CONSUMPTION OF ALCOHOL AND OTHER DRUGS IN PREGNANCY: AN INTEGRATIVE REVIEW

OBJETIVOS: to analyze the consumption of alcohol and other drugs during pregnancy and discuss the role of the multidisciplinary team to pregnant women during prenatal care, related to alcohol and other drugs.

Método: an integrative review, whose guiding questions were << What is the panorama of alcohol and other drugs during pregnancy? >>, << What is the role of the multidisciplinary team in monitoring pregnant users of alcohol and other drugs? >>. The databases searched were LILACS, BDBEN, the electronic library ScIELO and the bibliographic collection of the coordination of CAPES. The publications obtained a record of the last 10 years in Portuguese and Spanish.

Resultados: the multidisciplinary team performance in prenatal care is essential to avoid the consequences of alcohol and other drugs during pregnancy as to trace the predisposing factors.

Conclusão: the need for training/ sensitization of health professionals becomes necessary to promote maternal and fetal health.

Descriptors: Pregnancy; Illicit Drugs; Nursing.

RESUMEN

Objetivos: analizar el consumo de alcohol y otras drogas durante el embarazo y discutir el papel del equipo multidisciplinario en la atención prenatal, relacionado al alcohol y otras drogas.

Método: revisión integrativa, cuyas preguntas guía fueron << ¿Cuál es el panorama del consumo de alcohol y otras drogas durante el embarazo? >>, << ¿Cuál es el papel del equipo multiprofesional en el acompañamiento de la gestante usuaria de alcohol y otras drogas?>>. Las bases de datos se fueron LILACS, BDBEN, la biblioteca electrónica ScIELO y la colección bibliográfica de la coordinación del CAPES. Las publicaciones obtuvieron un recorrido de los últimos 10 años en idioma portugués y español.

Resultados: el rendimiento del equipo multidisciplinario en la atención prenatal es fundamental para evitar las consecuencias del consumo de alcohol y otras drogas durante el embarazo, como rastrear los factores predisponentes.

Conclusión: la necesidad de capacitación/sensibilización de los profesionales de la salud se hace necesaria para promover la salud materna y fetal.

Descriptors: Gestación; Drogas ilícitas; Enfermería.
INTRODUCTION

Alcohol and other drugs are historically identified as a serious public health problem, once beyond the psychosocial aggressions, commonly remain physical sequelae on users. This fact has important relevance to address the association of drugs and pregnancy, since such consequences affect not only pregnant, but also newborns.

Over the last few years have shown a considerable increase in the consumption of alcohol and other drugs during pregnancy. This association should be of great concern and hence constant research by health professionals in prenatal care, among them stand out nursing professionals.

The essence of nursing care is related to dexterity, skill, knowledge, understanding and observation. Upon this arises the foundation that seeks innovations in assistance with a focus on quality of care provided. The nursing activities should be regulated in a careful screening during the prenatal to early identify situations that may endanger the health of mother and child.

Among the substances known as legal and illegal, alcohol is the most studied, due to the risk associated with fetal embritoxity and teratogenicity. The consumption of alcohol and other drugs during pregnancy should be reason for great concern because they present great opportunity to cause injury to the fetus. This act must be investigated and discouraged because it is a serious public health problem.

Pregnant women who use alcohol and other drugs during pregnancy should be considered at risk. It is understood by pregnancy risk that the health and / or life of the mother and the fetus is more likely to suffer damage. Exposure to alcohol and other drugs during pregnancy increases the risk of mortality and incidence of different diseases the health of women and newborns.

During the prenatal visit, pregnant women often omit the alcohol, and other drugs, their use may be underdiagnosed during pregnancy due to the unpreparedness of health professionals in screening for symptoms and complaints. It is therefore highlight the importance of the role of professionals trained to perform the prenatal visits, identifying pregnant women who perform consumption of alcohol and other drugs.

Health services should be guaranteed their right to information about the harmful effects of licit and illicit drugs. The perception of the multidisciplinary team regarding the pregnant woman is a contributing factor in the quality of care. Thus, health professionals should reassess their own attitudes regarding the consumption of alcohol and other drugs to develop more humane care and without value judgments the pregnant drug user because negative attitudes can affect care.

