



Early Learning Digest

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FASD Prevention

Fetal alcohol spectrum disorders (FASD) are a group of conditions that can occur in a person whose mother drank alcohol during pregnancy. These effects can include physical problems and problems with behavior and learning. Each year in the U.S., an estimated 40,000 babies are born with an FASD.

There are many myths about drinking alcohol during pregnancy. Here are a few of the common ones:

MYTH: It is OK to drink alcohol towards the end of pregnancy.

FACT: Alcohol can harm a baby at any time during pregnancy. Drinking alcohol can cause problems in how your child grows, learns, looks, and acts.

MYTH: Only women with drinking problems have babies with FASD.

FACT: Any alcohol can cause damage to your developing baby. Over 50% of pregnancies are unplanned. Many women are 2-3 months along before they know they are expecting, and may drink alcohol when they are unaware that they are pregnant.

MYTH: Your baby will outgrow any problems caused by drinking during pregnancy.

FACT: The damage caused by prenatal alcohol exposure is permanent and lasts a lifetime.



FASDs are 100% preventable. If a woman doesn't drink alcohol while she is pregnant, her child cannot have an FASD.

If your child was exposed to alcohol during pregnancy, there is help and hope. This is called a "spectrum" disorder because some children may have only mild symptoms, while others may be more severely affected. Learning disabilities and behavior problems will be unique to each child.

For more information about FASD, visit the MN Organization on Fetal Alcohol Syndrome (MOFAS) at www.mofas.org or view the recorded webinar, "FASD Prevention," at <http://www.workingfam.org/video/ww-clark-0404>.

Source: "Busting the Myths about Drinking Alcohol During Pregnancy," Minnesota Organization on Fetal Alcohol Syndrome (MOFAS), 2010.

Infant Reflux

Infant reflux occurs when a baby spits up the contents of their stomach, usually shortly after feeding. Diagnosis of infant reflux is typically based on a baby's symptoms and a physical exam. If your baby is healthy, growing as expected and seems content, then further testing usually isn't needed.

Most cases of infant reflux clear up on their own, helped by simple changes in feeding techniques.

To minimize reflux, consider these tips:

Keep baby upright. Feed your baby in an upright position, and hold your baby in a sitting position for 30 minutes afterward. Be careful not to jostle or jiggle your baby while the food is settling.

Offer smaller, more frequent feedings. Feed your baby slightly less than usual if you're bottle-feeding or cut back a little on the amount of nursing time if you're breast-feeding.

Take time to burp your baby. Interrupting feedings to burp your baby can be an effective way to prevent air bubbles from building up in your baby's stomach. Avoid burping your baby over your shoulder, which puts pressure on your baby's abdomen. Put baby to sleep on his or her back. Most babies should be placed on their backs to sleep, even if they don't have reflux.

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Infant Reflux

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Test to see if reflux is caused by an allergy. Some babies are allergic to the protein in cow's milk. You might try eliminating dairy products or beef from your diet if you're breast-feeding. If you feed your baby formula, sometimes switching types can help.

Spitting up becomes less common as a baby gets older, and as long as your baby is healthy, content and growing well, the reflux is not a cause for concern.

Source: <http://www.mayoclinic.com/health/infant-acid-reflux/DS00787/METHOD=print&DSECTION=all>.

Test your knowledge: Biking with Kids

- T F A baby or young child in a carrier attached to an adult's bike is at risk for serious injury, even if wearing a helmet.
- T F Children younger than 1 year can ride safely in a safety seat mounted on a bicycle.
- T F A shoulder harness and a high back are important features in a bicycle trailer for kids.

Answers: 1) T, 2) F, 3) T

Keep Kids Safe on Tricycles

Tricycles rank high on a preschooler's list of favorite playthings but are also among the most hazardous, according to the U.S. Consumer Product Safety Commission (CSPC).

To help ensure safe play, the CSPC makes these recommendations:

- Purchase a tricycle when your child has the basic coordination to ride it appropriately. Usually, this is around age 3.
- Match the child to the size of the tricycle. If the child is too large, the trike will be unstable. If the child is too small, he/she may not be able to control a large trike.
- Consider low-slung tricycles (with seats close to the ground) and those with widely spaced wheels that offer more stability.
- Look for tricycles with pedals and handgrips that have textured surfaces to prevent hands and feet from slipping.
- Enforce a consistent helmet rule with even young children when they are riding anything with wheels. A great rule is: "If you don't wear it, you don't ride it."



- Make sure bike helmets fit properly. Choose according to the circumference of your child's head just above the brow line, not the age recommendation from the manufacturer. Make sure the helmet is snug, allows for good vision, and doesn't move from side to side with head movement.
- Watch children closely when riding, and keep them away from cars, pools, or other hazards.

Sources: <http://children.webmd.com/bicycle-and-tricycle-safety-for-young-children> and <http://www.helmets.org/ageguide.htm>.



If you have concerns about your child's growth and development, please talk to your child's health care provider or call 1-866-693-GROW (4769), to talk to a professional and find out how you can get connected with various resources in Minnesota.

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