

Sex, alcohol and the COVID-19 pandemic by Dr Jonathan Sher

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An unexpected topic was raised at a late March coronavirus press conference. A journalist asked about the Scottish Government's advice on becoming pregnant during this pandemic, since it 'could last a very long time . . . and people will be staying home with not a lot to do'.

It was a rare moment of levity. The First Minister, amid the chuckling, said she would "hand it over to the obstetrician in the room". That obstetrician was Dr Catherine Calderwood – until recently, Scotland's Chief Medical Officer.

She noted that "This has occurred to me! And, we do need to be advising people. The labour ward is always much busier nine months after Valentine's Day."

She continued: "People are making difficult choices. It has been suggested that we need to talk to people about contraception and really thinking about the fact that 50 per cent of all pregnancies are unplanned. Would this be the right time to have an unplanned pregnancy? We would always encourage people to think on their own health: 'Am I in good health? Is this the right time for me to have a baby?'"

In this strange and trying time when both lives and livelihoods are being lost – and the threats to our individual and collective wellbeing remain severe – no one would argue that contraception, family planning and preconception health are top priorities.

However, these matters are not inconsequential, even during a pandemic. In Scotland, there is another part of this story that increases the need to offer accurate information, clear advice and practical support. Unintended pregnancy is a concern, but the risks of an unwelcome outcome are elevated by the well-kent combination of alcohol and sex.

Alcohol sales have spiked during the past month. It has long been acknowledged that Scotland has an 'unhealthy relationship with alcohol'. Too much drinking carries with it heavy personal, economic, health and societal costs. The combination of being home-bound, feeling extraordinary stress or fear, as well as the cultural tendency to turn to both sex and alcohol for comfort and relief makes increasingly risky behaviour a near certainty.

One example of predictable 'collateral damage' from the current pandemic will be a significant rise in the cases of Fetal Alcohol Spectrum Disorders (FASD) across Scotland.

Alcohol exposure in utero is the world's leading cause of neurodevelopmental (brain and nervous system) damage, learning disabilities and behavioural problems. FASD cannot be cured, reversed or outgrown, as it permanently compromises lives and life chances, e.g. by school failure, substance abuse, as well as being troubled and in trouble.

In fact, FASD is invisible in 90 per cent of the people affected and can be difficult to confirm, which means it is often misdiagnosed or simply overlooked – for instance, while the Scottish Government estimates that approximately 172,000 children, young and adults across Scotland are currently affected, there are between 500 and 1,000 undiagnosed FASD cases for every one officially confirmed.

There is no risk-free time during pregnancy, no safe type of alcohol or risk-free amount - which is why all four UK Chief Medical Officers advise that no alcohol should be consumed during pregnancy or if likely to conceive (including in the weeks/months before pregnancy is confirmed). Yet FASD is preventable in either of two ways: by not drinking during pregnancy - or by not getting pregnant while continuing to drink.

Is anything being said - or, better still, being done - to help prevent this specific 'collateral damage'? Since most people are riveted on new information about what can be done to avoid harm during this pandemic, there is a great opportunity in this moment to prevent FASD.

While abstinence from alcohol and/or sex would work in theory, it is not going to happen in practice. However, it is perfectly sensible to offer both men and women compelling contraception advice and to provide contraceptives more widely, even during a lockdown. After all, both women and men are involved in conception.

As long as the combination of more alcohol and more sex do not result in more pregnancies, there will be no significant increase in FASD cases next year. That would be a very welcome silver lining.

After decades 'below the radar' in Scotland, greater attention is now being accorded to Fetal Alcohol Spectrum Disorders. The Scottish Government has recently produced SIGN Guidance on identifying FASD; supported a new information service/helpline; and, employed a regional FASD team to have a national remit. It will also soon be launching an eLearning resource on FASD for health and social care professionals, as well as an initiative promoting preconception health, education, counselling and care. These are all positive and meaningful steps forward.

Right now, everyone's top priority is, and should be, reducing the spread of COVID-19 and caring for all the people who are profoundly harmed by this pandemic. Promoting safety and responding to immediate crises must always take precedence over longer term collateral damage.

And yet, however long this pandemic lasts - and however awful its eventual toll - we know it will end. By contrast, new cases of FASD will last decades longer and permanently compromise the lives and life chances of those affected. An even higher level of FASD caused during this crisis is an unintended consequence that should neither be accepted nor taken lightly.

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