



TIES Pre-Placement Education and Preparation Series



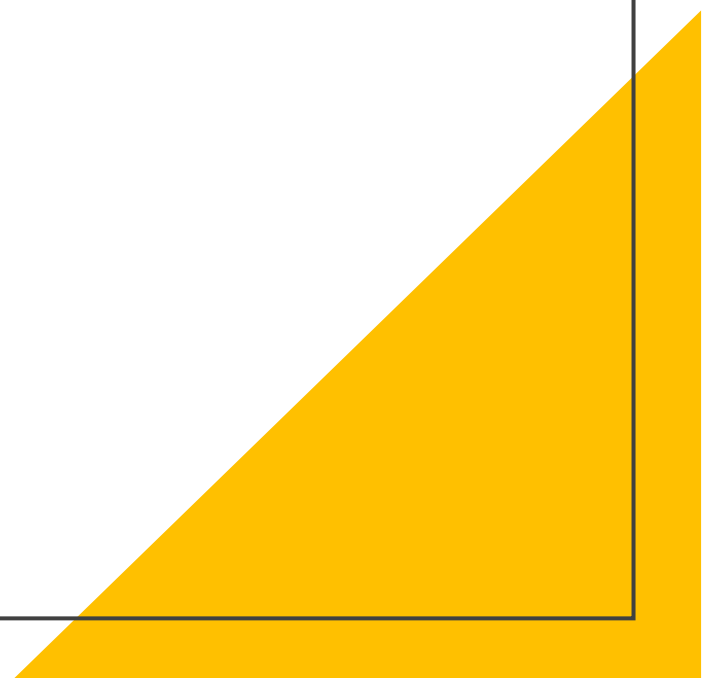
Session 2a

Medical Considerations for Resource Parents

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TIES for Families



How TIES Can Help

- Medical consultation services
 - Review medical records
 - Obtain additional medical records
 - Contact current healthcare providers to assist in health care process
 - Provide recommendations
 - › Liaison with healthcare providers to refer to specialists
 - › Assist with referral process



The Self-Fulfilling Prophecy

When is a medical issue due to...

- Prenatal substance exposure?
- Foster care experience?
- Trauma history?
- Typical development?

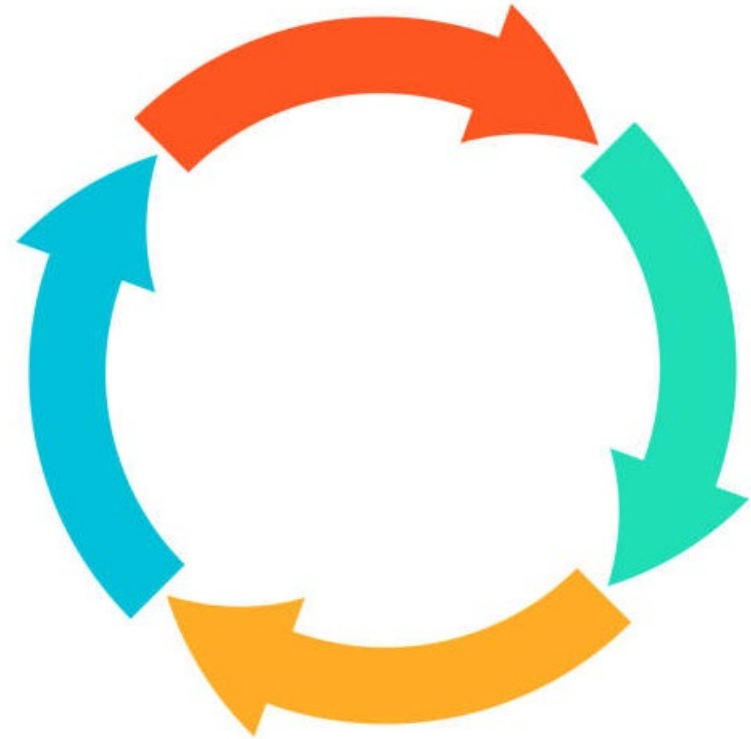




Photo by Sujyeon-Choi

Factors That Can Impact Pregnancy

Potential challenges:

