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Great Lakes Fetal Alcohol Spectrum Disorders (FASD) Regional Training Center: Increasing Diagnostic Capacity for FASD in Family Practice Residents A Wisconsin Model

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Problem Overview

Alcohol use and abuse are serious public health problems in the United States. Wisconsin leads the nation in many alcohol indicators including drinking among adults, binge drinking among adults, and alcohol consumption by pregnant women, placing our communities at a high risk for alcohol-exposed pregnancies and fetal alcohol spectrum disorders (FASD).

No formalized training existed in Wisconsin to increase the skills of physicians and other practitioners in the diagnosis and treatment of FASD.

Program Description

The *Great Lakes FASD Regional Training Center (GLFRTC)* was established in 2008 with funding from the Centers for Disease Control and Prevention (CDC). The mission of *GLFRTC* is to increase the knowledge and skills of medical and allied health providers around the issues of FASD to prevent alcohol-exposed pregnancies and better serve patients and families at risk.

To ensure that physicians had access to evidence-based practices in the diagnosis and treatment of FASD, a 4-hour clinical training was developed that incorporated the following knowledge areas:

- Screening for alcohol use and abuse
- Biological effects of alcohol on the fetus
- FAS diagnostic criteria
- Evaluation for FASDs
- Developmental concerns across the lifespan
- Preventing alcohol-exposed pregnancies

In addition to the didactic information and discussion, a 'mock' patient is used to train physicians in the assessment and measurement of the physical features associated with FAS and related conditions.

Program Outcomes

After the training protocol was piloted with a small group of physicians, it was offered to family practice residents at the University of Wisconsin School of



Dr. Wargowski demonstrating the measurement of palpebral fissures as part of a clinical assessment for fetal alcohol syndrome.

Medicine and Public Health in Wisconsin. The family medicine program values the knowledge and clinical skills the training provides and negotiated to offer it to every first year resident as part of their community medicine rotation.

Pre- and post-training (immediate and 3-month follow-up) evaluation provides a measure of change in clinical practice, perceived skill level, and knowledge. Outcome data will be shared with the department of family medicine.

Lessons Learned

- Partnerships with physician training programs increase the reach of a project and expand its resources to foster sustainability.
- When training physicians, it is essential to incorporate hands-on training and follow-up components.
- Provide up-to-date resource and referral information to clinicians to take back to their practices and share with clinical teams.