OBJECTIVES

- To analyze the use of alcohol and other drugs during pregnancy
- To discuss the role of the multidisciplinary team to pregnant women during prenatal care, related to alcohol and other drugs.

METHOD

Study integrative literature review, and is considered a strategy to identify existing evidence in order to substantiate a health practice in various specialties. For the preparation of the study were followed six stages: identification of the subject and selection of research question; establishing criteria for inclusion and exclusion of studies and relevant literature search; defining the information to be extracted from the selected studies, critical appraisal of studies included in integrative review, interpretation of results, presentation of review/synthesis of knowledge.

To guide the integrative review formulated the following questions: What is the outlook of alcohol and other drugs during pregnancy? What is the role of the multidisciplinary team in monitoring pregnant users of alcohol and other drugs?

For the selection of the articles were used as databases, namely the Latin American and Caribbean Health Sciences (LILACS), Database of Nursing (BDENF), virtual library Scientific Electronic Library Online (SciELO) and the body of literature Coordination of Improvement of Higher Education Personnel (CAPES). We attempted to also original references in the articles identified in the survey conducted in the period May to July 2013.

The inclusion criteria of the selected publications for this integrative review were articles published in Portuguese or Spanish, available in full on the databases in the period between 2002 to 2012, whose main theme was about the use of alcohol and other drugs and acting multidisciplinary team in monitoring pregnant users of alcohol and other drugs. We excluded studies not available in full, dissertations, theses, and newspaper articles that had no scientific, publications in English.
language and do not fit into the time frame established.

The instrument used to validate the study sample categorization of publications included in the analysis of data relevant to the interpretation of the results of each study. Then, through the Virtual Health Library (VHL) in carrying out the search in the databases, we used the following subject descriptors health (DECS/MESH): Pregnancy; Illicit Drugs; Nursing.

Initially, 856 articles were obtained in the databases searched, to electronic libraries. Thus, we used the inclusion criteria, which were excluded 740 publications for not fitting the theme of the proposed research by reading carefully the title and abstract online; subsequently, a full reading of the remaining publications of the first selection, with an exclusion of 95 publications, for lack of relevance of the studies. And yet, to exclude publications that were repeated in the data sources with a total of 08 publications. Thus, the final sample consisted of the review of 13 articles, studies obtaining a predominance of methodological quality level 4 with a total of nine (09) publications, followed by level 3 and level 5 with each level presenting two (02) publications.

At this stage of the research was included in this review, the development of a form including the following items: item identification, publication type, study design, objectives, sample, main results and conclusions. For analysis and subsequent synthesis of the papers used a synoptic built for this purpose, which included the following: title, materials and methods, results and conclusions.

The presentation of the review and discussion of the data were performed descriptively in order to allow the reader to critical evaluation of the results obtained and its applicability.

### RESULTS

In this integrative review, we analyzed 13 articles that met the inclusion criteria previously established. The publications of studies relevant to the topic were the last ten years of publications, as inclusion criteria described. Thus, further study was publications 2007 (4/13), 2009 (3; 3) 2010 (3;13) (3/9) followed by 2005 (2/13) and 2012 (1;13) with a publication.

In published studies, the consumption of alcohol and other drugs during pregnancy were emphasized by the publications. Within the case studies emphasized the risk factors, role of the multidisciplinary team for monitoring and health education of pregnant drug user.

In Figures 1, 2, 3 and 4 show the synthesis of items included in the process of this integrative review.

