



# Drug & Alcohol Resource Booklet

For Aboriginal Maternal Infant Health Strategy (AMIHS) & Building Stronger Foundations (BSF) Health Workers

Mothers & Families Project 2015



Health  
Mid North Coast  
Local Health District

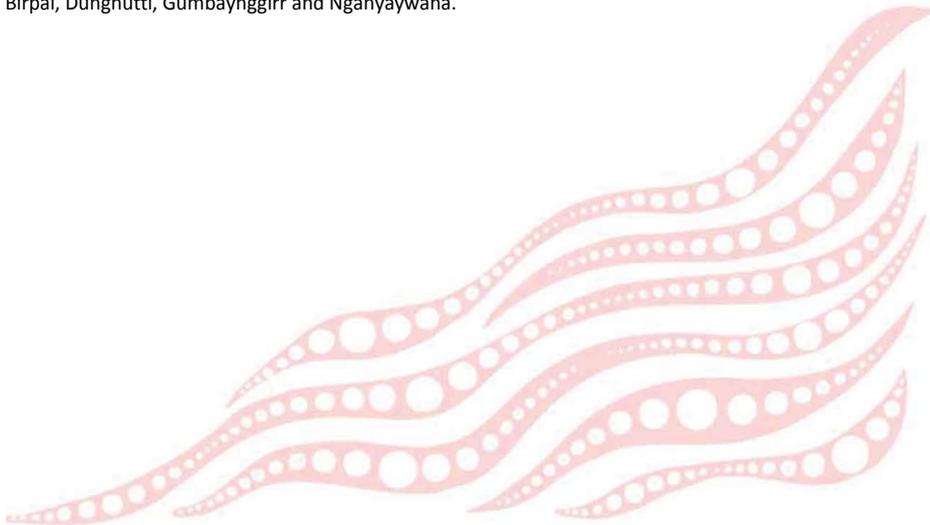
## STATEMENT OF ACKNOWLEDGEMENT

Mothers & Families Project 2015 purpose was to increase awareness of drug and alcohol use on fetal and maternal wellbeing with the aim to build confidence, skills and capacity within AMIHS/BSF and other associated services to screen, provide brief intervention and referral of substance using Aboriginal pregnant women, mothers of Aboriginal babies and household members.

MNCLHD supported the opportunity to fund this project and we thank and acknowledge the many staff, partners and community members who contributed their ideas, time and expertise to this booklet and other resources.

Artwork produced by Gumbaynggirr Artist, Brentyn Lugnan, of Bruz Design: Five Mobs.

We acknowledge the traditional custodians of the lands where these resources were developed including Birpai, Dunghutti, Gumbaynggirr and Nganyaywana.



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While the client has the right to refuse to answer questions, the health worker **is obliged to ask** about substance use and **document the response.**

Child protection and wellbeing is the responsibility of  
**ALL HEALTH WORKERS.**

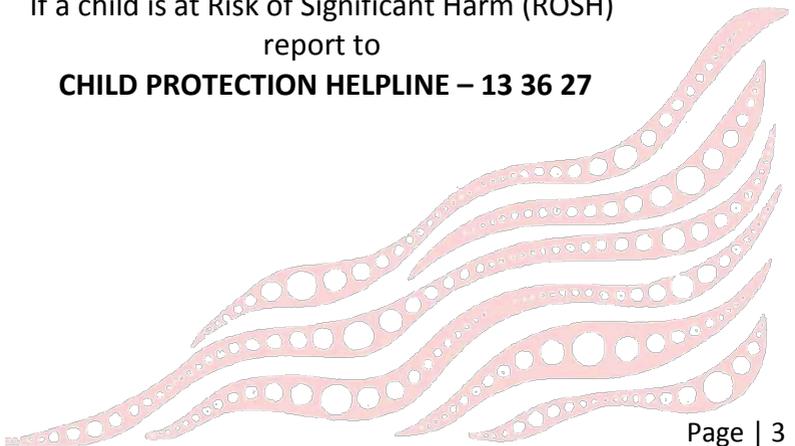
Although drug and alcohol use may not warrant a report or notification to child protection, child protection should be a consideration for all pregnant women when there is thought to be a risk of harm or neglect to the fetus or newborn or other children in their care.

### **IDENTIFY, CONSULT, RESPOND**

Use Mandatory Reporting Guide (MRG),  
follow advice, formulate a plan and continue to provide service.  
Refer as necessary.

Discuss concerns with **NSW HEALTH CHILD WELLBEING UNIT**  
– **1300 480 420**

If a child is at Risk of Significant Harm (ROSH)  
report to  
**CHILD PROTECTION HELPLINE – 13 36 27**



**If a woman is using substances, her baby may experience withdrawal from the substance when it is born.**

**Dependence** is when a person needs to use a drug/alcohol to feel well.

**Tolerance** is the need to increase the amount drug/alcohol used to get an effect.

**Never advise sudden stopping of any substance use without talking to a doctor or a drug and alcohol worker.**

## Guides for all substances

These descriptive words can be used within client notes to document what you have observed.

### General Signs and Symptoms of Drug Intoxication

#### **Mild Intoxication**

Physical: Decreased appetite, thirsty, impaired coordination/concentration, smell of alcohol, slurred speech.

Mood: Anxiety, decreased anxiety/inhibition, feeling of well-being (euphoria).

Behaviour: Agitation, fidgeting, talkative, sleepy.

#### **Moderate Intoxication**

Physical: Increased/irregular/reduced breathing/pulse rate, sweating, headache, shaking, dizziness, pale skin, moderately impaired coordination, judgement, awareness, reddened eyes, large or decreased pupil size, dry mouth, dehydration, exaggerated sensory experience, nausea.

Mood: Moderate anxiety, agitation.

