in the womb before 20 weeks of pregnancy. Stillbirth is when a baby dies in the womb after 20 weeks of pregnancy.

**Development and behavior problems:** may show up for several years after a baby is exposed to substances during pregnancy. These problems make it harder for the child to learn, communicate, take care of themselves, and can include attention deficit hyperactivity disorder (ADHD).

## Effects of Particular Substances

### Tobacco

Pregnant smokers have a higher chance of miscarriage and stillbirth. Babies of smoking mothers have a higher chance of being born early and too small. Low-birth-weight babies (less than 5 ½ pounds) can suffer serious health problems throughout their lives. Quitting tobacco products will help you feel better and provide a healthier environment for your baby.



### Alcohol

There is no amount of alcohol that is proven to be safe during pregnancy. Alcohol includes wine, wine coolers, beer and liquor. The best way to ensure a healthy baby is to stay away from alcohol altogether. Drinking alcohol during pregnancy can cause birth defects, miscarriage, premature birth, stillbirth, development and behavior problems, low birth weight, and fetal alcohol spectrum disorders.



### Marijuana

No amount of marijuana has been proven safe to use during pregnancy. Using marijuana over a long time may raise the risk of premature birth. Some children born to women who used marijuana during their pregnancies are more likely to have certain development and behavior problems. More research is needed, however, to know if these effects come from marijuana use or related her factors, like a poor home environment or the mother's use of other drugs.

### Cocaine and Methamphetamine

Cocaine use during pregnancy makes premature birth, low birthweight, miscarriage and placental abruption more likely to happen. Using of meth during pregnancy also increases the risk of premature birth and placental abruption.

After delivery, babies who were exposed to these drugs before birth may undergo withdrawal-like symptoms, including jitteriness, drowsiness and breathing problems.



### Heroin and Opiates

Using heroin during pregnancy can be dangerous, even deadly. It may cause serious problems including: birth defects, placental abruption, premature birth, low birthweight and stillbirth.

If you're pregnant and using heroin or other opiates, don't stop taking it without getting treatment from your health care provider first. Quitting suddenly can cause severe problems for your baby, including death. Your health care provider or a drug-treatment center can treat you with drugs like methadone or buprenorphine. These drugs can help you gradually reduce your dependence on heroin in a way that's safe for your baby.

# Drinking and Reproductive Health

## STANDARD-SIZED DRINK EQUIVALENTS

APPROXIMATE NUMBER OF STANDARD-SIZED DRINKS IN:

### BEER or COOLER

12 oz.  
~5% alcohol

- 12 oz. = 1
- 16 oz. = 1.3
- 22 oz. = 2
- 40 oz. = 3.3



### TABLE WINE

5 oz.  
~12% alcohol

- a 750 mL (25 oz.)  
bottle = 5



### MALT LIQUOR

8–9 oz.  
~7% alcohol

- 12 oz. = 1.5
- 16 oz. = 2
- 22 oz. = 2.5
- 40 oz. = 4.5



### 80-proof SPIRITS (hard liquor)

1.5 oz.  
~40% alcohol

- a mixed  
drink = 1 or more\*
- a pint (16 oz.) = 11
- a fifth (25 oz.) = 17
- 1.75 L (59 oz.) = 39



**Risky Drinking:** More than 7 standard-sized drinks per week or more than 3 per occasion, and drinking when pregnant or trying to become pregnant.

\*Note: Depending on factors such as the type of spirits and the recipe, one mixed drink can contain from one to three or more standard drinks.

For urgent assistance with a drinking problem, contact the Substance Abuse & Mental Health Services Administration at 1-800-273-8255.