<table>
<thead>
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<th>Title</th>
<th>Methods</th>
<th>Main results</th>
<th>Conclusions</th>
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<tr>
<td>Alcohol consumption during pregnancy</td>
<td>For diagnosing, proposing the use of a tracking survey, named T-ACE1, developed for use in pregnant women and already validated in several countries, including Brazil.</td>
<td>With the application of this questionnaire on 150 recent mothers, found around 20% of women who used alcohol during pregnancy.</td>
<td>It was observed that this is a sensitive method of tracking.</td>
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<td>Effects of consumption of alcohol on the fetus</td>
<td>In the period from April to November of 2004, were interviewed through the T-ACE questionnaire, 150 recent mothers in a maternity ward of Ribeirão Preto/SP and divided into consumers and non-consumers of alcohol during pregnancy. Newborns (RNs) of these women have been assessed in relation to weight, length and head circumference at birth perimeter.</td>
<td>Of recent mothers interviewed, 79.3% (119) were not identified as consumers of alcohol by the T-ACE questionnaire, whereas 20.7% (31) were considered consumers for the same instrument. The average length of the NbS whose mothers consumed no alcohol was 48.2 cm, while those whose mothers ingested alcoholic beverage was 46.7 cm and this difference was significant. Also observed average reduction of 109 g in weight and of 0.42 cm in the cephalic perimeter in children of mothers consuming alcohol, being female fetuses in the weight reduction was more pronounced (186 g).</td>
<td>The T-ACE questionnaire proved sensitive instrument for tracing of alcohol consumption during pregnancy. Alcohol use in pregnancy has been associated with fetal growth restriction, being female foetuses apparently more susceptible to the effects of alcohol.</td>
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<td>The consumption of alcohol by pregnant women: an exploratory study</td>
<td>There were performed in the study 40 pregnant women, taking as a data collection instrument two forms with close-ended questions.</td>
<td>10% of pregnant women had the habit of consuming alcoholic beverages in moderation, being the primary motivational factor the presence at parties and celebrations. As for the knowledge on the teratogenicity of alcohol, it was found that only half of the study revealed that data as their way of life should be valued in prenatal care by nurse, directing educational actions aimed at the quality of life of the family nucleus.</td>
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English/Portuguese

pregnant women who consumed alcoholic beverages believed that this practice could affect their child.

Figure 1. Synthesis of publications included in integrative review, according to the article title, methods, main results and conclusions.

<table>
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<td>Tracking use of alcohol by pregnant women in public health in Rio de Janeiro</td>
<td>Cross-sectional study with 537 randomly selected public maternity wards in parturient women in Rio de Janeiro between March and October 2000.</td>
<td>About 40% of women reported using some type of alcoholic beverage during pregnancy, being the most consumed drink beer (83.9%). Depending on the identification instrument, it has been estimated that between 7.3% and 26.1% of the women were suspected cases of misuse of alcohol. The suspicion of improper use was more common among women of older age; low educational level; not declared them white; I lived with companion; who reported smoking and use of illicit drugs by one of the spouses; and with little social support.</td>
<td>The high prevalence of suspicion of misuse of alcohol and their superposition with different risk factors for deleterious outcomes in pregnancy indicates an important public health problem, deserving to be routinely screened for prenatal follow-up.</td>
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<td>Alcohol consumption in pregnancy: performance of the Brazilian version of the T-ACE questionnaire</td>