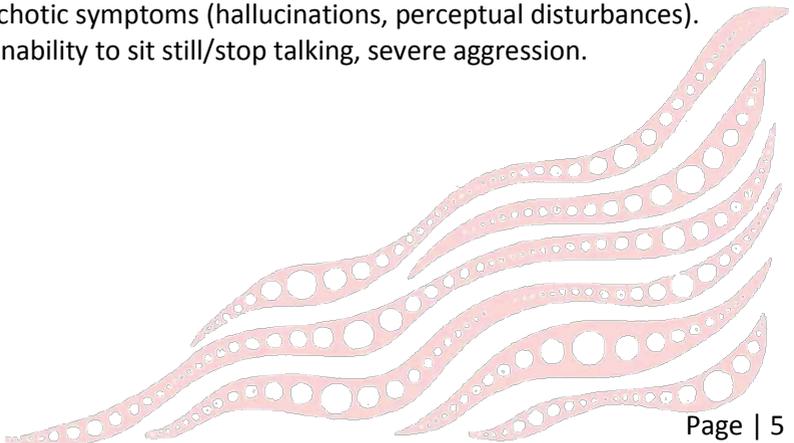
Behaviour: Itching, jaw clenching.

#### **Severe Intoxication/Overdose**

Physical: Extremes of the above symptoms, skin pale, sweaty, extreme sedation, loss of consciousness, coma.

Mood: Extreme feeling of wellbeing/superiority, severe paranoia, panic attacks, psychotic symptoms (hallucinations, perceptual disturbances).

Behaviour: Inability to sit still/stop talking, severe aggression.



## **General Signs and Symptoms of Drug Withdrawal**

### **Mild Withdrawal**

Physical: Increased pulse rate, mild sweating/perspiration, mild nausea, abdominal pains, fatigue, headache.

Mood: Mild irritability, anxiety, mood swings.

Behaviour: Mild agitation.

### **Moderate Withdrawal**

Physical: Increased breathing/pulse, moderate sweating/perspiration, nausea, cramping, muscle twitching, drowsiness, total exhaustion, loss of appetite, increased appetite, diarrhoea, moderate headache, tremors.

Mood: Moderate irritability, anxiety, mood swings, depression.

Behaviour: Moderate agitation.

### **Severe Withdrawal**

Physical: Severe sweating/perspiration, vomiting, diarrhoea, disorientation, hyperactive, tremor, hallucinations, seizures, loss of consciousness, coma, death.

Mood: Severe anxiety, chronic depression.

Behaviour: Severe agitation, aggression.

*Reference: Victorian Alcohol and Drug Association*

Remember that these signs and symptoms may be caused by a physical condition that has nothing to do with drugs. Asking about substance use will help to make sense of them.

# ALCOHOL

***No alcohol is the safest option for women who might become pregnant, are pregnant, or are breastfeeding.***

Alcohol is a depressant drug that slows down the brain and is absorbed into the blood stream.

Drinking can cause harm to almost every part of the body and affect mental health, family and community. The more a person drinks, the greater the risk to them.

## **Effects of use**

- ◆ sleep problems, anxiety, depression, existing mental health deteriorates
- ◆ falls and other injuries
- ◆ heart burn, nausea
- ◆ tiredness and shortness of breath due to anemia
- ◆ high blood pressure
- ◆ abnormal heart rhythm
- ◆ increased risk of chest infections
- ◆ dehydration
- ◆ vitamin deficiency, lower magnesium and sodium
- ◆ osteoporosis
- ◆ obesity
- ◆ increased risk of diabetes or more difficult to control diabetes

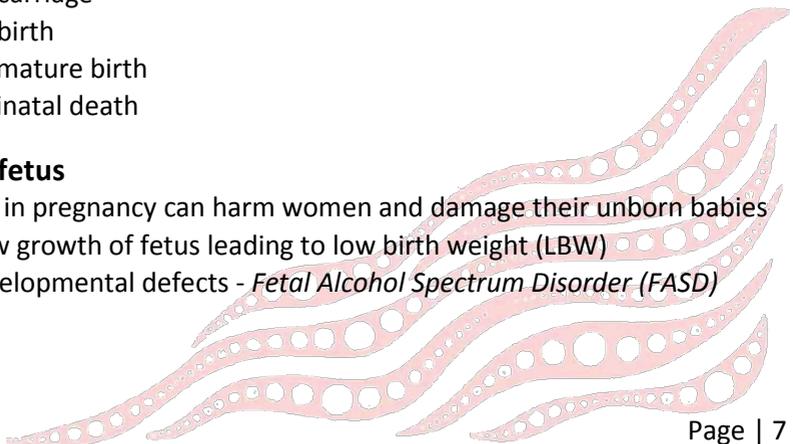
## **Effects of use on pregnant woman**

- ◆ miscarriage
- ◆ stillbirth
- ◆ premature birth
- ◆ perinatal death

## **Effects on fetus**

Alcohol use in pregnancy can harm women and damage their unborn babies

- ◆ slow growth of fetus leading to low birth weight (LBW)
- ◆ developmental defects - *Fetal Alcohol Spectrum Disorder (FASD)*



## Effects on baby/child

- ◆ Withdrawal – irritability, tremors, fits, disturbed sleep-wake patterns
- ◆ *Fetal Alcohol Spectrum Disorder (FASD)*:  
Includes facial deformities; physical, mental, behavioral and/or learning disabilities; poor coordination and psychomotor development; slow growth with possible lifelong implications

## Effects on breastfeeding

Alcohol passes into the blood stream and into breast milk

- ◆ reduces milk supply
- ◆ Poor feeding in baby

***No alcohol is the safest option while breastfeeding***

## Ways to reduce the harm of use

There is an increased risk of harm associated with increased levels of drinking.

