



1693 South Queen Street
York, Pennsylvania
17403-4694

717-845-1621
FAX 717-854-6939

NAUSEA AND VOMITING IN PREGNANCY

Nausea sometimes occurs early in pregnancy, and it usually subsides after the third month. Although it is called “morning sickness” it can happen any time of the day or night. You may never have nausea (not all women suffer from morning sickness). The cause of morning sickness is not known, but several theories have been proposed, such as high levels of estrogen or high levels of HCG present during the first trimester.

Moderately bad morning sickness may require medication to reduce nausea and vomiting and intravenous fluids to relieve dehydration. Please report the following symptoms to our office:

- Persistent vomiting shortly after eating or drinking anything, including water
- Weight loss
- Dehydration
- Concentrated, dark color urine

The doctor will review your symptoms and may do lab tests on your blood and urine. When morning sickness is severe, it is called hyperemesis gravidarum and may require hospitalization.

SELF CARE MEASURES

- Small frequent snacks instead of three large meals
- Have dry crackers or cereal at your bedside- eat them before getting out of bed since movement and an empty stomach seem to make the nausea worse. Get out of bed slowly
- Eat foods that taste good to you
- Drink fruit juices, broth, cola, Gatorade
- Separate liquid and solid food intake by 1/2 hour
- Fast foods high in carbohydrates and low in fat.
- Popsicles, lollipops, hard candy, and ice chips may be helpful
- Sip weak peppermint tea
- Avoid foods with strong or offensive odors
- At night, sleep with a window open for fresh air; during the day, take walks outdoors
- You may request a special diet for nausea and vomiting

OTHER REMEDIES

Acuband: Recent studies have confirmed the potential benefits of acupressure as a safe and effective treatment of morning sickness in early pregnancy. The techniques found to be most effective involves the use of an acupressure wrist band on either wrist that applies pressure to the Neiguan point. This technique has been effective in up to 60% of women troubled by nausea and vomiting and may be useful to treat such patients prior to resorting to medical therapy.

Emetrol: Emetrol is a pleasantly mint flavored liquid containing balanced amounts of fructose, glucose and orthophosphoric acid. Because of its local action, Emetrol works very fast to relieve nausea and vomiting. The recommended dose is 1 to 2 Tablespoons first thing in the morning, and again every three hours or on feeling nauseated. The use of this product by pregnant women has not been studied, but is based in its safe ingredients; there is no indication that Emetrol would be harmful to an unborn baby. Emetrol is available without a prescription.

MEDICATIONS FOR NAUSEA AND VOMITING

Medication controversy exists because of unknown possible effects of drugs on the fetus. Drugs in pregnancy are classified into risk categories:

Category A: Controlled studies in women fail to demonstrate a risk to the fetus in the first trimester, (there is no evidence of risk in later trimesters), and the possibility of fetal harm appears remote.

Category B: Either animal reproduction studies have not demonstrated a fetal risk, (but there are no controlled studies in pregnant women) , or animal reproductive studies have shown an adverse effect that was not confirmed in controlled studies in women in the first trimester and there is no evidence of risk in later trimesters.

Category C: Either studies in animals have revealed adverse effects on the fetus (teratogenic or embryocidal or other) and there are no controlled studies in women or studies in women and animals are not available. Drugs should be given only if the potential benefit justifies the potential risk to the fetus.

Vitamin B₆

Category A

This vitamin has been used frequently to treat nausea and vomiting in early pregnancy. It is also a component in the drug Bendectin. The manufacturer ceased producing Bendectin in 1983 because of litigation over its alleged association with congenital limb defects. Taking 10-30 mg of Vitamin B₆ at bedtime may be helpful.

Diclegis

Category A

Diclegis is a delayed-release tablet containing a combination of doxylamine and pyridoxine. Doxylamine is an antihistamine, and pyridoxine is a form of Vitamin B₆. It is used to treat nausea and vomiting in pregnancy.

Unisom**Category B**

Unisom is an antihistamine, which, because of its sedative effects is used as a sleeping aid. At one time Unisom was used to treat nausea and vomiting. It is a component of Bendectin, the only drug that was ever approved by the USFDA for specific use of treating nausea and vomiting during pregnancy. Thirty years of investigations showed it to be “safe” for the unborn child, as well as the mother. The final conclusion was that Bedectin was taken off the market for economic, not scientific reasons.

Dramamine**Category B**

Dramamine is used for the prevention and treatment of the nausea, vomiting or vertigo of motion sickness. Drowsiness may be experienced as well as headache and dizziness.

Antivert**Category B**

Also known as Meclizine, Antivert is an antihistamine used to treat nausea and vomiting, motion sickness and vertigo. Side effects include drowsiness, dry mouth, and on rare occasion, blurred vision.

Reglan**Category B**

Reglan is indicated for the prevention of nausea and vomiting. Side effects may include drowsiness, anxiety and restlessness, fatigue, insomnia, headache dizziness and confusion.

Anzemet**Category B**

Anzemet is an anti-nauseant and antiemetic agent that is occasionally used to treat nausea and vomiting. Side effects include hypotension, chest pain, syncope, bradycardia and palpitations, rash, increased sweating, constipation, anorexia, vertigo, agitation, sleep disorder, confusion, anxiety and abnormal dreaming.

Zofran**Category B**

Zofran is used to treat nausea and vomiting. Side effects include flushing, rare case of hypersensitivity, liver enzyme abnormalities, hiccups and urticaria. It is expensive and not always covered by insurance.

Steroids**Category B**

Steroids are rarely used. They are used when nothing else is effective. Side effects include fluid retention, muscle weakness, peptic ulcer, increased sweating, vertigo, headache and decreased carbohydrate tolerance.

Phenergan**Category C**

Phenergan is an antihistamine that is sometimes used for nausea in pregnancy. Most research concludes that Phenergan does not cause birth defects, despite the isolated reports of possible harmful side effects. Side effects may include drowsiness, dizziness, sedation, blurred vision, dry mouth, high or low blood pressure, and rash. Any involuntary muscle movements or unusual sensitivity to sunlight should be reported.

Compazine**Category C**

Compazine has best been used to treat nausea and vomiting of pregnancy. Although there are isolated reports of congenital defects in children exposed to Compazine in utero, the majority of the evidence indicates that this drug is safe for both mother and fetus if used occasionally and on low doses. Side effects include drowsiness, sedation, pseudo-parkinsonism, dizziness, orthostatic hypotension, tachycardia, blurred vision, dry mouth, constipation, urine retention, mild photosensitivity, skin allergic reaction, agitation, and severe muscle spasms of the neck.