<td>Observational study, transversal, in sequential sample of 450 women in the third trimester of pregnancy, assisted on motherhood in the city of Ribeirão Preto, State of São Paulo, in 2001. Were applied: questionnaire for demographic data collection, T-ACE questionnaire to survey the history of alcohol consumption along the gestation and interview clinic to identify harmful use and dependence to alcohol, according to diagnostic criteria of ICD-10. Correlation tests were made between different interviewers and test/re-test reliability.</td>
<td>Of the total, 100 pregnant women (22.1%) were considered as positive by the T-ACE. The kappa index to fillet and reliability were 0.95, with 97% of concordant answers. When compared to the parameters of the ICD-10 and the pattern of consumption, the T-ACE with cut-off equal to or above two points, introduced coefficients of sensitivity and specificity of 100% and 85% and 97.9% and 86.6% respectively.</td>
<td>The Brazilian version of the T-ACE showed fill properly the performance criteria that qualify to the role of basic tool for tracking consumption of alcohol during pregnancy. Its use is recommended in the routines and practices of obstetric services due to the trend of increased alcohol consumption, difficulties in identification of alcohol abuse by pregnant women and risk of development problems in children.</td>
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<td>Relationship between religious practice, depression, anxiety and alcohol use among pregnant women users of the SUS in Juiç de Fora</td>
<td>The study was cross-sectional involving 204 pregnant women of Juiç de Fora. The data collection was conducted in centers of attendances to the pregnant woman of the city, using a socio-demographic questionnaire, which referred to the affiliation and religious practice of the pregnant woman; the adult Psychiatric Morbidity Survey (QMPA); and the Alcohol Use Disorders Identification Test (AUDIT).</td>
<td>The AUDIT found an average score of 1.1 to the practitioners and 1.9 for non-practitioners (p = 0.049). The average practitioners in depression subscales was 1.6 and 2.1 practitioners not (p = 0.08) and in the subscales of alcoholism, anxiety and in overall score of QMPA, the average scores of practitioners and non-practitioners did not have statistically significant results.</td>
<td>It was noted in the study that the practitioners had smaller averages in scores of depressive symptoms and alcohol use compared to non-practitioners.</td>
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<td>Factors associated with the use of alcohol and smoking in pregnancy</td>
<td>It is an analytical study of transverse type, in which were included 433 recent mothers and their adult conceptus met in public maternity of Rio de Janeiro, during the period from 1999 to 2006. The information about the recent mothers and newborns were collected at time of delivery and in puerperium, through interview and consultations with medical records. It was considered &quot;alcohol use in pregnancy&quot; and &quot;cigarette use in pregnancy&quot; when these were detected by the health care professional in the prenatal consultation at any gestational age and recorded in the chart.</td>
<td>It was found that 5.5 and 7.4% of women reported use of cigarettes and alcohol during pregnancy, respectively. Maternal characteristics associated with smoking during pregnancy were marital status (p = 0.005), age (p = 0.01) and prenatal nutritional assistance (p = 0.003). Smoking during pregnancy was strongly associated with alcohol use, 31.3% of women reporting concomitant use of tobacco and alcohol (p &lt; 0.05). Regarding the use of alcohol, the characteristics associated with this practice were marital status (p = 0.003), and history of abortion (p &lt; 0.04). There was no association between the use of alcohol and smoking on the health of the newborn.</td>
<td>The findings suggest that the use of cigarettes and alcohol in pregnancy should be investigated in prenatal care among all women, especially among those who live without the partner, with more than 35 years, with a history of miscarriage, and not planned pregnancy. The nutritional assistance showed protective effect against smoking in pregnancy, so that pregnant women should be clarified regarding the deleterious effects of such substances concerning the way for best results obstetric.</td>
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Dias DR, Souza RMP de, Rodrigues DP et al.