It takes 1 ½ -2 hours per standard drink for alcohol to pass through a woman's breast milk and may persist for several hours after consumption. (This is dependent on her height, weight and percentage of body fat).



Avoid drinking before breast feeding

- ✓ Wait until blood alcohol is zero before feeding
- ✓ (Download free APP '*Feed Safe - Alcohol And Breastfeeding*' )
- ✓ Express in advance of drinking and store breast milk for baby
- ✓ Choose not to breast feed
- ✓ Limit alcohol (not drinking for first month of breastfeeding until lactation is well established, then not more than two standard drinks per day, and have two alcohol-free days per week)

# BENZODIAZEPINES

Benzos, rowies, downers, sleepers, tummies, series, pills, X, xannies, normies, temaze, Sarah's, rivies, moggies, rohies, roofies

Benzodiazepines are depressant drugs, and they have a sedative effect. Using with another depressant (like alcohol or opioids) causes respiratory depression which can be life threatening.

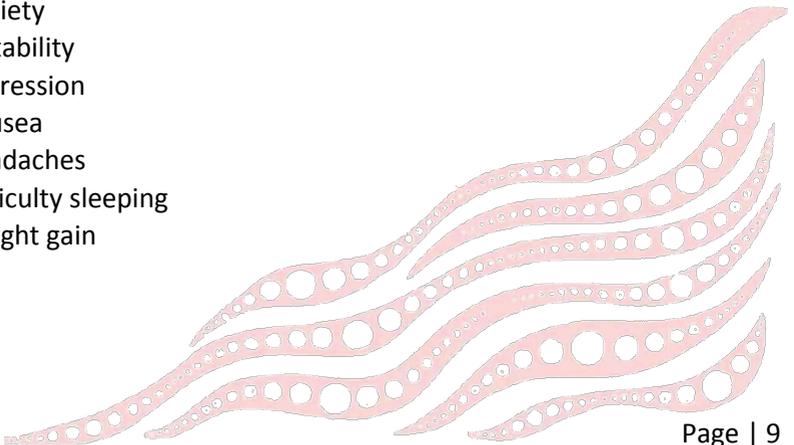
## Effects of use

Daily use for 4-6 weeks will give some sort of dependence

- ◆ relaxed, decreased anxiety
- ◆ tired or sleepy, no energy
- ◆ dizzy
- ◆ blurred or double vision
- ◆ unable to judge distances or movement properly
- ◆ mood swings
- ◆ poor memory, confusion
- ◆ impulsive or risky behavior
- ◆ if injected - risking tissue/vein/organ damage (as not intended use), HIV, hepatitis B & C, skin and heart infections

## Effects on pregnant woman

- ◆ drowsiness
- ◆ lack of motivation
- ◆ difficulty thinking clearly
- ◆ memory difficulties
- ◆ anxiety
- ◆ irritability
- ◆ aggression
- ◆ nausea
- ◆ headaches
- ◆ difficulty sleeping
- ◆ weight gain



## Effects on fetus

Can pass through the placenta to the baby

- ◆ may cause *Neonatal Abstinence Syndrome (NAS)*

## Effects on baby/child

- ◆ lethargic and floppy with poor muscle tone at birth
- ◆ breathing problems
- ◆ low body temperature
- ◆ withdrawal - *Neonatal Abstinence Syndrome (NAS)*  
Includes diarrhea, excessive crying or high-pitched crying, excessive sucking, hyperactive reflexes, increased muscle tone, trembling (tremors), seizures, poor feeding, stuffy nose, sneezing, vomiting  
slow weight gain, sweating, fever, sleep problems extreme sleepiness or irritability  
Usually begins 36–48 hours after last methadone dose, or 6–24 hours after last heroin dose  
Important for baby to stay in hospital for at least 5 to 7 days as baby may require medication to manage withdrawal symptoms

## Effects on breastfeeding

- ◆ safety not known; potential risk needs to be weighed up against benefits of breastfeeding dependent on the drug
- ◆ if taking short-acting drug, advise not to breast feed immediately post dose, real risk of falling asleep and smothering baby and infant receiving maximum dose.
- ◆ If taking long-acting drug, advise against breastfeeding

## Ways to reduce the harm of use

- ✓ Do not combine with alcohol or opiates
- ✓ Have someone not using drugs care for children as user has impaired capacity as parent or primary carer of children
- ✓ It is not safe to share a sleep surface with a baby
- ✓ Safe sex practice
- ✓ Clean needle and syringe programs
- ✓ Safe injecting practice

# CANNABIS

Yarndi, weed, gunja, pot, grass, marijuana

- ◆ very commonly used
- ◆ Tetrahydrocannabinol or THC is the active ingredient
- ◆ cannabis is a long-acting drug, which stores itself the body's fat cells
- ◆ can take up to 30 days to leave the body
- ◆ can be contaminated with pesticides which are then inhaled into a person's lungs
- ◆ fungus/mould can grow on the drug, which is then inhaled into a person's lungs
- ◆ long-term effect on user and their babies/children is largely unknown
- ◆ research is still occurring into the effects of cannabis use

## How it's used

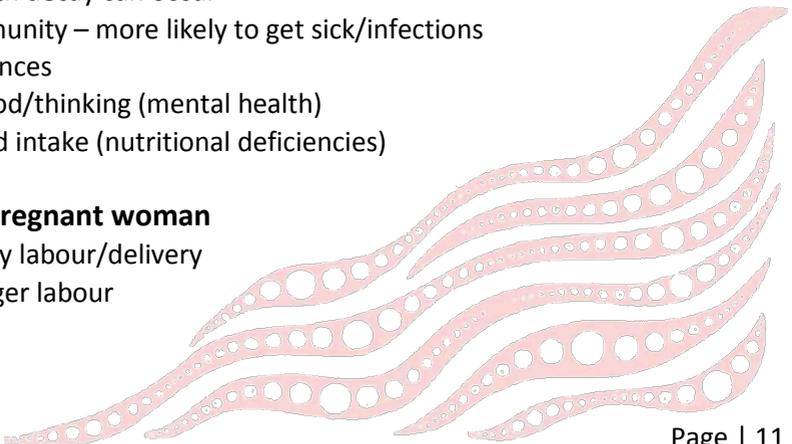
- ◆ eaten
- ◆ smoked (Joint: like cigarette, Bong: smoke is cooled by the water so it can be deeply inhaled by the user)

