



Information for **health professionals** on **assessing alcohol consumption in pregnancy using AUDIT-C**



To provide women with the information they need to know about alcohol consumption during pregnancy it is important to know how much a woman is drinking and how this has changed since she found out that she is pregnant. This assessment of alcohol consumption, combined with education and support, can assist women to stop or reduce alcohol use in pregnancy and prevent adverse consequences from alcohol consumption such as Fetal Alcohol Spectrum Disorder.¹

One way to assess a woman's alcohol consumption is by using the AUDIT-C (Alcohol Use Disorders Identification Test – Consumption). This tool has three short questions that estimate alcohol consumption in a standard, meaningful and non-judgemental manner. The total score from these questions provides an indication of the risks to the woman's health and can be used to guide conversations about alcohol and pregnancy. However it is safest for pregnant women not to consume any alcohol during pregnancy.

The AUDIT-C is a shortened version of the 10-item AUDIT tool, first developed by the World Health Organization in 1989. AUDIT-C has been validated for use with pregnant women² and is recommended for use by an Australian study that examined what questions should be asked about alcohol consumption and pregnancy.³

AUDIT-C questions

The three AUDIT-C questions that measure the amount and frequency of a person's drinking are included below. Add the scores for each question to get a total score and match the score to the risk of harm overleaf.

| Questions | Scoring system | | | | | Score |
|------------------------------------------------------------------------------------------|----------------|-------------------|-----------------------|----------------------|-----------------------|-------|
| | 0 | 1 | 2 | 3 | 4 | |
| How often do you have a drink containing alcohol? | Never | Monthly or less | 2 – 4 times per month | 2 – 3 times per week | 4+ times per week | |
| How many standard drinks of alcohol do you drink on a typical day when you are drinking? | 1 – 2 | 3 – 4 | 5 – 6 | 7 – 9 | 10+ | |
| How often do you have 5 or more drinks on one occasion? | Never | Less than monthly | Monthly | Weekly | Daily or almost daily | |

Australian standard drinks

Standard drinks are a measure of alcohol consumption and are used in the AUDIT-C questions. It is more reliable to count standard drinks than to count glasses or bottles or cans as alcohol is served in many different containers. The Australian standard drink measure contains 10grams of alcohol (equivalent to 12.5mls of pure alcohol).⁴ For example:

- 100ml glass of red wine at 13% alc vol = 1 standard drink.
- 100ml glass of white wine at 11.5% alc vol = 0.9 of a standard drink.
- 375ml bottle or can of full strength beer at 4.8% alc vol = 1.4 standard drinks.
- 30ml nip of high strength spirit at 40% alc vol = 1 standard drink.
- 330ml bottle of full strength ready-to-drink 5% acl vol = 1.2 standard drinks.⁵

Many Australian women aren't aware of what a standard drink is so it is a good idea to have a chart that demonstrates this. Download these at: <http://www.nhmrc.gov.au/your-health/alcohol-guidelines>

Information and guidance for pregnant women following the AUDIT-C

The best advice for all women, regardless of whether or not they drink alcohol is that:

- No alcohol is the safest choice when pregnant or trying to get pregnant.
- No safe level of alcohol consumption during pregnancy has been determined.⁴

This advice is consistent with the National Health and Medical Research Council's *Australian Guidelines to Reduce Health Risks from Drinking Alcohol*.

Feedback should be provided to the woman based on the total AUDIT-C score (out of 12).

