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FASD prevention in Russia: a case for the Global Health Diplomacy

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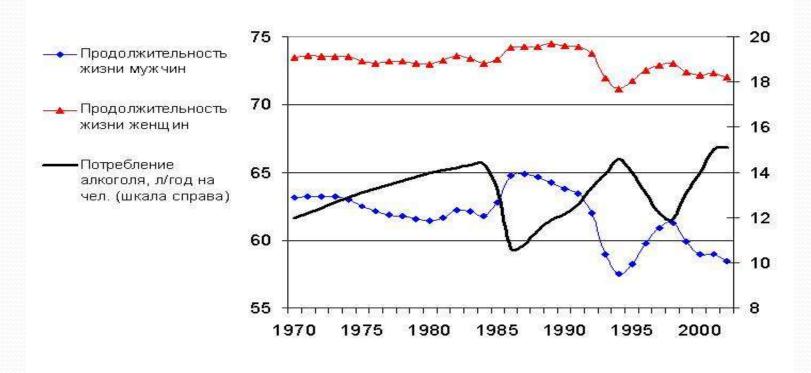
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Outline

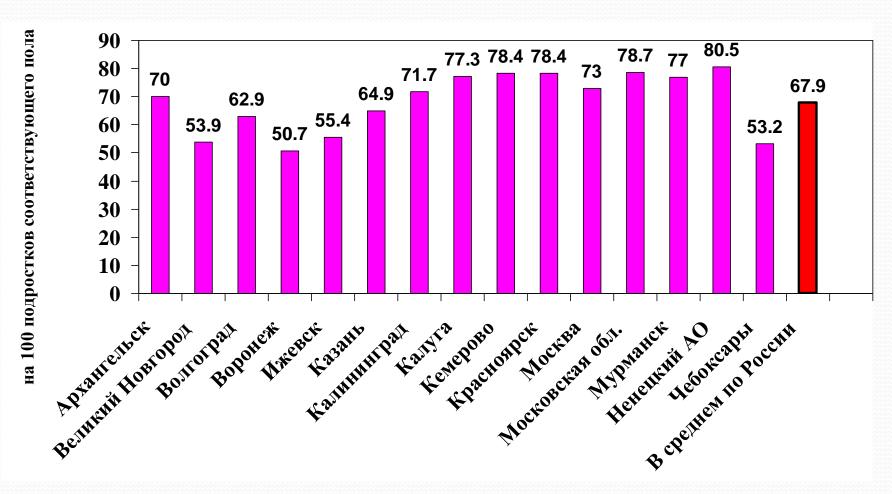
- Alcohol the new state controlled initiatives and life expectancy rise in Russia
- FAS/FASD collaboration
- Coordination Committee at CNIIOIZ
- International Collaboration
- Future developments & Global Health Diplomacy

Life expectancy and alcohol consumption (A.V. Nemtsov)

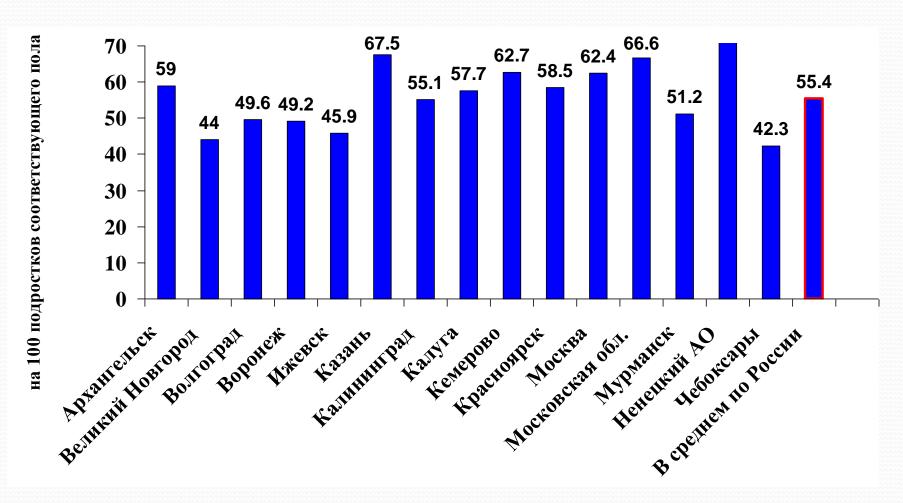
Продолжительность жизни женщин и мужчин и потребление алкоголя в России (Госкомстат 2006; Немцов 2003)