## Possible effect of long-term use

- ◆ lungs – coughing, breathing problems, lung disease
- ◆ heart – cannabis makes heart beat faster; hence stresses heart
- ◆ fertility – affects testosterone (male hormone) and sperm.  
In women it may make periods irregular
- ◆ teeth – reduced saliva in mouth means teeth are not protected so tooth decay can occur
- ◆ immunity – more likely to get sick/infections
- ◆ finances
- ◆ mood/thinking (mental health)
- ◆ food intake (nutritional deficiencies)

## Effect on pregnant woman

- ◆ early labour/delivery
- ◆ longer labour



## Effect on fetus

- ◆ cannabis crosses the placenta
- ◆ reduced oxygen in mum's blood means reduced oxygen being received by the baby
- ◆ decreased growth of unborn baby (fetal growth restrictions)

## Effect on baby

- ◆ troubled sleeping patterns
- ◆ complications of low birth weight

## Effect on breastfeeding

- ◆ THC passes into breast milk – one study showed 8 times the amount in breast milk compared to the mothers THC blood level
- ◆ if used, don't breastfeed while under influence (*'express and dump'*)
- ◆ unsettled sleep
- ◆ increased risk of infections

## Long-term possible effect on child

- ◆ lung/breathing problems
- ◆ short-term memory, attention, impulsiveness and concentration problems

## Ways to reduce the harm of use

- ✓ Don't smoke bongs while breastfeeding or pregnant
- ✓ Space the time between sessions
- ✓ Don't use tobacco in mix (avoid nicotine dependency and the related harm of nicotine)
- ✓ Avoid driving
- ✓ Avoid using where children or others are present
- ✓ Socialise with people who don't smoke

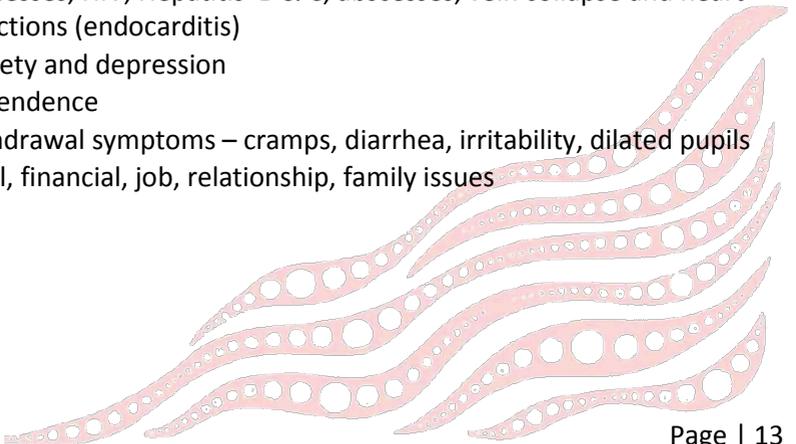
# OPIOIDS

Heroin (hammer, H, shit, smack, horse, harry, white, skag, ju), Oxycontin/MS Contin, Endone, Codeine

Overdose is common and not related to person's size. Death from overdose can happen within minutes. Overdosing is considered a medical emergency.

## Effects of use

- ◆ calm, relaxed
- ◆ pain relief, comfortable
- ◆ strong sense of happiness (euphoria)
- ◆ emotional detachment
- ◆ constricted/pinpoint pupils
- ◆ drooping eyelids
- ◆ sleepy, drowsy, nodding off or 'on the nod'
- ◆ stupor
- ◆ slowing respiration to unconsciousness leading to death
- ◆ itching
- ◆ nausea, vomiting
- ◆ dry mouth leading to dental problems
- ◆ decreased blood pressure
- ◆ increased sweating
- ◆ slow bowel activity or constipation
- ◆ sleep problems
- ◆ impact of unsafe injecting - track marks, skin infections, cellulitis, abscesses, HIV, Hepatitis B & C, abscesses, vein collapse and heart infections (endocarditis)
- ◆ anxiety and depression
- ◆ dependence
- ◆ withdrawal symptoms – cramps, diarrhea, irritability, dilated pupils
- ◆ legal, financial, job, relationship, family issues



## Effects on pregnant woman

- ◆ miscarriage
- ◆ premature birth
- ◆ still birth
- ◆ altered tolerance to pain management
- ◆ withdrawal can also cause miscarriage or early labour

## Effects on fetus

- ◆ low birth weight (LBW)
- ◆ neonatal death

## Effects on baby

- ◆ withdrawal - *Neonatal Abstinence Syndrome (NAS)*
- ◆ SIDS related death
- ◆ reduced growth

## Effects on breastfeeding

- ◆ unstable mothers should be encouraged not to breastfeed (child protection concerns)
- ◆ if one-off use: express and discard for 24 hours after use
- ◆ have safety plan
- ◆ Methadone: level is low when on methadone maintenance program
- ◆ Buprenorphine: effect not yet established. The amount in breast milk is small and considered clinically insignificant

## Ways to reduce the harm of use

- ✓ Avoid driving
- ✓ Avoid poly drug use
- ✓ Have someone not using care for children as user has impaired capacity as parent or primary carer of children
- ✓ It is not safe to share a sleep surface with a baby
- ✓ Safe sex practice
- ✓ Clean needle and syringe programs
- ✓ Safe injecting practice

# PETROL, PAINT & OTHER INHALANTS

Petrol, spray cans, liquid paper, glues and similar products have vapours which when breathed in give a depressant effect.

