Sickness and Vomiting in Pregnancy Patient information

Many pregnant women feel sick (nausea) or vomit during early pregnancy. This can vary from mild when it can be considered a normal part of pregnancy. If you can continue to eat and drink even with the sickness, this is considered reasonably normal. The exact cause of the sickness is not known but is probably due to the hormonal changes of early pregnancy.

It can occur more commonly in some families (genetic tendency), if you have twins or triplets, if your baby is a girl and if you had sickness and vomiting in your previous pregnancies. We don't really understand why some women suffer more, but the most important thing to know is that it's not your fault and it doesn't mean there is anything wrong with your pregnancy

In this leaflet we answer some common questions about nausea and vomiting in pregnancy and provide some guidance for where you can get more information and help if you need it.

Although it is often called morning sickness, symptoms can occur at any time - not just in the morning. It usually starts from the early part of pregnancy and settles between 12 and 16 weeks. Rarely, women have some sickness throughout their entire pregnancy.

Even mild sickness and vomiting in pregnancy can be difficult to cope with. It can affect your mood, your work, your home situation and your ability to care for your family. If sickness and vomiting are really interfering with your life, particularly your ability to eat and drink, you should seek help from your doctor or midwife.

What is hyperemesis gravidarum?

If you have severe sickness and vomiting for more than a few days, you may find it hard to drink anything leading to dehydration (lack of fluid in your body) and difficulty eating enough food, causing weight loss and vitamin deficiencies. This severe sickness and vomiting in pregnancy is known as hyperemesis gravidarum.

If you have these symptoms, even for more than a few days, you need urgent, expert medical help. Treatment is effective and protects you and your baby from complications. You should see your family doctor (GP), obstetrician or attend the Emergency Room at your local hospital for advice and help.

Do sickness and vomiting affect the baby?

Not usually. The baby gets nourishment from your body's reserves even though you may not eat well when you are vomiting. The effort of retching and vomiting does not harm your baby. In fact, some studies have shown that having sickness and vomiting in early pregnancy is a good indication that your pregnancy is healthy and will have a successful outcome.

Your baby may be affected if you develop hyperemesis gravidarum and become very ill with lack of fluid in the body (dehydration) which is not treated. In this case, the most likely problem is that your baby will have a low birth weight when he or she is born. However, not all babies born to women with hyperemesis gravidarum have a low birth weight.

Do I need any special tests?

If you have mild feelings of sickness (nausea) and vomiting during pregnancy, you do not usually need any specific tests or investigations.

Sometimes your doctor or midwife will suggest some tests:

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- If your symptoms become more severe.
- If you are not able to keep any food or fluids down.
 If you start losing weight.

Investigations may include blood or urine tests to look for a another cause for your nausea and vomiting or to check how your body is coping.

What can I do to help relieve sickness and vomiting?

In most cases, as the symptoms are often mild, no specific treatment is needed. However, there are certain things that you may like to try to help relieve your symptoms. They include the following:

Eating small but frequent meals may help. Some people say that sickness is made worse by not eating anything at all. If you eat some food regularly, it may help to ease symptoms. Eat whatever you can, when you can Don't worry too much about a balanced diet at this time. There may be some foods you really want and others you can't stand. Cold meals may be better if nausea is associated with food smells.

Ginger. Some studies have shown that taking ginger tablets or syrup may be effective for relieving feelings of sickness (nausea) and vomiting in pregnancy. However, care should be taken, as the quality of ginger products varies. Before you take a ginger product, you should discuss this with a pharmacist, midwife or GP. Food containing ginger may also help.

Avoiding triggers. Some women find that a trigger can set off the sickness. For example, a smell or emotional stress. If possible, avoid anything that may trigger your symptoms.

Having lots to drink to avoid lack of fluid in the body (dehydration) may help. Drinking little and often rather than large amounts may help to prevent vomiting. Try to aim to drink at least one to two litres of some sort of fluid each a day.

Rest. Make sure that you have plenty of rest and sleep in early pregnancy. Being tired is thought to make nausea and vomiting during pregnancy worse.

Note: generally, you should not use over-the-counter remedies for sickness and vomiting whilst you are pregnant unless recommended by your doctor, midwife or pharmacist.

When are anti-sickness medicines needed?

Anti-sickness medicine may be necessary and recommended if your symptoms are persistent and severe, or do not settle with the above measures. Although it is generally recommended to avoid medicines when you are pregnant, certain medicines have been used for a number of years to treat feelings of sickness and vomiting in pregnancy and are considered safe. Some of the more commonly used medicines are pyridoxine (vitamin B6), doxylamine, promethazine, cyclizine and prochlorperazine and there is no evidence that they harm a developing baby. If these are not helpful, metoclopramide, ondansetron, ranitidine and sometimes prednisolone may be used.

Always discuss with your doctor, community pharmacist or midwife before taking an antisickness medicine when you are pregnant.

They should inform you about any possible concerns regarding using medicines for sickness and vomiting during pregnancy. Feel free to ask them any questions you have before taking medicine in pregnancy.

It is best to use medication for the shortest time possible. For some women, medication may be needed for several weeks or even months until symptoms settle.

What if these treatments do not work very well?

A small number of women need to be seen at the hospital or Day Hospital facility to be given fluids by a drip. Admission to Hospital is sometimes needed if you do not respond to medication or can't keep it down You may need to be admitted to hospital if you lose weight or can't keep enough fluid down and become too dry (dehydrated).

Other causes of vomiting

Remember, not all vomiting may be due to the pregnancy. You can still get other illnesses such as a tummy bug (gastroenteritis) or food poisoning. Sometimes a bladder or kidney infection can cause vomiting in pregnancy. You should see a doctor urgently if you develop any symptoms that you are worried about, particularly any of the following symptoms:

- Very dark urine or not passing any urine for more than eight hours.
- Stomach pains.
- High temperature (fever).
- Pain on passing urine.
- Headache not responding to paracetamol.
- Runny stools (diarrhoea).
- Yellow skin (jaundice).
- Severe weakness or feeling faint.
- Blood in your vomit.
- Repeated, unstoppable vomiting

Where can I get more information?

The following sites may be helpful if you want more information or support:

- SOMANZ Guideline for the management of nausea and vomiting in pregnancy. https://www.somanz.org/Index.asp
- Hyperemesis Gravidarum Australia: https://www.hyperemesisaustralia.org.au
- Pregnancy Sickness Support UK: https://www.pregnancysicknesssupport.org.uk/
- American College of Obstetrics and Gynecology: Morning Sickness: Nausea and Vomiting of Pregnancy: https://www.acog.org/Patients/FAQs/Morning-Sickness-Nausea-and-Vomiting-of-Pregnancy
- Various online forums and blogs are available for women to share their experiences. We cannot recommend individual sites as they do not contain supervised content.