Consumption of alcohol and other drugs...

Figure 2. Synthesis of publications included in integrative review, according to the article title, methods, main results and conclusions.

<table>
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<td>Frequency of effects of alcohol on the fetus and pattern of alcohol consumption by pregnant women</td>
<td>1964 were examined newborns alive, and interviewed their mothers through direct questions and by the T-ACE questionnaire. Quantified weekly consumption of alcohol by recent mothers, three months before and during pregnancy and compared the physical characteristics of newborns with this pattern of consumption. We used the Mann-Whitney test, Chi-square test and Spearman’s rank correlation coefficient. It took the significance level of 5%.</td>
<td>In 76 children (38.69/1000 live births) identified the spectrum of fetal alcohol disorders. Three of them (1.52/1000 live births) had fetal alcohol syndrome. Three months before pregnancy, 43.90 per cent of women consumed alcohol on a weekly basis. In pregnancy this number dropped to 21.20 per cent in the first quarter, 17.50 percent in the second and 17.10 percent in the third and 33.29 percent of recent mothers consumed alcohol at some point in pregnancy. The T-ACE questionnaire was positive in 31.11 percent recent mothers and negative at 68.84 per cent. The higher the amount of alcohol consumed, during the first six months of pregnancy, the lower the birth weight, head circumference and perimeter length of newborns. Those measures showed no significant differences between the recent mothers T-ACE both positive and negative.</td>
<td>There were found 76 infants with fetal alcohol spectrum disorders. The use of alcohol by pregnant women was high, suggesting the completion routine tracking of consumption.</td>
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<td>Perceptions of pregnant adolescents about alcohol consumption during the gestational period</td>
<td>Study was conducted with 20 pregnant adolescents, users of family health basic units of a town in the interior of Ceará.</td>
<td>It was found that the adolescents perceive the ingestion of alcoholic beverage during the gestational period, as &quot;inconsequential&quot;, &quot;natural&quot; and &quot;something wrong, but impossible to resist&quot;.</td>
<td>It was demonstrated the need for assistance aimed at the holistic model, in which each patient is treated as a biopsychosocial, as well as conducting educational work.</td>
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<tr>
<td>Relationship between religious practice, use of alcohol and psychiatric disorders in pregnant women.</td>
<td>Cross-sectional study involving 260 pregnant women monitored in the Care Centers of Juiz de Fora, pregnant women using a demographic questionnaire (including affiliation and religious practice), the Mini International Neuropsychiatric Interview and the Alcohol Use Disorders Identification Test (AUDIT).</td>
<td>The majority of pregnant women was practicing religion (60.8%). Pregnant women practitioners showed a lower frequency (p &lt; 0.05) of major depressive episode, with Melancholic features, Hypomanic Episode, panic disorder with Now Current Current Social phobia, phobia and post-traumatic stress disorder. In relation to the diagnosis of abuse of one or more psychoactive substances, there was a trend to lower prevalence in pregnant women religious groups practitioners (p = 0.057).</td>
<td>It was observed that the practitioners tend to have lower rates of mood disorders and anxiety disorders that pregnant women not observant of religiosity.</td>
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<tr>
<td>Effects of alcohol on newborn</td>
<td>Bibliographic survey of medical literature through searching the database Medline, LILACS and Scielo platform using the terms: “fetus”, “infant”, “pregnant woman”, “alcohol”, “alcoholism”, “fetal alcohol syndrome” and “alcohol-related disorders”, covering the period from 2000 to 2009.</td>
<td>The effects of alcohol in the newborn, resulting in consumption of this drug by pregnant women, are extremely severe and frequent, representing an important public health problem worldwide. The spectrum of fetal alcohol disorders leads to individual losses, to their family and to society as a whole. Nevertheless, the difficulty of diagnosis and the inequality of health professionals makes the spectre of these lesions is little remembered and even unknown. The lesions caused by the action of alcohol on the fetus are completely prevented if pregnant women not to consume alcoholic beverages during pregnancy.</td>
<td>It is essential for the detection of women consuming alcohol during pregnancy and the development of specific programs of warning about the consequences of alcohol during pregnancy and breastfeeding.</td>
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Figure 3. Synthesis of publications included in integrative review, according to the article title, methods, main results and conclusions.
DISCUSSION

Whereas concern of health professionals is growing in relation to alcohol and other drugs during pregnancy, was found in the publications analyzed the importance of multidisciplinary work in the care of pregnant woman consumes alcohol and other drugs during pregnancy. It is worth noting that the team work is extremely relevant, since, at any time, professionals can come across women who consume substances that compromise the quality intrauterine life, but many have not yet seized the value of performing a query pre-native detailed and thorough.

The detection of alcohol and other drugs, especially during pregnancy, is a complex action, since the unpreparedness and prejudice of their own professional can have great influence on the failure of this act by the pregnant woman. Thus, it is a task that involves a detailed history, where signs and symptoms should be considered, and the bonds of trust established. 6,12-14

The discovery on the consumption of alcohol and other drugs by pregnant women is difficult due to the fact that this habit is not investigated systematically in antenatal clinics. It highlights the difficulty of detection of the use of alcohol and other drugs among pregnant women, which can be attributed to the lack of definition of a limit harmful or omission and denial of information. Feelings such as fear, shame and guilt can undersize consumption statistics, even using the most insightful ways to detect the use. 6,12

The importance of sensitivity in training for the guidelines, to be performed regardless of whether the pregnant women admit it or not, have made use of alcohol and other drugs. Screening and preventive actions are extremely important during prenatal. Thus, health professionals play an important role in preventing the damage that alcohol and other drugs during pregnancy may cause the fetus, should early detection of women with problems of abuse or not. 15-17
The counseling should be a routine during prenatal as well as the development of effective educational programs that provide awareness of the dangers of exposure to alcohol and other drugs in women of reproductive age. Preventive actions are extremely important element, including during prenatal care, during which the woman is monitored regularly by a team of health care, and where it creates several opportunities for the detection of alcohol and other drugs.14