***When used in this way there is no safe level of use.***

Quickly absorbed through lungs

Intoxication after 3-5 minutes; peaks at 15-30 minutes

Lasts for 3-6 hours

## How it's used

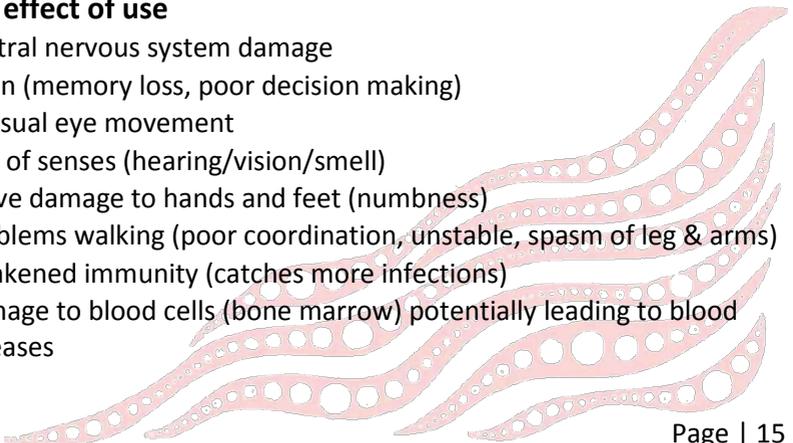
- ◆ sniffing (from container)
- ◆ bagging (from plastic/paper bag)
- ◆ spraying straight into mouth
- ◆ chroming (breathing in chrome based aerosol paint)
- ◆ huffing (holding piece of cloth against mouth/nose)

## Effect of use

- ◆ chest pains/abnormal heart beat
- ◆ accidents/injuries
- ◆ breathing problems
- ◆ loss of consciousness
- ◆ death
- ◆ psychotic symptoms (seeing/hearing things not there [hallucinations], beliefs that aren't true [delusions]).
- ◆ burns (inhalants catch alight)

## Long-term effect of use

- ◆ central nervous system damage
- ◆ brain (memory loss, poor decision making)
- ◆ unusual eye movement
- ◆ loss of senses (hearing/vision/smell)
- ◆ nerve damage to hands and feet (numbness)
- ◆ problems walking (poor coordination, unstable, spasm of leg & arms)
- ◆ weakened immunity (catches more infections)
- ◆ damage to blood cells (bone marrow) potentially leading to blood diseases



## **Effect on pregnant woman**

Almost all inhalants enter into the placenta; hence enter the blood stream of the developing baby.

- ◆ early labour/delivery

## **Effect on fetus**

- ◆ premature birth
- ◆ damage to brain development

## **Effect on baby**

- ◆ low birth weight
- ◆ breathing problems
- ◆ increased risk of infection
- ◆ risk of withdrawals once born (Neonatal Abstinence Syndrome)
- ◆ potential for developmental delays (learning difficulties – reading and writing)

## **Effect on breastfeeding**

- ◆ vapour-producing substances pass into breast milk
- ◆ baby's brain continues to grow after birth
- ◆ if using inhalants, talk about risks of continuing to breastfeed

**If client is intoxicated, keep calm, call for help.  
Keep good air flow so vapours can escape.**

## **Ways to reduce the harm of use**

- ✓ Talk about where person uses to be safe – avoid items that can ignite vapours
- ✓ Always use in open spaces (air flow)
- ✓ Don't use alone, always with others (so help can be called)
- ✓ Safe areas to avoid accidents (away from cars, swimming areas)
- ✓ Use mouth only to inhale vapours (to receive enough oxygen)

# STIMULANTS – AMPHETAMINE TYPE DRUGS

Ecstasy – powder, speed, gas

Crystal - crystal, ice, shabu

Base methamphetamine - paste

Dexamphetamine – Ritalin

Freebase

Cocaine – coke

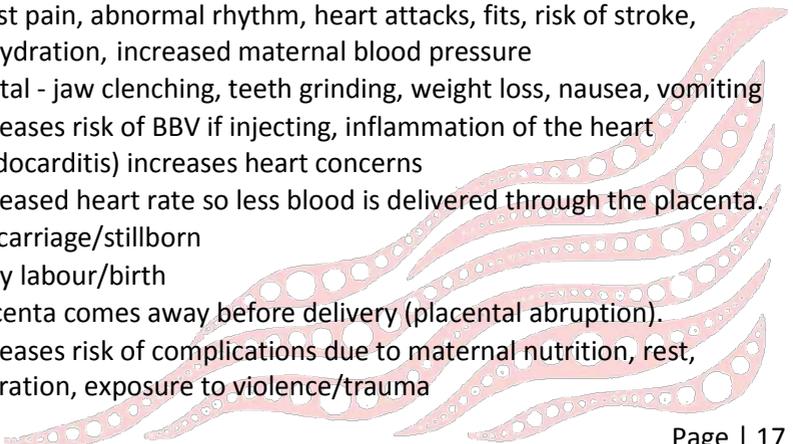
- ◆ second most-used illegal drug in Australia
- ◆ commonly 'cut' with substances (like sugar and cheaper drugs) to expand volume (increases the profit for the seller)
- ◆ Long-term effect on user and their babies/children is largely unknown
- ◆ research is still occurring into the effect of stimulants use

