



# Addressing the neurodevelopmental impacts of prenatal substance exposure: insights from a Taiwanese study on methadone maintenance treatment during pregnancy

## Letter to the Editor

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To the Editor,

I read with great interest the recent article by Uban *et al.*, titled ‘Associations between community-level patterns of prenatal alcohol and tobacco exposure on brain structure in a non-clinical sample of 6-year-old children: a South African pilot study’. The study presents valuable insights into the neurodevelopmental impacts of prenatal alcohol and tobacco exposure. Our research in Taiwan, focusing on methadone maintenance treatment during pregnancy, provides a complementary perspective that both aligns with and extends Uban *et al.*’s findings, particularly regarding developmental outcomes observed in different contexts.

Our research utilised the Bayley Scales of Infant Development to provide a longitudinal assessment of children exposed to methadone *in utero*. Similar to Uban *et al.*, we found that socio-economic and parental factors significantly influence developmental outcomes beyond the direct biological effects of prenatal substance exposure (Wei *et al.*, 2016). This underscores the necessity of considering a comprehensive array of environmental variables when examining the effects of prenatal exposures.

Uban *et al.*’s use of structural MRI and quantitative analysis enhances our understanding of the neurobehavioral implications of structural changes observed in the brain (Uban *et al.*, 2024). Our findings suggest that integrating comprehensive developmental assessments can yield a more detailed understanding of how prenatal exposures impact child development over time. This approach, which combines neuroimaging with developmental assessments, provides a robust framework for future research.

The discussion of potential confounding factors such as socio-economic status and parental care in Uban *et al.*’s study is particularly relevant. In our research, these factors consistently emerged as significant influencers of developmental outcomes (Wei & Chan, 2017). This highlights the importance of adopting a holistic approach in studying prenatal exposure effects, considering the broader environmental context.

While Uban *et al.*’s pilot study is groundbreaking, its small sample size and pilot nature limit the generalisability of the findings. Our research supports their call for larger-scale studies that can provide more definitive evidence and explore the mediating effects of various prenatal exposures on child development. Larger cohorts and more extensive research will help confirm these preliminary findings and provide a clearer understanding of the complex interactions at play.

In conclusion, our studies support and extend the findings of Uban *et al.*, emphasising the importance of combining neuroimaging with comprehensive developmental assessments. Future research should continue to explore these associations in larger cohorts, incorporating a wider range of environmental and socio-economic factors to gain a more comprehensive understanding of the impacts of prenatal exposure on child development.

Sincerely,

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