Уровень распространенности алкоголизации среди девочек - школьниц 9-11 классов в обследованных городах в 2011 г. (Профессор Е.С. Скворцова)



Уровень распространенности алкоголизации среди мальчиков - школьников 9-11 классов в обследованных городах в 2011 г. (Е.С. Скворцова)



Fallacies of the modern Russian woman:

- High quality alcohol is good for your health (no harm)
- Small amounts of alcohol are not harmful
- Little vine or bier are good for your nervs and asleep for your unborn baby, specially in the last trimester
- My Mother/ Grandmother/girlfriend/next door neighbor was drinking and has normal children
- All are drinking and delivering well babies
- The fetus damaged by alcohol will end in spontaneous abortion, alive fetus is normal
- FAS/FASD = the child born drunk.

Origin of the current developments in FASD prevention in Russia

- In the Russian Federation, researchers from St Petersburg State University and Nizhny Novgorod State Pedagogical University have been working from 2003 to 2013 on a project to prevent women from drinking during pregnancy.
- This research was in collaboration with the University of Oklahoma Health Sciences Center and funded by the US National Institutes of Health and Centers for Disease Control and Prevention.
- The project is over, there is no implementation grant.

Project Team leaded by Tatiana Balachova



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Data Collectors in St. Petersburg and Nizhniy Novgorod



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International Collaboration

US – Professor Kenneth Warren & team,
 Tatiana Balachova, professor Philip May

France:

- Dr. Thanh Le Luong Director General of INPES,
- Marie Kerle of French Embassy,
- Dr. Denis Lamblin PresidentSAF France
- «MSM»,

Canada: Dr. Lana Popova (CAMH),

Professor Egon Johnsson

Europe: Diane Black,

WHO - Pozniak



The Coordination Committee on Alcohol harm and FASD prevention (CC), Moscow

- Established in 2011
- Leaded by Professor V.I, Starodubov, Director of the Federal State Research Institute for Information and Management in Public Health CNIIOIZ, (under the MOH RF).
- United researchers and practitioners in developing National program for the alcohol harm and FASD prevention and related actions.
- International, transparent, voluntary
- http://www.mednet.ru/en/koordinaczionnyj-sovet-poprofilaktike-vreda-zdorovyu-ot-alkogolya-i-fetalnogoalkogolnogo-sindroma.html











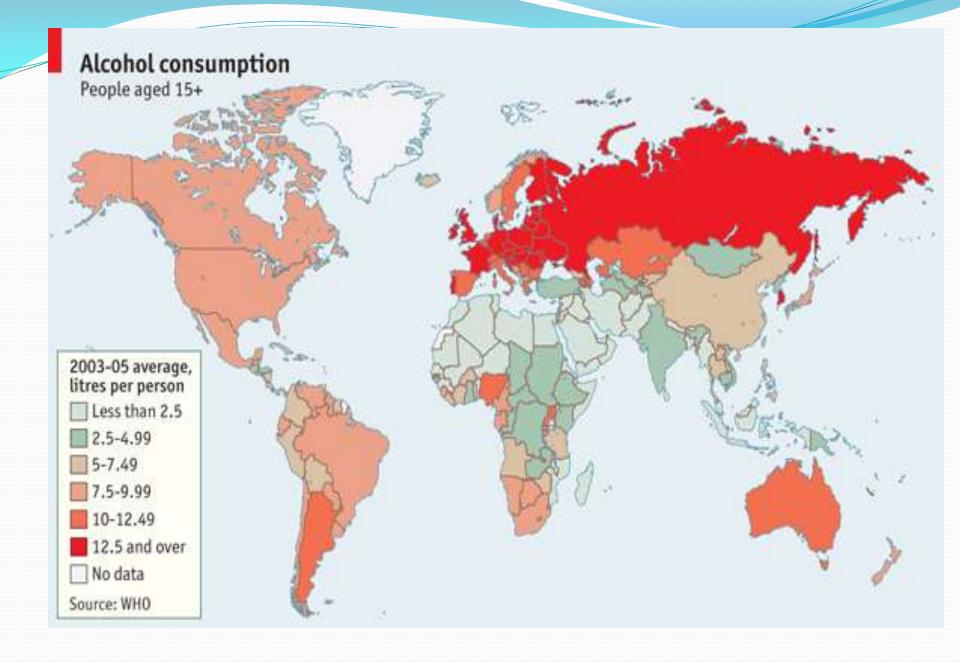
Challenges & Opportunities

The project is over

- Institutionalize the results of the project through
 - Making Health System to "adopt" FASD
 - Raising professional and public awareness
 - Education for OBGYNs, pediatricians, psychiatrists, psychologists
 - Involvement of social workers, teachers, care givers
 - Work with the parents and children with FASD

There is a strong competition for the modest budget money

"FASD is not a priority for Russia" – an official opinion?