## How it's used

Swallowed, snorted or injected

## Effect on pregnant woman

- ◆ increased risk of problems with social/relationships, legal and financial
- ◆ skin - compulsive skin picking/bugs
- ◆ brain injury – brain cells die (neurotoxicity) due to excess dopamine
- ◆ mental health - depressed, anxiety, hallucination, paranoid, suicidal etc. Can increase existing mental health concerns
- ◆ psychosis - drug induced
- ◆ chest pain, abnormal rhythm, heart attacks, fits, risk of stroke, dehydration, increased maternal blood pressure
- ◆ dental - jaw clenching, teeth grinding, weight loss, nausea, vomiting
- ◆ increases risk of BBV if injecting, inflammation of the heart (endocarditis) increases heart concerns
- ◆ increased heart rate so less blood is delivered through the placenta.
- ◆ miscarriage/stillborn
- ◆ early labour/birth
- ◆ placenta comes away before delivery (placental abruption).
- ◆ increases risk of complications due to maternal nutrition, rest, hydration, exposure to violence/trauma



## **Effect on fetus**

- ◆ small for stage of pregnancy
- ◆ risk of heart failure or stroke (blood vessels spasm, and die)
- ◆ abnormalities (heart, face, kidneys, arms, legs)
- ◆ interferes with the development of baby brain

## **Effect on baby**

- ◆ Risk of withdrawals once born

## **Effect on breastfeeding**

- ◆ amphetamines do pass into breast milk – levels have been shown to be 7 times higher than the mum's blood levels
- ◆ if using, don't breastfeed for 24-48 hours ('express and dump')

## **Long-term possible effect for child**

- ◆ not so much structural but cognitive (learning and behavioural difficulties)
- ◆ decreased executive functioning (planning, organisation, time management and flexible thinking)
- ◆ decision-making difficulties leading to risky behaviour
- ◆ death

## **Ways to reduce the harm of use**

- ✓ If using, drink water to keep hydrated
- ✓ Don't inject if using, to avoid blood borne viruses and infections
- ✓ Space the time between uses – to avoid tolerance
- ✓ Care not to use with overdose

# TOBACCO

***Smoking causes harm to almost every organ in the body. The younger a person starts smoking and the more years they smoke, the greater the health risks. However, stopping smoking at any age can improve health. Every cigarette a person doesn't smoke is better for them.***

## Effects of use

- ◆ increased heart rate, temperature and blood pressure
- ◆ reduced blood flow to extremities
- ◆ increased acid in stomach, nausea
- ◆ weak appetite, poor taste and smell
- ◆ dizziness
- ◆ shortness of breath, coughing, asthma and other respiratory conditions and respiratory infections - pneumonia, chronic bronchitis, increased risk of emphysema and cancer
- ◆ atherosclerosis, heart attack, stroke, clotting
- ◆ organ damage/cancer
- ◆ increases chance of diabetes type 2

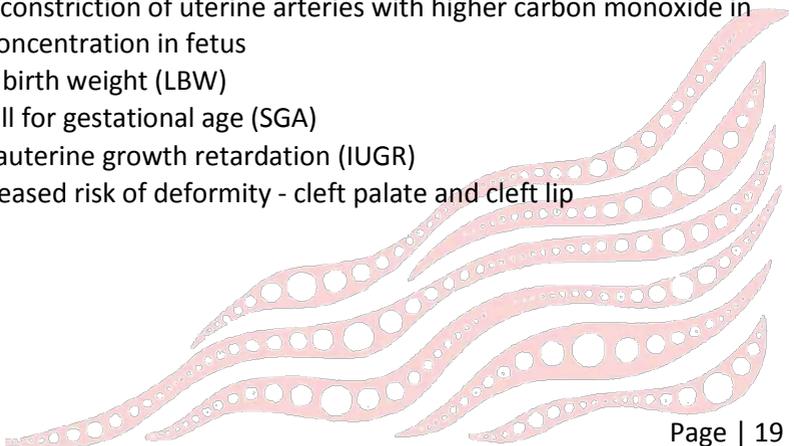
## Effects on pregnant woman

- ◆ spontaneous miscarriage
- ◆ premature birth
- ◆ still birth

## Effects on fetus

Causes vasoconstriction of uterine arteries with higher carbon monoxide in blood and concentration in fetus

- ◆ low birth weight (LBW)
- ◆ small for gestational age (SGA)
- ◆ intrauterine growth retardation (IUGR)
- ◆ increased risk of deformity - cleft palate and cleft lip



## Effects on baby/child

- ◆ SIDS
- ◆ breathing illnesses and infections, more coughs, colds, asthma
- ◆ poor attention and learning problems
- ◆ increased childhood ear infections

## Effects on breastfeeding

- ◆ minimal amount of nicotine is excreted in breast milk
- ◆ minimal absorption of nicotine in the infant's gut when breastfed
- ◆ reduced milk production
- ◆ increased risk of SIDS as nicotine affects infant arousal process

## Ways to reduce the harm of use

- ✓ Don't smoke while breastfeeding
- ✓ Don't breastfeed and settle baby before having a smoke
- ✓ Smoke an hour before feeding; not just before a feed
- ✓ It takes 95 minutes for ½ the nicotine to be eliminated from the mother's system
- ✓ Smoke away from the baby
- ✓ Chemicals in second-hand smoke are even more harmful
- ✓ Smoke outside and ventilate home frequently
- ✓ Wear a smoking shirt to limit baby's exposure
- ✓ Try to decrease amount smoked daily prior to becoming pregnant, in pregnancy and while breastfeeding
- ✓ Use nicotine replacement therapy prior to becoming pregnant, in pregnancy and while breastfeeding
- ✓ Download free APP *'Quit For You - Quit For Two'*



# OVER-THE-COUNTER DRUGS

Medications that don't require a script from a doctor are commonly known as over-the-counter medications. These drugs can still be misused and cause dependence.

## Painkillers

Many are made up of codeine with other active ingredients like paracetamol.

