ALCOHOLISM IN PREGNANCY*

BY AUSTIN SILBER, M.D., WILLIAM GOTTSCALK, M.D., AND
CHARLES SARNOFF, M.D.

It is the purpose of this paper to present the case of a pregnant chronic alcoholic patient managed co-operatively by a psychiatrist and an obstetrician. The complications encountered and the advantages drawn from close co-operation between two disciplines as distinct as psychiatry and obstetrics will be discussed. The material will be reported through the classical procedure of case presentation.

CASE REPORT

Mrs. O., a 27-year-old, white, married woman, was first brought to the writers’ attention through the Alcohol Clinic of the State University College of Medicine. She had come to the clinic asking for help. She was overtly anxious, and was fearful lest she lose complete control of herself, and was concerned about a recurrence of her drinking, since this would jeopardize a recent relationship she had formed with a man with whom she was living as his “common-law” wife. The anxiety which led to her wish to drink was related to obsessional thoughts, the content of which was the fear that she would “go insane.” Prior to coming to therapy, she had made an agreement with her common-law husband to have a child, and although she did not know it at the time, she was a week and a half pregnant when psychotherapy commenced.

The patient was born in the Middle West. Her father was a chronic alcoholic, an ordinarily quiet man who frequently came home drunk, and would physically assault members of the family. He left the patient’s mother when the patient was four. Two years later, he remarried. It is to be noted that four months before the beginning of the patient’s therapy, her father had committed suicide by shooting himself. The patient’s mother had been committed to a mental institution when the patient was five years old. The patient has no specific recall of her mother during the period preceding her first hospitalization. She does remember her mother being taken to the hospital, and that she herself had been placed with an aunt. The patient lived mostly with aunts

*From the State University Alcohol Clinic, Department of Psychiatry and Department of Obstetrics, State University of New York, Downstate Medical Center, 450 Clarkson Avenue, Brooklyn 3, N. Y. and Kings County Hospital, Brooklyn, N. Y.
and other relatives until she was 12. She lived with her mother whenever her mother was out of the hospital; and, from 12 to 14, she lived with her father and stepmother. The stepmother was particularly punitive and constantly reminded the patient of her mother’s illness, found similarities between the patient and her mother and told the patient that eventually she also would become “insane.”

This woman drank considerably, and the patient reports that she had numerous extramarital affairs. The home became a “hang-out” for neighborhood alcoholics. The patient did well in school in spite of all this. When the girl was 14, the stepmother sent her to live with her own mother, who at that time was living in the same town.

She recalls the time her father came to school to visit the stepmother’s children but did not come to see her. Within six months of this occurrence, the patient’s dress and behavior deteriorated severely. She began to run away from home. When her mother was hospitalized again, the patient was sent to a girls’ school. She ran away from it and was then sent to an orphanage. From there, she was sent to a reform school. She left this school when she was 18 and made her way back to her father’s home. He invited her to stay with him, but she told him that it was now too late. She decided to go to the next town, get herself a job as a barmaid, and began drinking heavily. She wandered around the country, spent time in bars, became increasingly promiscuous. She described herself as acting like a woman who didn’t know where she was going to spend the next night.

This behavior continued for 10 years, during which she had two children. The first was put up for adoption shortly after its birth; the second was left in the care of an elderly couple. Following a fight with her lover, she reverted to her previous way of life. When she returned to the village in which she had left the child with the elderly couple, she found that, during a moment of neglect, the child had fallen out of the highchair onto its head and had died.

During the period of wandering she established several relationships with alcoholic men which lasted from two to four years. There were three such men, including one whom she married; and her relationship with him consisted mainly of drinking and