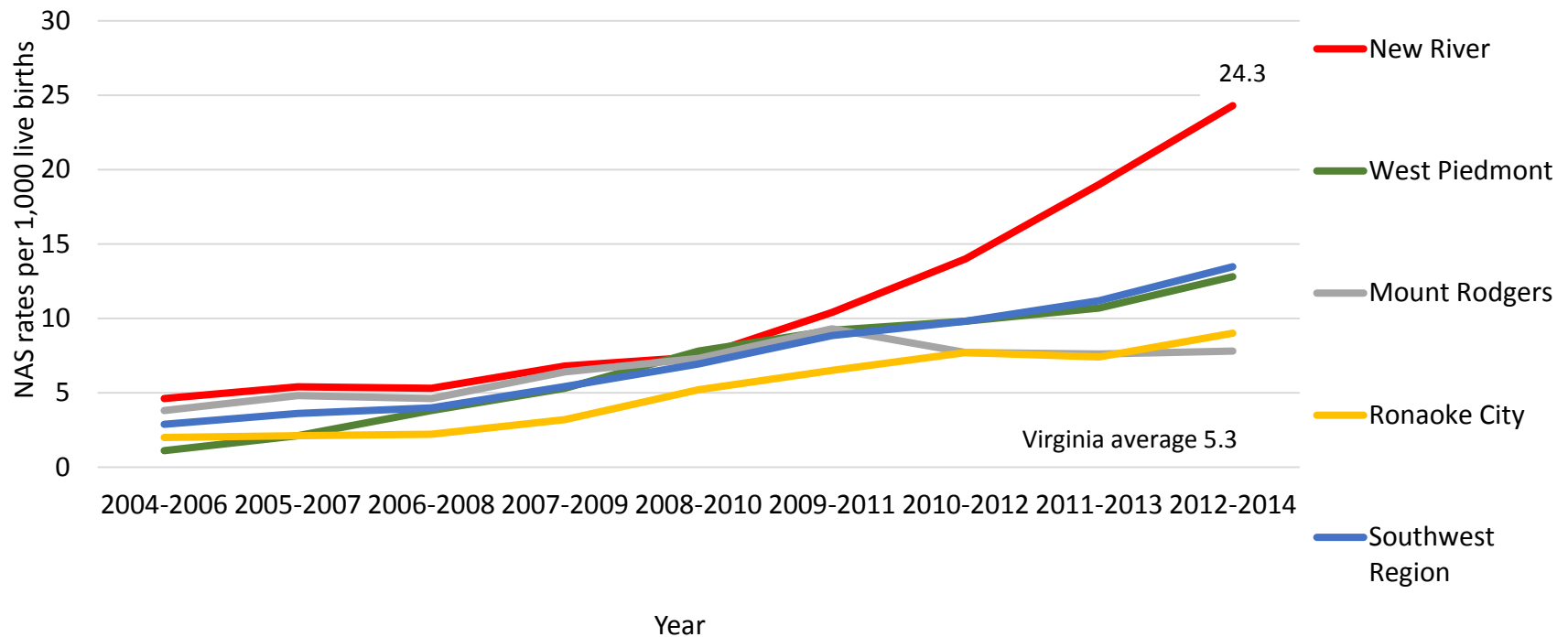
Source: National Institute on Alcohol Abuse and Alcoholism. *A Pocket Guide for Alcohol Screening and Brief Intervention*. 2005. Rockville, MD: National Institutes of Health, 2005. Available at: [http://pubs.niaaa.nih.gov/publications/Practitioner/PocketGuide/pocket\\_guide.htm](http://pubs.niaaa.nih.gov/publications/Practitioner/PocketGuide/pocket_guide.htm).

Produced by the American College of Gynecologists and Obstetricians (ACOG)

## Prenatal Substance Abuse in the New River Valley

### NAS as Indicator of Prenatal Substance Abuse

Prenatal substance use and abuse is a major health concern in the New River Valley (NRV). As a primary indicator, Neonatal Abstinence Syndrome (NAS)<sup>1</sup> cases grew from 7 births to 24.3 births per 1,000 in the NRV from 2004- 2014. NAS is still occurring at a higher incidence than anywhere else in Virginia.