### Effects of use

Taking any medication in large amounts can cause harm.

- ◆ paracetamol - liver failure
- ◆ ibuprofen - gut bleeding, kidney failure
- ◆ opiate-based medications - may develop dependency and experience withdrawal if stops use
- ◆ overdose

### Ways to reduce the harm of use

- ✓ Take medications as directed on label
- ✓ Don't use more than one kind of medication that does the same thing
- ✓ Explore other pain relief - medication without codeine
- ✓ Address the reason for pain experienced (ie see a dentist if tooth is sore)

## Prescribed medication

Can also be sold on the 'street'. People buying this can be placing themselves at harm as medication has not been prescribed by a doctor who would have identified the right medication and right dose for an individual.

## Antihistamines

Give relief of travel sickness, hay fever cold and cough

Gives sleepy/'downer' feeling and may cause an individual to hallucinate

### Effects of use

- ◆ high doses can cause heart to race and be irregular in its beat
- ◆ confusion, disorientation, fitting and comas can occur

## **Cough, cold and flu medicines**

May give relief for symptoms of cough, cold and flu; does not cure them.

### **Possible effects of use**

- ◆ antihistamine – can cause heart to race and be irregular in its beat. Confusion, disorientation, fitting and comas can occur
- ◆ opiate (codeine and dextromethorphan) - gives depressant/sedating effect and possible opiate harm. Dextromethorphan may lead to person seeing and hearing things that aren't real (hallucinating)
- ◆ pseudoephedrine - gives a stimulant effect. Not to be taken with some blood pressure medications. Using with drugs that have similar effect (amphetamines) may lead to increased blood pressure and heart attack
- ◆ paracetamol - liver failure
- ◆ alcohol - if used with other drugs may give a 'high' effect
- ◆ sorbitol - causes diarrhoea

### **Ways to reduce the harm of use**

- ✓ Talk to pharmacist before buying medication about what medications you are already taking and what medical conditions you have (blood pressure, heart disease, taking anti-depressants)
- ✓ Take only as directed
- ✓ See doctor if symptoms continue, not for long-term use
- ✓ Avoid sedating substances (like alcohol and benzodiazepines)

## **Mental health medications**

Medications prescribed to treat mental health conditions - anti-depressants and anti-psychotics - change the chemistry within the brain.

### **Effects of use**

- ◆ a sedating/relaxed feeling
- ◆ if large amounts are used, it can stop the heart
- ◆ misuse can lead to diabetes and weight gain

### **Effect on breastfeeding**

Check with GP if OK to use medication if breastfeeding

### **Ways to reduce the harm**

- ✓ Take as prescribed

# CAFFEINE

Coffee, coke, cola and high energy drinks (V, Red Bull, Mother) are a stimulant. These are made up of high levels of caffeine and sugar.

## Effects of use

- ◆ high levels can cause problems with sleep, shaking of hands, causes agitation, heart rate increases, can feel nauseous or vomit
- ◆ if larger amount is used a person can have fits, have a very fast heart beat and can be confused
- ◆ combining alcohol with energy drinks may decrease 'intoxicating' effect so people think they can drink more
- ◆ high in sugar; this can lead to weight gain and can damage teeth
- ◆ sudden stopping of caffeine intake can cause withdrawals - headache and irritability

## Effect of pregnant woman

- ◆ recommended intake of 200gms of caffeine daily (equals 1 large cup of drip coffee or espresso; 2 cups of instant coffee, or 3–4 cups of tea/cocoa, or 3 cans of cola)
- ◆ levels of 600mg and above are linked with stillborn and miscarriage

## Effect on baby

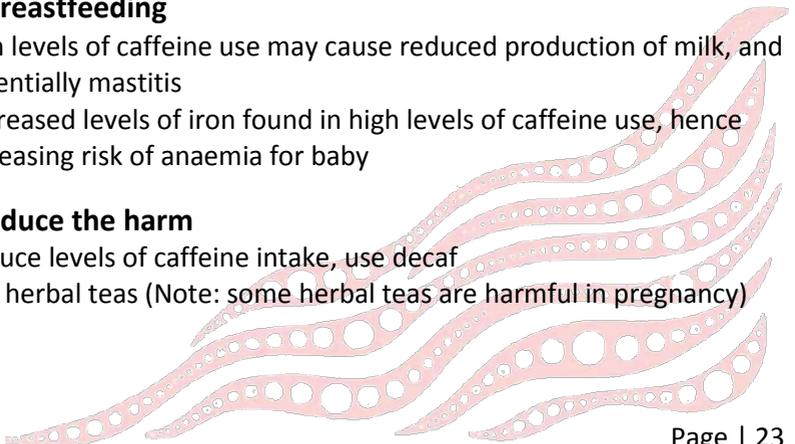
- ◆ If breastfed by mothers who have high level of caffeine, baby has increased risk of being unsettled, experiencing jitteriness, colicky, and constipation

## Effect on breastfeeding

- ◆ high levels of caffeine use may cause reduced production of milk, and potentially mastitis
- ◆ decreased levels of iron found in high levels of caffeine use, hence increasing risk of anaemia for baby

## Ways to reduce the harm

- ✓ Reduce levels of caffeine intake, use decaf
- ✓ Use herbal teas (Note: some herbal teas are harmful in pregnancy)