Project





- Alcohol consumption, FASD knowledge, attitudes, and receptivity to prevention approaches were assessed
- Evidence-based training for physicians has been developed and evaluated
- Clinical trial to test the prevention model is being conducted currently in St. Petersburg and the Nizhniy Novgorod Region, Russia



Results: alcohol consumption by women

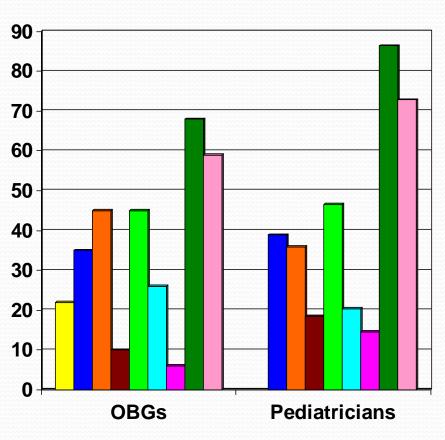


- 95.6% nonpregnant women reported any alcohol use
- 62.2% reported consuming ≥ 4 drinks on at least one occasion ("How often do you have 4 or more drinks on one occasion?")
 - including 31.5% binge once a month or more
- pregnant women reduced alcohol consumption significantly
 - however 20% reported continuing alcohol use
 - including 3% binge drinking (6% in SPB and o% in the NNR)

Risk for alcohol-exposed pregnancies (AEP)

- 73% of non-pregnant women reported one or more unprotected sex in the last 6 months (might get pregnant)
 - 92.3% of might get pregnant reported any alcohol use
 - 64.2% of might get pregnant reported consuming ≥ 4 drinks on at least one occasion ("How often do you have 4 or more drinks on one occasion?")
 - Including 32.9% binge once a month or more
- 34.7% of non-pregnant women reported <u>trying to get pregnant</u>
 - 88.3% of trying to get pregnant reported alcohol use
 - 55.7% of trying to get pregnant reported consuming ≥ 4 drinks on at least one occasion ("How often do you have 4 or more drinks on one occasion?")
 - Including 20.9% binge once a month or more

Phase I: survey of physicians



- ☐ Always ask non-pregnant about drinking
- Always ask pregnant about drinking(OBG)/Always ask mothers of infants (Peds)
- Occasional alcohol consumption is safe in one of trimesters
- FAS baby is born with certain birth defects
- FAS baby is born drunk
- FAS baby is born addicted to alcohol
- Acknowledged the lifetime persistence of FAS
- Agreed that lowered IQ/mental retard. are associated with drinking during pregnancy
- Advocate complete abstinence for pregnant



Medical professionals respond to another survey on an effectiveness of the primary prevention, selected regions of Russia, 2011

- 23% consider the primary prevention to be effective in improving population health
- 71% are not sure that it is effective
- 6% do not consider it as an effective measure for the population health
- We need to change knowledge, behavior and attitude towards primary prevention effectiveness, tools etc.

Project results for the doctors

- Evidence-based FASD training curricula for Russian health professionals has been developed
- Physicians who received training on FAS had
 - significantly improved knowledge about the effects of alcohol use
 - significantly less acceptance of any alcohol use during pregnancy than physicians who did not participate in training
- Pediatricians who received training had
 - significantly higher competency in FAS screening and diagnosis than pediatricians who did not receive training
- OBGs who received training had significantly higher
 - competency in FASD
 - brief intervention skills

Why this project leaded us?

- Showed visible success in the taboo area of alcohol prevention in Russia
- * Rigorous designs (randomization, representation, validation at each stage)
- Translation: modification and cultural adaptation
- Education modules for doctors
- * Preconception women, pregnant, and professionals targeted

Our development (1)

- Years of study of preventable and avoidable Years of Potential Life Lost from alcohol in the regions of the RF
- Success of the Russian-French collaboration in developing of the demographic policies (A. Vishnevsky and Jacques Valin)
- Tatiana Balachova's project results
- NIAAA NIH US seminar (8 april, 2011)
- «MSD», French Embassy in Moscow, INPES, SAF France
- WHO Minsk (WHO NIAAA project)
- Canada
- Elena + EVA our first mother adopted child with FAS
- 9th special orphanage
- Women after prison

Our development (2)

- Research & Publications
 - On consumption (A. Nemtsov)
 - On genetics (Professor S. Borinskaya)
 - On behavioral aspects (A. Yaltonskaya)
 - OBGYN education (G. Dikke)
 - Health Policy (E. Varavikova)
 - Children with FAS (O. Semenova).