Health professionals have an obligation to prevent and recognize the damage that alcohol and other drugs can cause the newborn, early identification of women consuming alcohol and other drugs and neonates affected by consumption. These shall establish in their daily practice to evaluate the use of alcohol and other drugs by pregnant women, advising them about the risks and arousing their responsibility for the health of her unborn child.15,16

In this sense, the constant tracking must be performed by a healthcare professional. Getting highlighted the need for application of an instrument in the consultations, with a view that the consumption of alcohol and other drugs has been a constant habit among women. In most of the articles analyzed, the questionnaire Tolerance, Annoyef, Guilt and Eyopener (T-ACE) showed greater efficiency, specificity and sensitivity and can be used in prenatal visits.3,4,6,12

The screening questionnaire, called the T-ACE, developed for use in pregnant women and has been validated in several countries, including Brazil, is suggested as a diagnostic tool and as a screening tool.4,12 It is worth noting also that the validity of these instruments has been highlighted, having been incorporated into the routines of prenatal services in several countries, including Brazil.6

Thus, it is the need of adopting early screening tools in routine obstetric, since there is a current trend of increased consumption of alcohol and other drugs by women of reproductive age, high probability of developmental problems in the offspring of pregnant women at risk for alcohol and other drugs, and also the difficulties faced by health professionals to identify the use of alcohol and other drugs by pregnant women.4

It is noteworthy that no drug is safe for use during pregnancy. And in relation to alcohol and other drugs no dosing recommendation. The potential teratogenic effects can not be disregarded by the team, as the consumption of even low levels during pregnancy can cause deformities and alter fetal development.

Thus, the use of alcohol and other drugs during pregnancy should be discouraged and discouraged because it is a public health problem, as explained previously.3,7,12,14,17

The unpreparedness of health professionals may be the reason for the ineffectiveness of the diagnosis of alcohol and other drugs during pregnancy. The prenatal care in Brazil still requires the development of routines and tools that can assist health professionals in prevention and early diagnosis for problems related to drug use. Proper assessment during pregnancy is essential for the prevention of fetal alcohol syndrome and other teratogenic effects of alcohol and other drugs.4,5,7

It can be argued that this unpreparedness is confirmed to the extent that occur, usually, lack of training of health professionals for more effective ways to detect the use of alcohol and other drugs by women.13

In this context, we should also consider the difficulties that teams have to work in a multidisciplinary way. This fact can be observed by means of a simple action, but of extreme importance to comprehensive care, which is the record in the medical record. This developments in medical records is an important element for making joint decisions, in addition to being a valuable tool for communication between health professionals. It notes the need for recovery of records to avoid fragmentation of care.

The registration of health professionals regarding lifestyle habits of pregnant women regarding the consumption of alcohol and other drugs do not occur. This may indicate that the consumption of alcohol and other drugs by pregnant women are underdiagnosed by prenatal service. At the same time, consumption can be detected, but not recorded in the medical records, meaning a devaluation of the data relating to the lifestyle of women as an important factor in gestational development and a deficiency in communication between health professionals.13

It is worth noting that in Brazil the prenatal care has a broad scope, revealing itself as the ideal time for intervention and prevention of the use of substances harmful to mother and child. In this period the ties between health professionals and pregnant women are intensified, which promotes better opportunities for intervention. However, for this to occur it is necessary that professionals are aware and prepared for the detection of the use of substances, besides considering aspects of the goals, subjective care. And even before the detection know guide, highlighting the dangers of the use upon your
health and the baby, which can lead to difficulties present and future. Therefore, we can say that the nurse, along with other health professionals, plays an important role in the detection and monitoring of alcohol and other drugs during pregnancy. Thus, we highlight the importance of nursing care in prenatal care quality, as it constitutes a moment of broad health education, to encompass guidance and promotion of awareness of pregnant women about the possible implications of habits not recommended in pregnancy.

During pregnancy should be made a prophylactic work by the multidisciplinary team. A pregnant woman should be directed in order to achieve changes in their behavior. The professional must have a holistic look at when considering pregnant women as a biopsychosocial and spiritual being, respecting their individuality and targeting interventions to the needs felt and referred.

Thus, despite the potential of multi-professional work, it is observed in the literature that the work of selected health team is fragmented and focused on specific professions. Care is made individually, uncooperative, making the building a focus of attention to the individual, in this case, the pregnant woman is under the consumption of alcohol and other drugs.