## References:

- Lee K, Freeburn B, Ella E, Miller W, Perry J, Conigrave K (editors) (2012) **Handbook for Alcohol and Drug Work.** Sydney: University Sydney
- NSW Ministry of Health (2014) **Clinical Guidelines For Management Of Substance Use During Pregnancy, Birth And The Postnatal Period.** Sydney
- Australian Drug Foundation & the Women’s Alcohol & Drug Service, The Royal Women’s Hospital (2014) **Alcohol, other drugs and pregnancy 3<sup>rd</sup> edition.** Australian Drug Foundation
- NSW Ministry of Health. (2014). **Drug Facts.** Available: <http://yourroom.com.au/a-z-of-drugs/>. Last accessed 10/07/2015
- ABA (2014) **Feed Safe,** Alcohol and Breastfeeding app for iPhone, iPad and iPod Touch (a collaboration between ABA, Reach Health Promotion Innovations and Curtin University)
- **Quit for you - Quit for two.** 2012 Version: 1.1.0. Mobile app. Department of Health and Ageing
- National Health and Medical Research Council (2012) **Infant Feeding Guidelines.** Canberra: National Health and Medical Research Council

## Further information:

### General Aboriginal health

- Closing the Gap Clearinghouse: [www.aihw.gov.au/closingthegap](http://www.aihw.gov.au/closingthegap)
- Indigenous Health Info Net: [www.healthinfonyet.ecu.edu.au](http://www.healthinfonyet.ecu.edu.au)

### Alcohol and drugs

- Australian National Council on Drugs: [www.ancd.org.au](http://www.ancd.org.au)
- National Indigenous Drug and Alcohol Committee: [www.nidac.org.au](http://www.nidac.org.au)
- Australian Drug Foundation: [www.adf.org.au](http://www.adf.org.au)
- Drug Info Clearinghouse: [www.druginfo.adf.org.au](http://www.druginfo.adf.org.au)
- Koori Drug info: [www.kooridruginfo.adf.org.au](http://www.kooridruginfo.adf.org.au)
- National Alcohol Guidelines website: [www.alcohol.gov.au](http://www.alcohol.gov.au)
- National Inhalants Information Service: [www.inhalantsinfo.org.au](http://www.inhalantsinfo.org.au)
- National Cannabis Prevention and Information Centre (NCPIC): [ncpic.org.au](http://ncpic.org.au)
- Centre for Excellence in Indigenous Tobacco Control: [www.ceitc.org.au](http://www.ceitc.org.au)
- Smoke Check: [www.smokecheck.com.au](http://www.smokecheck.com.au)
- National Drug and Alcohol Research Centre (NDARC): [www.ndarc.med.unsw.edu.au](http://www.ndarc.med.unsw.edu.au)
- National Institute on Drug Abuse (NIDA) fact sheets: [www.drugabuse.gov/infofacts/](http://www.drugabuse.gov/infofacts/)

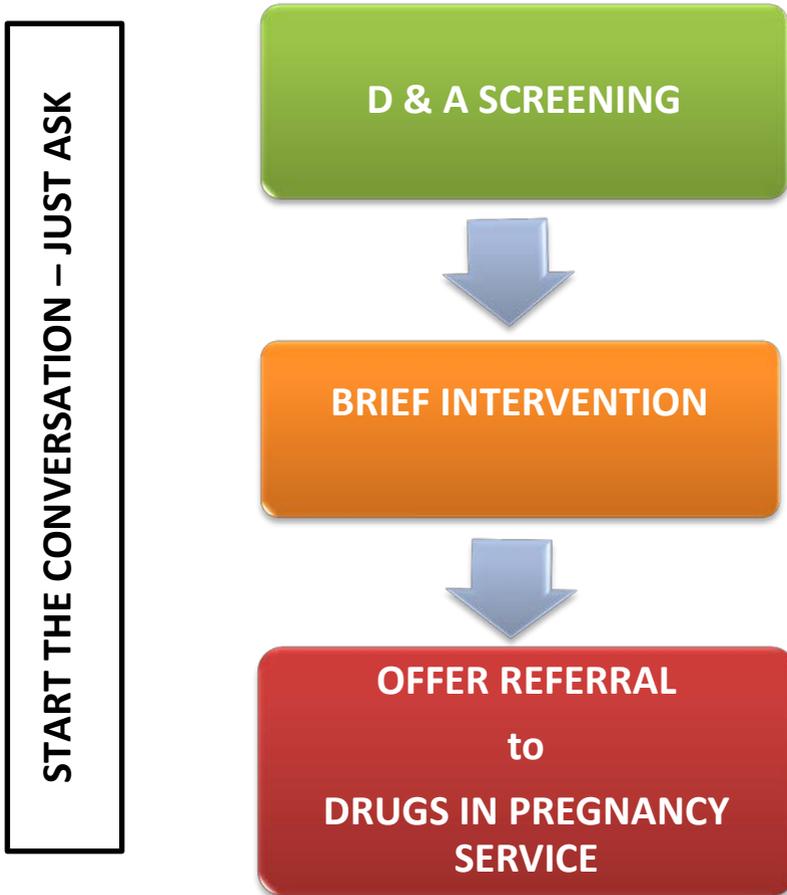
### Mental health and wellbeing

- Beyond blue: [www.beyondblue.org.au](http://www.beyondblue.org.au)
- Headspace: [www.headspace.org.au](http://www.headspace.org.au)
- Reach Out: [www.reachout.com](http://www.reachout.com)

*Reference: Handbook for Aboriginal Alcohol & Drug Work (2012)*



## DRUG & ALCOHOL FLOW CHART



Please phone D&A Services for further advice or to make a referral

**Drug & Alcohol Intake: 1300 662 263**

**Alcohol Drug Information Service NSW (ADIS) 24 hours:  
1800 422 599**

**Mothers & Families Project 2015**



**Health**  
Mid North Coast  
Local Health District

**Drug & Alcohol Resource Booklet  
For Aboriginal Maternal Infant Health Strategy (AMIHS) &  
Building Stronger Foundations (BSF) Health Workers**

For further information please contact:  
Drug & Alcohol Services  
Mid North Coast Local Health District  
Drug & Alcohol Intake: 1300 662 263

