Syndrome Specific Medical health check guide - Fetal Alcohol Syndrome (FAS)

Introduction
Fetal Alcohol Syndrome (FAS) is a preventable cause of Learning Disability (LD) and refers to the range of difficulties and disabilities seen in the children of women who drank while pregnant. The face appearances can include short eye openings (palpebral fissures), short nose, sunken nasal bridge, flattening of the cheekbones and midface, smoothing and elongation of the vertical groove (the philtrum) between the nose and lips, and smooth, thin upper lip.

The diagnosis is made when some of the facial appearances are present with either growth retardation, decreased birth cranial size, structural brain abnormalities or neurological examination abnormalities including poor tandem gait, neurosensory loss, impaired fine motor skills or poor eye-hand co-ordination.

History
People with FAS may have:

- impulsive behaviour and not being able to control impulses
- hyperactivity
- challenging behaviour
- difficulty paying attention
- memory problems
- difficulty understanding concepts such as time, money and maths
- speech and language delay.

Check if person has had:

- any cardiac defects corrected and what follow-up is required (atrial and ventricular septal defects, Tetralogy of Fallot or aberrant great vessels)
- any renal problems (aplastic, dysplastic or hypoplastic kidneys, horse shoe kidneys or hydronephrosis)
- any ophthalmic or auditory problems.
Examination

☐ Regular eye-check for refractive problems and strabismus (Should see Optician every 2 years)
☐ May have conductive and sensorineural deafness. Check hearing annually (History, Whisper test, Otoscopy), and refer for Audiology assessment if there are doubts about adequate hearing.
☐ Renal problems:
  • Blood pressure
  • Blood for U&Es (HOW OFTEN?)
  • Urine for dipstick and Albumin-Creatinine ratio