

Promising findings for anti-alcohol treatment in pregnancy

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A study by researchers from The University of Western Australia and Telethon Kids Institute has found a medication that helps people refrain from drinking alcohol has shown no harmful effects during pregnancy in



early stage trials.

The study, "The effects of acamprosate on maternal and neonatal outcomes in a mouse model of <u>alcohol</u> use disorders," published in *Physiology & Behavior*, looked at the safety of acamprosate, one of a number of pharmaceutical therapies used to treat alcohol use disorders, that also include naltrexone.

It found the medication did not affect maternal and birth outcomes, the weight of the offspring after birth or their motor control.

Researcher Ebony Quintrell, a Ph.D. candidate from UWA's School of Population and Global Health, said finding effective, evidence-based therapies for alcohol dependent pregnant women was challenging.

"A number of pharmacotherapies, including acamprosate, are commonly used to maintain alcohol abstinence but they're typically not recommended for use in pregnancy," Ms. Quintrell said.

"Pregnant women are therefore expected to stop drinking altogether without the support of medication, because of the lack of evidence, and this can be challenging physiologically and psychologically."

Alcohol is known to cause <u>congenital abnormalities</u> in developing fetuses but Ms. Quintrell said it was important to test the safety of medications that help with alcohol use disorders in pregnancy—a research area which was often neglected.

"Many women require medication for conditions that predate pregnancy and then once falling pregnant they are left with no options due to a lack of information at a time when robust safety information is most needed," she said.



More research was needed before the medication could be given the green light for pregnant women.

More information: Ebony Quintrell et al, The effects of acamprosate on maternal and neonatal outcomes in a mouse model of alcohol use disorders, *Physiology & Behavior* (2022). DOI: 10.1016/j.physbeh.2022.114037

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