

Title:

Contributing Factors in the Successful Cessation of Drug and Alcohol Abuse in Dependent Mothers

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Rising Stars of Research and Scholarship Invited Student Posters

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Dependency, Neonatal abstinence syndrome and Pregnancy

References:

Centers for Disease Control and Prevention. (2016). Incidents of neonatal abstinence syndrome.

Retrieved from: <http://www.cdc.gov/mmwr/volumes/65/wr/mm6531a2.htm>

National Center for Biotechnology, U.S. National Library of Medicine. (2015). Maternal substance use and neonatal abstinence syndrome: A descriptive study. Retrieved from: <https://www.ncbi.nlm.nih.gov/pubmed/25656717>

Stanford Children's Health. (2016). Neonatal abstinence syndrome. Retrieved from: <http://www.stanfordchildrens.org/en/topic/default?id=neonatal-abstinence-syndrome-90-P02387>

WFYI Indianapolis. (2016). High rates of opioid-addicted babies born to high-risk moms. Retrieved from: <http://www.wfyi.org/news/articles/high-rates-of-opioid-addicted-babies-born-to-high-risk-moms>

Abstract Summary:

This presentation focuses on the factors influencing mothers of newborns to either continue or discontinue use of drugs or alcohol during pregnancy. The desired outcome is to better understand barriers to cessation in hopes that effective intervention might take place and neonatal abstinence syndrome rates might decrease.

Learning Activity:

LEARNING OBJECTIVES	EXPANDED CONTENT OUTLINE
Learners will acquire deeper knowledge and understanding of the contributing factors or barriers to successful cessation of drugs and alcohol for pregnant women as it relates to the current drug epidemic in Indiana and the increasing prevalence of neonatal abstinence syndrome.	This objective will be met through literature and study results presented in poster format, as well as through additional learning activities.
Learners will participate in a brief electronic survey which will test their current knowledge	In this case, the learner will use be asked a series of questions, evaluating current levels of

of NAS while also increasing their understanding of the syndrome.	understanding, with informative insight to follow each answer; expanding knowledge of current subject matter.
Learners are invited to engage in an interactive "solutions board" where they can contribute suggestions, skill sets and professional contacts towards the goal of NAS reduction.	After observing and receiving educational material, this activity will promote critical thinking and collaboration as learners work together in order to offer creative and innovative solutions.

Abstract Text:

Neonatal Abstinence Syndrome (NAS) is a condition which is becoming increasingly more prevalent in the United States (CDC, 2016). Astounding the national average, rural hospitals in Indiana continue to lead the pack in rates related to NAS in newborns. Although approximately three out of 1,000 babies may be born addicted to drugs or alcohol in the United States, that number is closer to one in five in Indiana (WFYI Indianapolis, 2016). Equally problematic is the fact that conclusive statistics on contributing factors in the successful cessation of drug and alcohol abuse in pregnant mothers is lacking (CDC, 2016).

The most frequent cause of neonatal abstinence syndrome in Indiana is opioid use during pregnancy (WFYI Indianapolis, 2016). Examples of prescription opioids include codeine and hydrocodone, morphine and oxycodone (March of Dimes, 2015). Sometimes the mother is receiving prescribed opiate replacement therapy such as methadone or suboxone, which have proven in many cases to produce equally concerning results (National Center for Biotechnology, U.S. National Library of Medicine, 2015). Alcohol, heroin, methamphetamine and other illicit drugs are also being abused during pregnancy. Antidepressants, benzodiazepines, (such as those used to treat insomnia), are sometimes prescribed to pregnant woman and can also lead to NAS.

Babies born with neonatal abstinence syndrome require extensive care in the neonatal intensive care unit (NICU). These newborns may suffer from symptoms such as tremors, tight muscle tone, seizures, excessive crying, hyperactive reflexes, difficulty feeding, dehydration, fever or unstable temperatures, sweating, vomiting and more (Stanford Children's Health, 2016). Additionally, Stanford Children's Health states these infants will be at higher risk for "poor intrauterine growth, premature birth, and birth defects" (Stanford Children's Health, 2016). Notably, one government study conducted in 2012 indicated that "Medicaid programs were financially responsible for approximately 80% of the estimated \$1.5 billion in NAS-related annual hospital charges, (Centers for Disease Control and Prevention, 2016).

As drug and alcohol addictions are escalating, identifying barriers for pregnant women who use these substances could potentially save many lives. Additional research needs to be conducted which focuses primarily on the mothers of newborns who screened positive for drugs or alcohol at the time of delivery and the factors which may have influenced them to either continue or discontinue their abuse of drugs or alcohol during the course of their pregnancy, as well as the specific barriers to the cessation of these substances. The desired outcome would be to better understand these barriers in hopes that more frequent and effective early intervention could take place. Educating women on different methods to discontinue drugs and/or alcohol prior to pregnancy will promote a positive influence towards this epidemic and encourage healthy lifestyle choices during pregnancy and delivery, resulting in healthier babies.