The effects of alcohol and other drugs during pregnancy has been widely studied, demonstrating the risks for maternal health, and for the fetus. It can be argued that there is a consensus among the authors surveyed about the harm that this association brings to mother and fetus.

The effects of alcohol and other drugs on fetal development are extremely serious and can pass on permanently affected individuals. In the literature there is a larger risk of malformations, spontaneous abortion, low birth weight, prematurity, asphyxia and perinatal mortality, as well as various physical and mental problems stemming from fetal alcohol syndrome.

It is noteworthy that between 40 to 60 minutes after alcohol consumption by pregnant women, the same alcoholic content of the maternal organism is found in fetal blood, causing intoxication. However exposure to the fetus is greater because their metabolism and elimination are slower. This fact, among other things, contributes to the increase in the duration of hospitalization of infants.

The alcohol which consumes the mother through the placenta allowing the amniotic fluid remains unmodified saturated alcohol (ethanol) and acetaldehyde (metabolite of alcohol), but has insufficient amount of enzymes for their degradation. These substances provide the formation of oxygen free radicals that have the ability to affect the cellular proteins and lipids, causing an increase in apoptosis in organogenesis and causing damage. Inhibits the synthesis of retinoic acid which is a substance of paramount importance for embryonic development. Both ethanol, as acetaldehyde has direct effects on various cell growth factors, which can affect fetal development.

Alcohol consumption during pregnancy can lead to Fetal Alcohol Syndrome a consequence of the newborn due to exposure in utero. Since this is an irreversible condition may be characterized by abnormalities in the central nervous system causing neurological, craniofacial growth deficiency pre-natal and post-natal, low birth weight, behavioral disorders, malformations, learning disabilities, memory problems and emotional agitation, disability suction during breastfeeding, irritability, sweating, and abnormal sleep patterns.

However, the Court finds that the teratogenic effects of alcohol may be present in the absence of fetal alcohol syndrome, i.e., there may be a significant reduction in growth without other symptoms.

The period characterized risk for the use and abuse of alcohol is in the first quarter, because there is the formation of the structures of the fetus may be affected throughout this process. The use and abuse of alcohol during pregnancy becomes grounds for investigation and intervention, as substance abuse is associated with growth restriction and fetal development, the cognitive impairments Baby and increased mortality.

The literature also shows that alcohol consumption is related to miscarriages, factors inhibiting delivery, increased risk of malformations, low birth weight, prematurity, asphyxia and perinatal mortality, and mental and physical problems resulting from alcohol consumption during pregnancy.

The consequent impact of alcohol intake has been studied due to findings that indicate the presence of alcohol in breast milk can alter the production volume, composition and excretion of milk damaging the newly nascido. This finding should be considered of paramount importance due to the benefits of breastfeeding for the newborn, including antibodies, development of facial muscles, teeth development, speech, preventing cavities. Thus, if the excretion is insufficient
Consumption of alcohol and other drugs...

all the benefits of breastfeeding will be harmed.

In addition to the consequences brought the fetus to alcohol consumption leads to several injuries to the mother's health, eg, cardiovascular disease, hypertension, cancer, neurological disorders, depression and various affective disorders. You can contribute to insufficient gestational weight gain, the lower frequency of prenatal visits and the likelihood of using other drugs are much higher. 3,5,6,17

For some authors, religiosity/spirituality has been identified as an important protective factor for health. Accordingly, a large number of studies have examined the possible relationship between religiosity and mental health and most of them point to a positive relationship between them. 15,17

Thus, alcohol consumption during pregnancy presents itself as an important public health problem, with important consequences for maternal and newborn health. This is a problem that appears under the shared responsibility of the professionals who work in the care of these women. It is possible to observe different aspects that are related to alcohol consumption during pregnancy. Thus, the realization of an adequate screening, with clear exposition, convincing and coresponsabilização mother, is pointed out as a facilitator for the reduction of statistics.