- May arise before birth
 - *Prematurity*
 - *Prenatal substance exposure*
- May arise after birth
 - *Infections*
- Be influenced by the environment
 - *Stress*
 - *Prenatal care*



Medical Risk Factors Before Birth





- Social determinants of health

- *Financial stability, access to education, access to quality health care, community violence, access to healthy food and clean water, racism/discrimination*

- Other environmental risk factors

- *Prenatal care, social support, trauma history*

- Prenatal substance exposure

- Infections

What does someone need to have a healthy pregnancy?

What are opportunities for prevention or early intervention?



Prematurity

- Normal pregnancy is between 37-40 weeks
- Considered premature if born < 34 weeks
- Regional center cutoff for high risk < 32 weeks

The younger the age, the more complications the child may have...

Infections

- Syphilis
 - *All infants checked for syphilis*
- Gonorrhea
- Chlamydia
- Herpes
 - *One of the most devastating*
- HIV
 - *Not automatically checked at birth*
- Hepatitis A
 - *Contracted through food*
 - *Vaccine available*
- Hepatitis B and C
 - *Contracted through blood*
 - *No vaccine available*



Medical Risk Factors After Birth



Substances

Most Common

- *Marijuana*
- *Methamphetamine*
- *Cocaine*

Alcohol

Cocaine

Opioids

Other Substances

- Cigarettes
- Marijuana
- Amphetamine
- Ketamine

Alcohol

Short-term

- Withdrawal

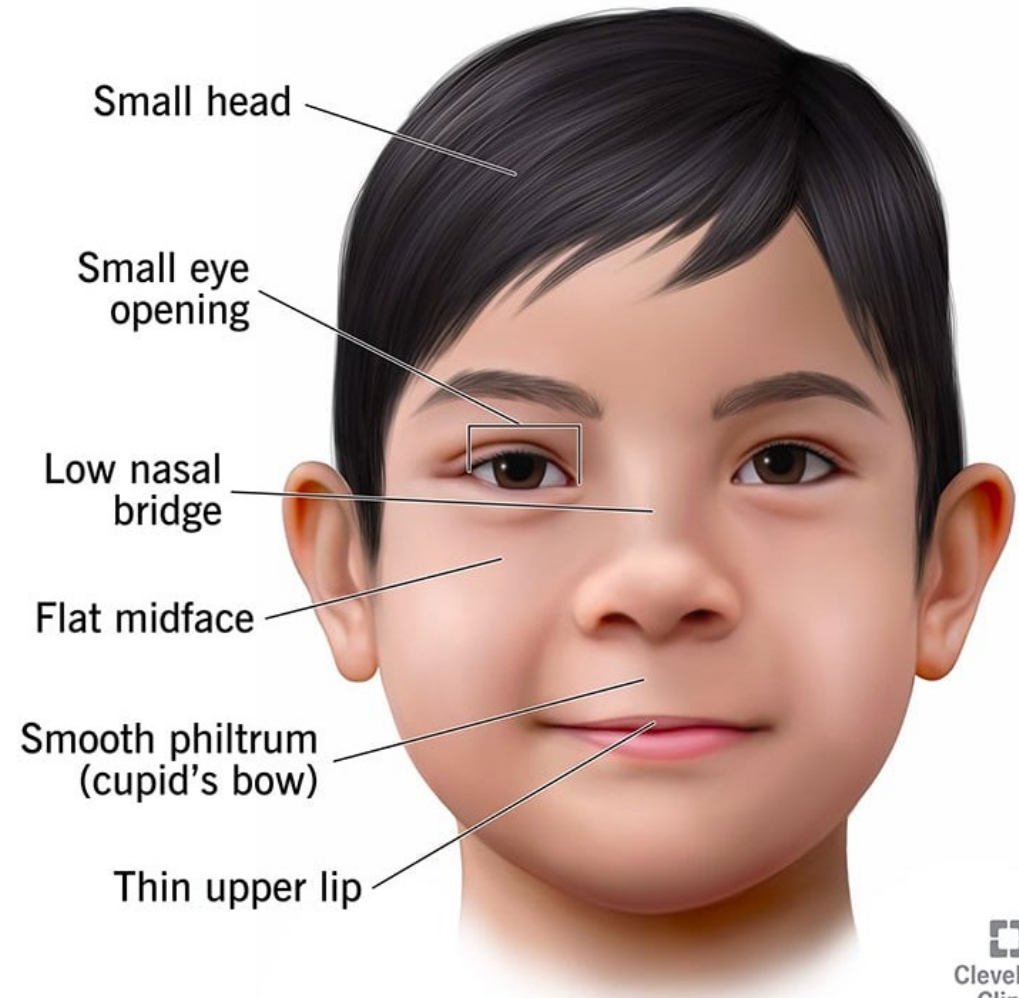
Long-term

- FAS (Fetal Alcohol Syndrome)
- FASD (Fetal Alcohol Spectrum Disorder)



FAS & FASD Features

- Low growth percentage
- Small head size (microcephaly)
- Facial Features
 - Small eye opening
 - Smooth philtrum
 - Thin upper lip
- Neurological abnormalities
- Learning difficulties
- Behavioral issues
- Impaired fine motor skills
- Language disabilities



FAS vs. FASD



FAS

- Clinical diagnosis
- Must meet diagnosis
- Specific facial anomalies
- Severe central nervous system anomalies
- Prenatal alcohol exposure

FASD

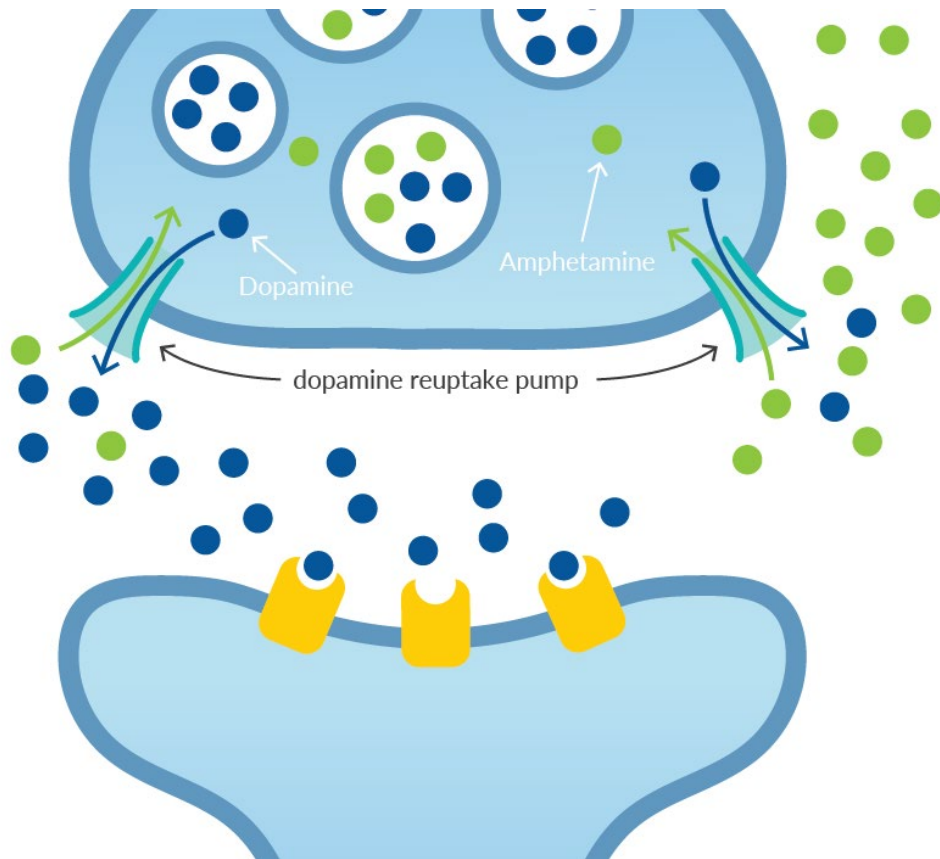
- Umbrella term (not intended for clinical diagnosis)

