

Research finds increase in number of babies born drug exposed in N.H.

19 December 2017

From 2005 to 2015 the number of infants diagnosed with neonatal abstinence syndrome (NAS) in the Granite State increased fivefold, from 52 to 269, according to new research by the Carsey School of Public Policy at the University of New Hampshire. In 2015, newborns diagnosed with NAS remained in the hospital 12 days on average, compared to three days for newborns not born exposed.

"In 2015, 2.4 percent of New Hampshire births were diagnosed with NAS and that number is projected to rise," said Kristin Smith, family demographer at the Carsey School and research associate professor of sociology. "This will have implications for early intervention programs, early education programs and primary schools. Pregnancy is a time to reach out to mothers as they are more receptive to services and making a change."

Because mothers using opioids are often also using other substances like alcohol, cigarettes, and other illicit drugs as well as confronting issues related to mental health, poverty, homelessness and domestic violence that complicate recovery, Smith advocated for comprehensive policies and programs.

"Policies and procedures should not consider opioid addiction in isolation, but rather as one interconnected symptom within a larger context," she said. "Both alcohol and tobacco use during pregnancy have proven [negative health consequences](#) for children, and the adverse effects are magnified when combined with opiates. Getting mothers on a path to recovery is a formidable challenge facing our state but one that ultimately will help children and promote family unity."

Dartmouth-Hitchcock Medical Center launched one of the first programs in the state to address the need for access to treatment for pregnant women using opiates. The integrated model has been

successful with fewer than 25 percent of infants born to [program](#) participants requiring treatment and a decrease of three days in the average length of hospital stay for the newborns requiring treatment.

Smith also found that a recent change to the state's Child Protection Act may have a "chilling effect on women seeking prenatal care, their willingness to disclose during pregnancy and reporting by providers." The change was intended to give the Department of Children, Youth and Families discretion and encourage treatment as a way to keep families together when possible.

The report can be found here: <https://carsey.unh.edu/publication/opioid-nas-nh>. It was funded by New Futures Kids Count.

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Provided by University of New Hampshire

APA citation: Research finds increase in number of babies born drug exposed in N.H. (2017, December 19) retrieved 18 November 2022 from <https://medicalxpress.com/news/2017-12-babies-born-drug-exposed-nh.html>

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