



Maternity Information Leaflet

Nausea and Vomiting during Pregnancy (Including Hyperemesis Gravidarum)

Western Sussex Hospitals



NHS Trust

Nausea and vomiting when pregnant

Nausea and vomiting in pregnancy (NVP), also known as morning sickness, is very common in the early weeks of pregnancy. It doesn't put your baby at any increased risk, and usually clears up between 12 and 14 weeks of pregnancy.

Some women get a very severe form of nausea and vomiting, called hyperemesis gravidarum (HG). It's sometimes called extreme morning sickness, but is very serious. HG needs specialist treatment, sometimes in hospital.

For most women, the symptoms of nausea and vomiting in pregnancy usually begin before they're nine weeks pregnant, around six weeks after their last period. The symptoms are feeling sick and sometimes vomiting. The symptoms of NVP should improve as your pregnancy progresses. In 9 out of 10 women, symptoms disappear by the third month of pregnancy.

How common is nausea and vomiting?

Around half of all pregnant women experience nausea and vomiting, and around 3 in 10 women experience nausea without vomiting.

Nausea and vomiting usually start to get better after the first three months of pregnancy, and you'll feel some of your energy returning. However, some women experience sickness for longer than this, and about 1 woman in 10 continues to feel sick after week 20.

People sometimes consider morning sickness a minor inconvenience of pregnancy, but for some women it can have a

significant, adverse effect on their day-to-day activities and quality of life.

Treating morning sickness

If you have morning sickness, there are a number of recommended changes you could make to your diet and daily life to help reduce your symptoms.

These include:

- getting plenty of rest because tiredness can make nausea worse
- if you feel sick first thing in the morning, give yourself time to get up slowly – if possible, eat something like dry toast or a plain biscuit before you get up
- drinking plenty of fluids, such as water, and sipping them little and often rather than in large amounts, because this may help prevent vomiting
- eating small, frequent meals that are high in carbohydrate (such as bread, rice and pasta) and low in fat – most women can manage savoury foods, such as toast, crackers and crisp-bread, better than sweet or spicy foods
- eating small amounts of food often rather than several large meals, but don't stop eating
- eating cold meals rather than hot ones because they don't give off the smell that hot meals often do, which may make you feel sick
- avoiding foods or smells that make you feel sick
- avoiding drinks that are cold, tart (sharp) or sweet
- asking the people close to you for extra support and help – it helps if someone else can cook but if this isn't possible, go for bland, non-greasy foods, such as baked potatoes or pasta,

- which are simple to prepare
- distracting yourself as much as you can – often the nausea gets worse the more you think about it
- wearing comfortable clothes without tight waistbands, which can sometimes make you feel uncomfortable

Anti sickness medication

If your nausea and vomiting is severe and doesn't improve after you make changes to your diet and lifestyle, your doctor may recommend a short-term course of an anti-sickness medicine that is safe to use in pregnancy. This type of medicine is called an antiemetic, which means it helps to prevent vomiting.

Ginger

There is some evidence that ginger supplements may help reduce the symptoms of nausea and vomiting in some pregnant women. To date, there have not been any reports of adverse effects being caused by taking ginger during pregnancy.

However, ginger products are unlicensed in the UK, so buy them from a reputable source, such as a pharmacy or supermarket. Check with your pharmacist before you use ginger supplements.

Some women find that ginger biscuits or ginger ale (non alcoholic) can help reduce nausea. You can try different things to see what works for you.

Acupressure

The National Institute for Health and Clinical Excellence (NICE) advises that acupressure on the wrist may be effective in reducing symptoms of nausea in pregnancy. Acupressure involves wearing

a special band or bracelet on your forearm. Some researchers have suggested that putting pressure on certain parts of the body may cause the brain to release painkilling chemicals.

There have been no reports of any serious adverse effects caused by using acupressure during pregnancy, although some women have experienced numbness, pain and swelling in their hands.

Causes

The exact causes are unknown however researchers have suggested a number of possibilities (listed below):

- increased oestrogen levels– these tend to be highest during the first 12 weeks of pregnancy
- increased human chorionic gonadotrophin (hCG) levels
- nutritional deficiency-a lack of vitamin B6 in the diet is thought to be another possible cause (foods that contain Vit B6 include whole cereals, such as oatmeal, wheat germ and brown rice, wholemeal bread, cod, soya beans, milk, potatoes, peanuts, vegetables, bananas
- gastric problems– caused by an increase in progesterone levels

Risk factors

A number of different factors may mean you are more likely to have nausea and vomiting in pregnancy. These include:

- nausea and vomiting in a previous pregnancy
- your unborn baby being a girl
- a family history of NVP/morning sickness
- a history of motion sickness, for example in a car

- a history of nausea while using contraceptives that contain oestrogen
- obesity – where you have a body mass index (BMI) of 30 or more
- multiple pregnancies, such as twins or triplets
- first pregnancy

When to seek medical advice

If you are vomiting and can't keep any food or drink down, there is a chance that you could become dehydrated or malnourished.

Contact your doctor or midwife if you:

- have very dark-coloured urine or do not pass urine for more than eight hours
- have repeated episodes of vomiting
- are unable to keep food or fluids down for 24 hours
- feel severely weak, dizzy or faint when standing up
- have abdominal (tummy) pain
- have a high temperature (fever) of 38C (100.4F) or above
- have a racing heart rate
- vomit blood

Hyperemesis Gravidarum

Hyperemesis gravidarum (HG) is severe nausea and vomiting, which continues throughout pregnancy. This condition needs specialist treatment. HG isn't common but it can be severe, sometimes needing hospital treatment.

HG affects around 1 in 200 women, although estimates vary depending on how the condition is defined. If you're being sick all the time and can't keep food down, tell your midwife or doctor.

Symptoms of hyperemesis gravidarum include:

- prolonged and severe nausea and vomiting
- dehydration
- ketosis – a serious condition that is caused by a raised number of ketones in the blood (ketones are poisonous acidic chemicals)
- weight loss
- low blood pressure (hypotension) when standing up

The symptoms of HG can have a significant effect on your life and may lead to further complications, such as depression. Often it is impossible to keep any fluids down, and this can cause dehydration and weight loss.

Dehydration is when you don't have enough fluids in your body. If your symptoms of nausea and vomiting are so severe that you are unable to keep fluids down, seek urgent medical advice as soon as possible.

Treating Hyperemesis Gravidarum

HG needs specialist treatment, and you may need to be admitted to hospital if you are becoming dehydrated. This will enable doctors to assess your condition and give you appropriate treatment, such as increasing your fluid levels and giving you medication to manage the sickness. Sometimes HG can be managed as a day case – meaning you might not need to be admitted overnight. Your doctor will discuss this with you following the initial assessment.

HG is unlikely to cause harm to your baby. However, if it causes weight loss during pregnancy there is an increased risk that your baby may be born with a low birthweight. This will be monitored during the pregnancy.

Further Information

NHS Choices Website — www.nhs.uk

National Institute for Clinical Excellence — www.nice.org.uk

Contact details:

St Richard's Hospital, Spitalfield Lane, Chichester,
West Sussex, PO19 6SE

Labour ward: 01243 831433
Antenatal Clinic: 01243 788122 ext. 2871

Worthing Hospital, Lyndhurst Road, Worthing
West Sussex, BN11 2DH

Labour Ward: 01903 285138
Antenatal Clinic: 01903 205111 ext. 4371

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