Cocaine



- Greater risk of prematurity, low birth weight and height, small heads, and attention deficits
- Short-term
 - “Withdrawal syndrome”
 - Problems with “State regulation”
- Long-term
 - “The Epidemic That Wasn’t”
 - Potential for attention problems

Methamphetamine



- IDEAL Project: First longitudinal study focused on prenatal substance exposure to methamphetamine. Compared to non-PSE children, those with PSE:
 - **3.5x** more likely to be small for gestational age
 - 2x as likely to be underweight
 - More likely to be premature
 - 3 and 5 year follow ups-subtle and there is a range. More likely for PSE than non-PSE to see emotional reactivity, anxiety/depression and externalizing/ADHD problems

Opioids



Short-term

- Neonatal Abstinence Syndrome
- Neonatal Opioid Withdrawal Syndrome

Long-term

Nicotine



- Studies are clouded by polysubstance abuse
- Affects growth and intellectual development (although may be subtle)
- Consistent results

Marijuana



- Most commonly used during pregnancy, and might increase as legalization increases
- Difficult to be certain about the specific effects of marijuana on pregnancy and the developing fetus, in part because those who use it often use other drugs as well, or because of other factors (e.g., poverty and malnutrition)
- Preliminary data suggests potential impact on brain development
- A lot is still unknown

Research



Consistent Findings Across Articles



Problems with Existing Research



Medical Risk Factors

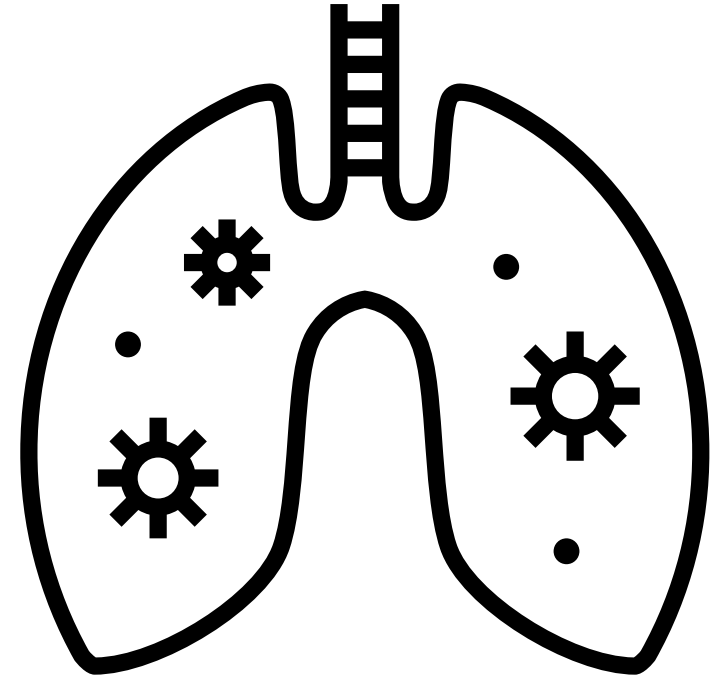
- Other common childhood medical issues
- **Children with PSE are more like other children than they are different**



Common Medical Problems

How can these mimic mental health symptoms and behaviors?

- Learning Disabilities
- ADHD – inattention, hyperactivity, impulsivity
- Bedwetting
- Sleep and food-related challenges
- Asthma
- Eczema
- Colds
- Ear Infections





What to ask?





Infant & Child Medical Follow-Up

- Dr. Visits at 2, 4, 6, 9, 12, 15, 18, & 24 months
- Medical and Developmental Evaluations
- Annual check-ups
- Hearing and vision screening in schools