| AUDIT-C Score | Advice to be given* |
|---------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 0 = no risk of harm | <ul style="list-style-type: none"> • Provide positive reinforcement and encourage her to continue not to drink any alcohol during pregnancy. • A score of zero indicates no risk of alcohol-related harm to the fetus. • Advise her that the safest option is not to drink any alcohol during pregnancy. • Advise that the risk of harm to the developing fetus increases with increasing amounts and frequency of alcohol consumption and that any score above zero indicates potential risk to the fetus. |
| 1-2 = low risk of harm | <ul style="list-style-type: none"> • Advise her that the risk to the fetus is likely to be low but the safest option is not to drink any alcohol during pregnancy. • Advise that the risk of harm to the developing fetus increases with increasing amounts and frequency of alcohol consumption and that any score above zero indicates potential risk to the fetus. • Encourage her to stop drinking alcohol altogether during pregnancy and arrange a follow-up session if required. |
| 3-4 = medium risk of harm | <ul style="list-style-type: none"> • Advise her that the safest option is not to drink alcohol during pregnancy. • Discuss that the AUDIT-C score indicates that she is drinking at a level of increasing risk for her health • Advise that the risk of harm to the developing fetus increases with increasing amounts and frequency of alcohol consumption. • Discuss the effects of current alcohol consumption levels and outline health concerns for both the woman and her baby. • Reinforce the benefits of stopping drinking at any stage during her pregnancy to minimise further risk to herself and her baby. • Ask her how she feels about stopping drinking or cutting down and establish: <ul style="list-style-type: none"> – Positives and negatives of taking action – How confident she is in being able to stop or cut down – Tips, strategies and plans for taking action – If she would like assistance, including from support networks and partners – Offer to arrange referral if it is determined that she requires this • If you suspect that the woman may be alcohol dependent arrange to refer the woman to a specialist treatment service. |
| 5+ = high risk of harm | <ul style="list-style-type: none"> • Discuss that the AUDIT-C score indicates that she is drinking at a level of high risk for her health and high risk for the baby's health. • Discuss positives and negatives of taking action and determine what assistance she requires to be able to stop or cut down. • Refer to a specialist alcohol service as she may be at risk of alcohol dependence. Specialist support should be organised for her before advising her to stop or cut down her alcohol consumption, as without support alcohol withdrawal can be dangerous to both their health and the baby's health. |

* Advice has been adapted from the following resources: the Australian Government's Lifescripts 'Alcohol methodology card to help patients reduce health risks from alcohol';¹ the literature review of existing alcohol consumption in pregnancy measures as part of the 'Asking QUestions During Pregnancy' study;² Drug and Alcohol Office 'Promoting Healthy Women and Pregnancies resource for professionals'³ and AUDIT-C advice from *Alcohol and Pregnancy and Fetal Alcohol Spectrum Disorder: a Resource for Health Professionals*.⁸

About the Women Want to Know project

The *Women Want to Know* project was developed by the Foundation for Alcohol Research and Education (FARE) in collaboration with leading health professional bodies across Australia.

The *Women Want to Know* project is funded by the Australian Government Department of Health.

For more information on the *Women Want to Know* project visit www.alcohol.gov.au

Information on referral points to specialist services for each state and territory are available at www.alcohol.gov.au



¹ Change, G. (2004). Screening and brief intervention in prenatal care settings. *Alcohol Research and Health: the Journal of the National Institute on Alcohol Abuse and Alcoholism*, 28 Vol 2, 80-84.
² Dawson, D, Grant, B., Stinson, F. and Zhou, Y. (2005). Effectiveness of the derived Alcohol Use Disorder Identification Test (AUDIT-C) in screening for alcohol use disorders and risky drinking the US general population. *Alcohol Clinical and Experimental Research* Vol 29, No 5. Pp: 844-854.
³ Murdoch Children's Research Institute (2010). *Alcohol in Pregnancy: What questions should we be asking?* Report to the Commonwealth Department of Health and Ageing. AQUA Project (Asking QUestions about Alcohol in pregnancy), Victoria.
⁴ National Health and Medical Research Council (2009). *Australian Guidelines to Reduce Health Risks from Drinking Alcohol*. Commonwealth of Australia. Canberra.
⁵ Australian Government webpage: Standard drinks guide: <http://www.alcohol.gov.au/internet/alcohol/publishing.nsf/Content/drinksguide-ent>
⁶ Commonwealth Government Department of Health and Australian General Practice Network (2009) Lifescripts resources: Alcohol methodology card to help patient's reduce health risks from alcohol.
⁷ Drug and Alcohol Office (2013). *Strong Spirit Strong Future: promoting healthy women and pregnancies resource for professionals*. Drug and Alcohol Office, Perth, Western Australia
⁸ Alcohol and Pregnancy Project (2009). *Alcohol and Pregnancy and Fetal Alcohol Spectrum Disorder: a Resource for Health Professionals*. Telethon Institute for Child Health Research http://alcoholpregnancy.childhealthresearch.org.au/media/68501/2011_booklet_for_health_professionals.pdf