Nausea and Vomiting During Pregnancy

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Overview

- Common problem affecting 50-90% of pregnancies between 5 and 18 weeks
 - o Peaks, in most, around 9 weeks
 - o Resolves, in most, by 16 to 18 weeks
- Reassuring, with rare exception, that your pregnancy is healthy
- Likely to recur in later pregnancies
- A full range of treatments are available

Reasons to Call your Doctor

- You lose more than 5 pounds
- Your urine output decreases and is dark yellow or orange
- You are dizzy or are have difficulty standing
- You cannot keep anything down for more than 12 hours
- You vomit repeatedly throughout the day- especially if you see blood
- You are having abdominal pain or cramping or fever
- New onset nausea after 20 weeks

Conservative (Non-drug) Measures

- Starting prenatal vitamins before pregnancy may lessen the nausea of early pregnancy
- Take your vitamins before bedtime, with a snack, instead of in the morning
- However, in some women, prenatal vitamins worsen nausea and vomiting

- o consider Flintstones chewable or folic acid 400 mcg daily instead
- Try to avoid anything in your environment that worsens your nausea
 - For example- stuffy rooms, strong smells, excessive heat/humidity,
 loud noises, motion, flickering lights, excessive exercise, being tired
- Avoid spicy, greasy, acidic (example- citrus) foods and large amounts of sugar
- Snack often; the best foods for preventing nausea are high in carbohydrate and protein and low in fat- for example, crackers, pretzels, bread/toast, nuts, low fat yogurt
- BRAT diet is often well tolerated
 - o <u>B</u>ananas, <u>R</u>ice(plain), <u>A</u>pplesauce, <u>T</u>oast(plain)
- Eat as soon as you are hungry or even before you become hungry
- Eat frequent, small meals instead of the traditional three large daily meals
- Eat cold foods- for example, have someone bake a chicken (while you are not home), strip off the meat and place it in the refrigerator; you may eat small pieces straight from the refrigerator.
- Brush your teeth right after eating
- Avoid lying down after eating
- Focus on staying well hydrated- cold, clear, sour or carbonated fluids tend to be better
 - Frequent, small sips are better tolerated than drinking a whole glass or bottle
 - o Gatorade may lessen risk of developing an electrolyte abnormality
- Ginger is an effective and natural measure to reduce nausea
 - Pregipops- sold over-the-counter at most drug stores

- o Ginger Ale
- Make your own tea using several slices of ginger root boiled with two slices of lime and sweetened with honey
- "Acupressure" wrist band- carried by most drug stores and Wal Mart
 - o P6 acupressure point
 - Located in the middle of the palm side of your wrist three finger widths above the line where your wrist joins with your hand
 - Pressure or message at this point proven to decrease nausea
- Counseling if anxious
- Heartburn makes nausea worse
 - Avoid large meals for at least four hours before bedtime
 - o There are safe and effective treatments so don't be reluctant to request

Over-the -Counter Drugs

- Vitamin B6- may combine with an antihistamine for greater benefit
 - \circ 10 25 mg three times per day
 - o Helps reduce nausea but not effective for vomiting
- Antihistamines- (caution- may cause drowsiness so do not drive after taking)
 - o Doxylamine (Unisom, Good Sense Sleep Aid)- ½ to 1 tab twice daily

 Diphenhydramine (Benadryl)- 25 mg every four to six hours as needed

Common Prescription Drugs

- Metoclopramide (Reglan)
 - o May take 10 mg four times per day
 - 30 minutes before meals and at bedtime
 - Can be especially effective for morning sickness when taken at bedtime
 - o Long history of safe use in pregnancy
 - Speeds emptying of food from stomach- emptying slows with pregnancy
 - Low risk of drowsiness
 - o Avoid long term use due to risk of developing movement disorders

• Promethazine (Phenergan)

- May use every four to six hours as needed
- may cause drowsiness, dry mouth and, rarely, muscle cramps and movement disorders
- o available in pill, suppository and topical cream
 - Topical cream, applied to wrist, less likely to cause drowsiness

• Ondansetron (Zofran)

- o Often very effective when other meds are not
- May take every 8 hours; caution- frequent use may cause severe headache
- Expensive (\$500 for thirty pills)- some insurance plans may not approve until other medication are used without relief

• Scopolamine Patch

- o expensive
- Can be very effective
- o However, frequently causes drowsiness and blurred vision

Glucocorticoids

- o Often very effective when other efforts fail
- Reserved for more difficult cases due to small risk of cleft palate in first trimester

IV Fluids

- Will rapidly reverse dehydration and reduce the risk of developing an electrolyte imbalance
- Can be given in clinic
- Reversing dehydration allows time for bowel rest; this will often reduce the need for hospital admission and more aggressive therapies

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