Practice: 4 regions of Russia – implementation project

- Plan for publication of the "Golden "brick" of knowledge" on FAS/FASD research and prevention.
- International FAS Awareness Day (9th of September)

What are the challenges?

The size of the problem of FASD burden is unknown

- There is no responsible party for FASD prevention, treatment and support
- The role of MOHSD and leading research institutions is still unidentified
- Professional Associations of OBGYNs, Psychologists, Public Health specialists do not have FASD on the agenda, there are no standards
- However, CC have developed, approved and published recommendations for OBGYNs
- Two Schools for FAS prevention organized with MSD, FA and INPES, France
- There is a FASD group of patients and parents being developed (Eva)
- Cite on mednet.ru is developed
- There are no financial resources for all of the above

WHA 66.8 Draft COMPREHENSIVE GLOBAL MONITORING FRAMEWORK FOR NCD, INCLUDING A SET OF INDICATORS

- Harmful use of alcohol: Total (recorded and unrecorded) alcohol per capita (15+ years old)
- consumption within a calendar year in litres of pure alcohol, as appropriate, withinthe national context.
- Harmful use of alcohol: Age-standardized prevalence of heavy episodic drinking among adolescents
- and adults, as appropriate, within the national context.
- Harmful use of alcohol: Alcohol-related morbidity and mortality among adolescents and adults, as
- appropriate, within the national context.

NIAAA NIH Financing R&D

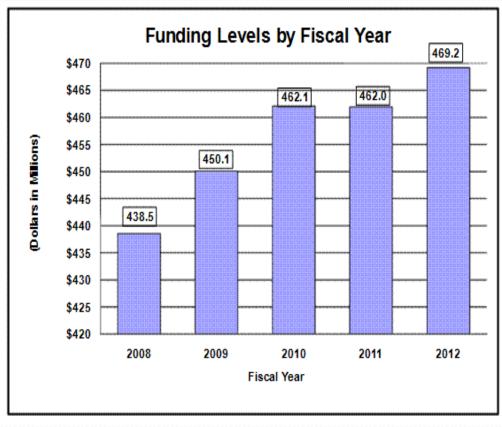
Embryo and Fetus:

The FY 2012 budget estimate for this program is \$20.507 million,

an increase of \$241.0 thousand 1.2 % over 2010 level.

As a result, there is increasing recognition globally of the occurrence and devastating impact of fetal alcohol spectrum disorders





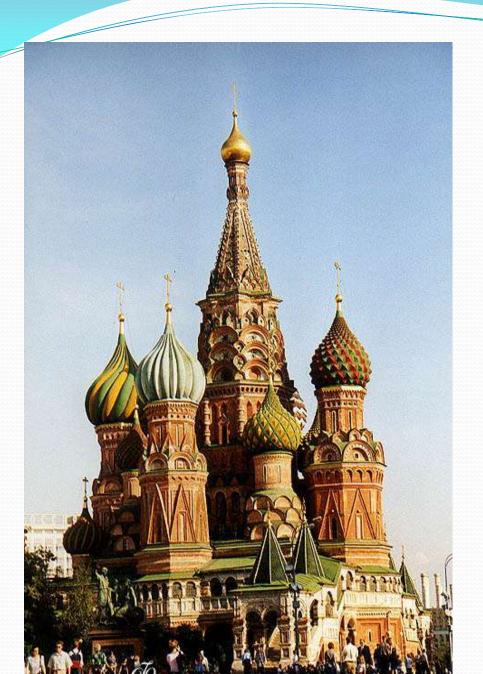
Conclusions

P.May: "If we don't actively seek FASD cases, we won't find the majority of them, especially:

- The old "iceberg" conception holds true."
- "Prenatal alcohol exposure may well be the leading cause of mental deficiency in many societies."

Russia is in Need for:

- the International Diagnostic Guidelines
- Prevalence studies, active evaluation of the school children
- International Policies
- WHO platform
- Study effectiveness of prevention
- Models for prevention and FASD patient/family treatment involving Medical/Social/ Educational systems
- Collaborative studies



- THANK YOU
- SEE YOU IN MOSCOW
- Http://netfas.net

Coordination
 Commeettee on FASD