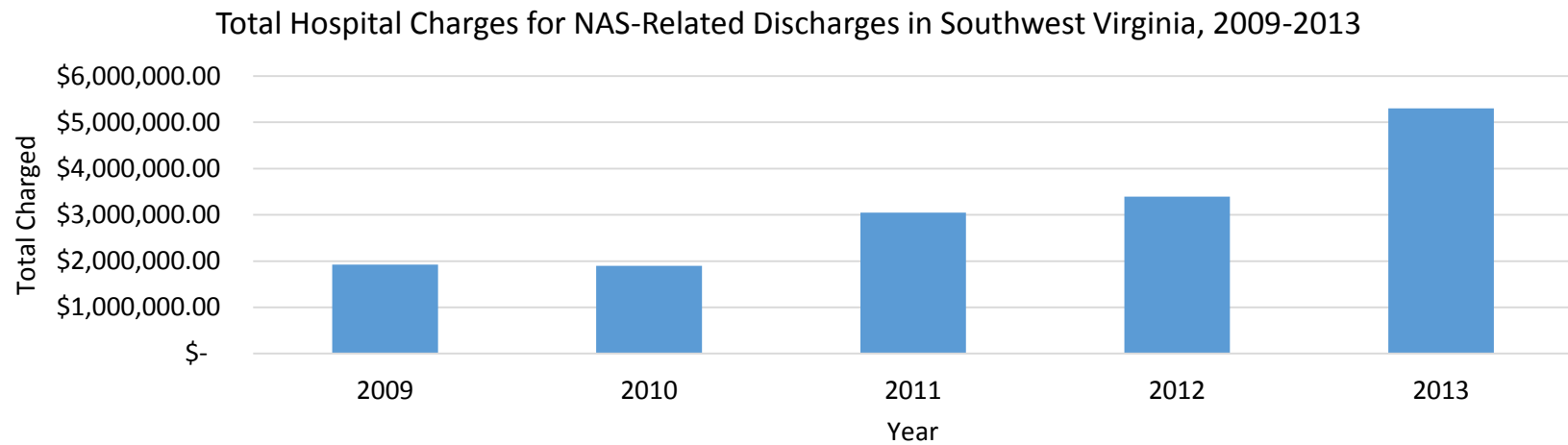
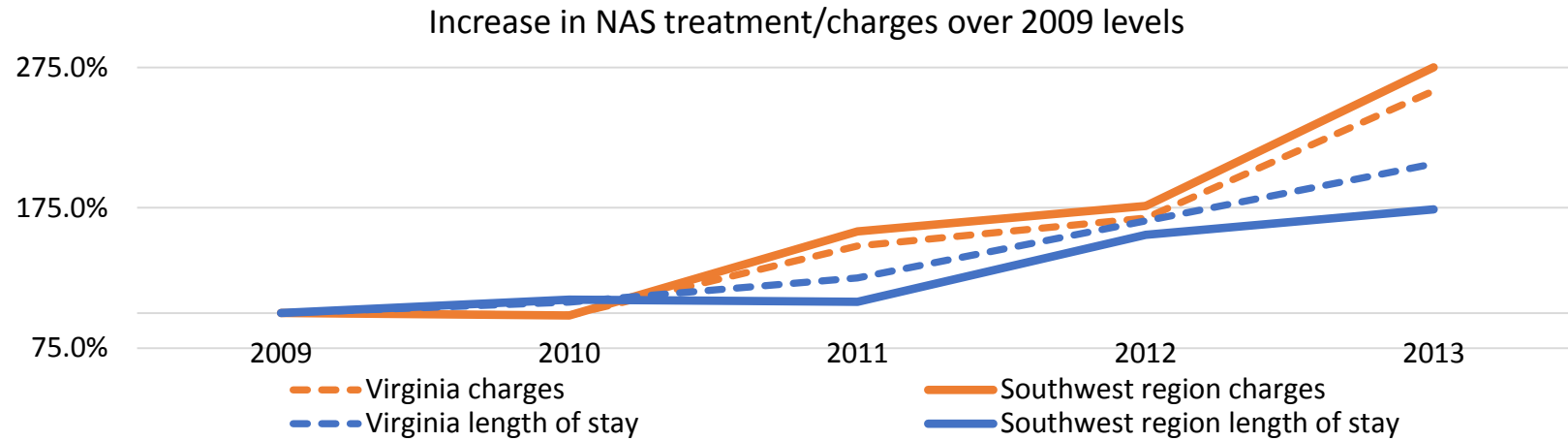