From the reports analyzed it can be seen that the consumption of alcohol during pregnancy occurs more frequently in unmarried women, low-income, low education, low socioeconomic status and unplanned pregnancy. 3,5,13,14 Other factors such as young age, not cohabiting with a partner, cohabiting with consumers of alcohol, smoking, illicit drug use, late onset of prenatal care and fewer prenatal consultations are associated also with alcohol consumption by pregnant women. 16,19

Antagonistically, low parity, access to education, religiosity, fellow non-alcohol user and proper nutrition are protective mechanisms to alcohol use by pregnant women, with a result in the prevention of Fetal Alcohol Syndrome. 16

Feelings of pleasure and social inclusion are related to alcohol use during pregnancy. Thus, women, especially, adolescents typically start alcohol intake due to a combination of individual aspects of vulnerability and exposure through these groups of friends. 13

Usually pregnant women are encouraged by your associates with alcohol consumption. In young adults this habit is often stimulated by sociocultural pressure, being related to festivities, recreation and social gatherings. Your offer or stimulation often much from peers as well as family. 7

Other studies have also revealed a high prevalence related to recreational reasons (parties and celebrations with family, friends and colleagues). Participation in festivals and celebrations was the motivational factor found by pregnant women to engage in the consumption of alcoholic beverages during pregnancy. This practice is predominantly social and drinking alcohol acts as a stimulus to social interactions and strengthens solidarity and identification coletiva. 13

Marital status was unstable motivating factor for the use and abuse of alcohol. In the literature, there is a significant association between alcoholism and instability in the relationship, and may be the consumption by these women two times higher than among married women. 5

In this context, it is noteworthy that during gestation is considered higher risk for psychiatric disorders, taking into account the pregnant woman that stage goes through several changes of physical, hormonal, psychological and social. The most studied emotional disorders are depression and anxiety, the physician must be aware that these pregnant women are more susceptible to nutritional problems, sleep, hygiene, suicidal behavior and often alcohol consumption is associated with these features. 4,15,17

It is of great importance to assess psychiatric symptoms and alcohol consumption in pregnant women, as both can be associated causing damage to the health of the mother and fetus. Thus, the only way to prevent fetal alcohol teratogenicity is to guide the pregnant woman and harmful use for you and your child, making it resilient to alcohol consumption, ie, able to overcome a critical situation and reconstitute themselves.

Thus, practitioners should be aware of predisposing factors to alcohol use during pregnancy. Perform daily actions of health promotion and disease prevention through a crawl safe, effective counseling and a safe conduct.

CONCLUSION

The study enabled the construction of a synthesis of scientific knowledge about the use / abuse of alcohol by pregnant women. From this review it was possible to demonstrate the diversity of factors related to this action and its consequences.
The highest concentration was found in the scientific work of the multidisciplinary team in prenatal care. This fact may be related to the approach between the constant in question and the professional practices. In contrast, we felt a lack of studies that address the everyday actions developed by the teams during the tour.

One can observe the low quantity of scientific production of nursing on the association between alcohol use and pregnancy, despite this professional also be responsible for assisting pregnant women, and have a theoretical and practical knowledge that allows to develop new studies.

The need for multidisciplinary is inherent in the prevention and counseling, as a fundamental tool for achieving comprehensive care. It was evident, therefore, the need for training and awareness of professionals working in prenatal care on the importance of the topic and the focus of attention being focused on the tracking of potential hazards.

In this sense it is necessary to reevaluate the actions taken and the inclusion of screening instruments during the consultation, as well as improve communication between staff.

The study showed that the consumption of alcohol during pregnancy can harm not only the health of the mother but also can cause many health problems in newborns, and may interfere with the development of the child. Therefore actions of health education and prevention are key.

This fact can be considered one of the major public health problems related to alcohol use during pregnancy, since this issue affects the exercise of normal life, affecting particularly the lives of those who still cannot answer for themselves, the newly born, that has no choice and presents the attitudes of the mother hostage.

It can be seen that despite the importance of this topic, nursing has produced little about alcoholism, especially women. In this sense, it is clear that addressing questions about alcohol consumption during pregnancy has been a difficult task for health professionals, is the lack of professional training or lack of establishment of routines and reliable tools that assist health professionals in the actions taken and the inclusion of screening instruments during the consultation, as well as improve communication between staff.

Therefore it is necessary to lead in developing the educational work aimed at women who do not use or alcohol during pregnancy.

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