
Proceedings

Alcohol consumption: Prevalence, its predictors and knowledge of its harmful effects among pregnant women in Niger Delta, Nigeria

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Stella F Usifoh*, Isabel N Aika, Oghenemine N Oguogu, Valentine U Odili

Departments of Clinical Pharmacy and Pharmacy Practice, Faculty of Pharmacy, University of Benin, PMB 1154, Benin City, 300001, Nigeria.

* For correspondence: *Email: sfusifoh@uniben.edu. Tel: +2348025600615*

Abstract

Purpose: This study determines the prevalence of alcohol consumption in pregnancy and its predictors, and knowledge of its harmful effects among the women of the Niger Delta area of Nigeria.

Methods: A cross-sectional study of pregnant women was conducted. Their demographics, reasons for consumption of alcohol before and after pregnancy, knowledge of its harmful fetal effects of were assessed.

Results: More than half (75%) of respondents took alcohol before pregnancy, while 29.3% of respondents took alcohol during pregnancy. Reasons for consumption during pregnancy were to prevent spitting, nausea and vomiting 47 (7.8%), twenty-four (4%) of the respondents believed alcohol makes the

baby small for delivery, while 34 (5.6%) believed it makes them strong for daily activities. More than half of the participants (55.7%) were unaware of the harmful effects of alcohol, with only 22 (3.6%) were aware of fetal alcohol syndrome.

Conclusion: Prevalence of alcohol is high and is more in Delta than Edo State. Many of the pregnant women are unaware of the detrimental effects of alcohol to fetus especially fetal alcohol syndrome. There is need for educational campaigns on abstinence of alcohol among women of child-bearing age.

Keywords: Alcohol consumption, pregnancy, Fetal alcohol syndrome, harmful effects

Indexing: Index Copernicus, African Index Medicus

Background

Alcohol consumption during pregnancy is a burden to public health as it is linked to harmful effects on the fetus irrespective of the quantity and frequency of use. The common visible effect of alcohol use is fetal alcohol syndrome [1].

Aim/Objectives

This was to determine the prevalence of alcohol consumption in pregnancy, its predictors and knowledge of its harmful effects.

Materials and Methods

A cross-sectional study of 600 pregnant women in some communities in Edo and Delta States of

Nigeria was conducted. Administrative approval from the facilities and participant's informed consent was received. The study was conducted using interviewer structured questionnaires. Questions included both closed and open-ended questions which focused on various sub-themes; socio-demographic section, maternal characteristics, knowledge and use of alcohol, alcohol intake by mothers before pregnancy, lifestyle factors of mother, knowledge of the effect of maternal alcohol consumption and maternal alcohol use with drugs. Data collected were sorted, coded and analyzed using SPSS version 21 for descriptive statistics.

Results

Of the 600 respondents, 42% were within 21-29 years, most were married (90%) and 46.1% had tertiary education. More than half (75%) of respondents took alcohol before pregnancy, while 29.3% of respondents took alcohol during pregnancy. Factors affecting alcohol consumption during pregnancy are pre-pregnancy drinking, local production of alcohol, and low level of education. More than half of the respondents (55.7%) are unaware of the harmful effects of alcohol, with only 3.6% respondents aware of fetal alcohol syndrome.

Table 1 depicts maternal use of alcohol during pregnancy and factors associated with use. One hundred and seven six (29.3%) of all respondents have taken alcohol during their present pregnancy. Of the 176 respondents that took alcohol in their current pregnancy, 26.7% of them reported to control nausea and vomiting,

while 25.5% used it to make their babies smart. The proportion of those who used alcohol for these reasons is more among the pregnant women from Delta State. The prevalence is higher than global prevalence of 10%, 12.2% in Cameroun, 14.8% in Sierra Leone, 5.7% in Bostwana, 10.2% in the United States, and 13.3% in Canada [2,3].

The pregnant women in Delta State a riverine area used alcohol more is similar to study conducted in similar terrain of Bayelsa State where more than 90% of the study population engaged in harmful drinking. Religious and cultural acceptance also influences drinking of alcohol. The use of herbal preparations containing alcohol which serve either as preservatives, vehicle or for cultural/perceived benefits is widespread among pregnant women even among those attending antenatal clinics [4,5].

Table 1: Factors affecting use of alcohol in pregnancy (Total N=600)

Variables	Edo State N (%)	Delta State N (%)	Total N (%)
Do/did you experience morning sickness?			
Yes	139(46.3)	148(49.3)	287(47.8)
No	161(53.7)	152(50.7)	313(52.2)
Do you drink alcohol during this pregnancy?			
Yes	57 (20)	119 (42.2)	176(29.3)
No	228 (80)	173 (58.8)	401(66.8)
What is your reason for consuming alcohol?			
To make the baby smart	14(12.1)	31(16.7)	45(7.5)
For pleasure	17(14.6)	14(7.5)	31(5.1)
To make the baby small for easy delivery	23(23.3)	11(5.9)	24(4.0)
To stop the spitting, vomiting and nausea you feel	12(10.3)	35(18.9)	47(7.8)
To make yourself strong for daily activities	9(7.7)	25(13.5)	34(5.6)

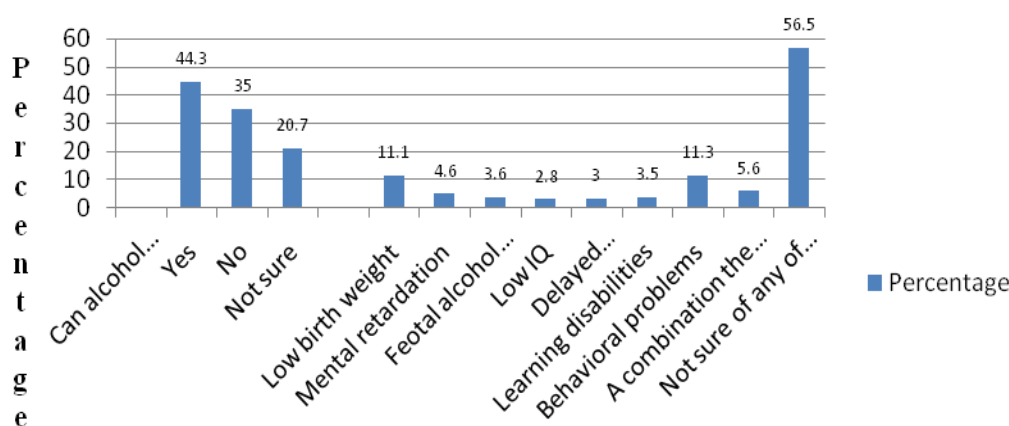


Figure 1: Knowledge of health effects of alcohol consumption during pregnancy

More than half of the respondents were not aware of the harmful effects of alcohol on the foetus, among those who knew that alcohol

could be damaging, only 3.6% were aware that alcohol causes fetal alcohol syndrome as shown in Figure 1. This is quite alarming as alcohol is

the most common teratogen, and fetal alcohol syndrome is the most evident adverse outcome from its consumption [6]. It is necessary to create awareness in women especially those of child bearing age of the harm associated with alcohol consumption, this action will help to promote the health and quality of life of infants born and even into their adult lives. Abstinence should be encouraged among these women as it is been recommended by policy makers in some countries [4,7,8].

Conclusion

Prevalence of alcohol consumption is high and is more in Delta State than in Edo State. There is need for educational campaigns on abstinence of alcohol among women of child-bearing age.

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