Source: Virginia Department of Health

<sup>1</sup> NAS is being used as an indicator to capture rates of prenatal substance abuse, although it is recognized that not all substance abuse during pregnancy will lead to NAS.

## Increased Hospitalization Rates and Cost

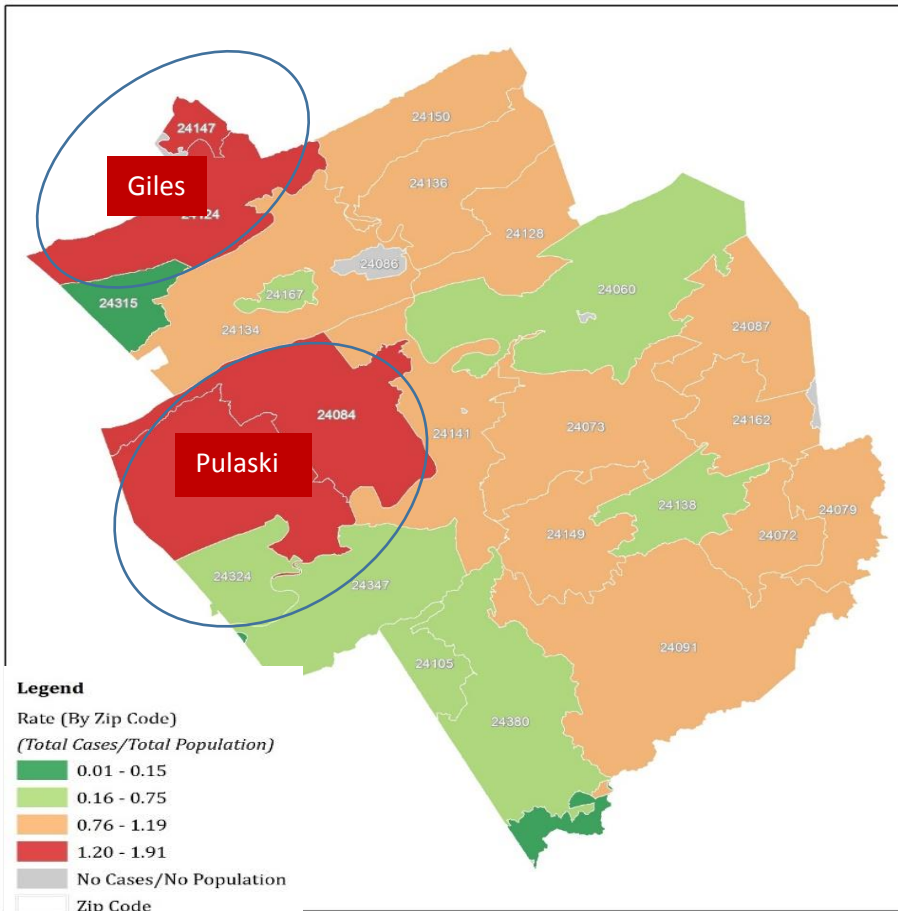
From 2009 – 2013, in Southwest Virginia the length of stay related to NAS incidence increased by 175% and the cost increased by 275%.



Source: Virginia Department of Health

**Rate of substance use in women of child bearing age in the NRV**  
**Substances include tobacco, alcohol, and illicit drugs**

**(Source: NRVCS, June 2015 Service Data)**



**Number of case of substance use in women of child bearing age in the NRV**  
**Substances include tobacco, alcohol, and illicit drugs**

**(Source: NRVCS, June 2015 Service Data)**

