

# Nausea and Vomiting of Pregnancy



The information in this booklet will answer some of your questions and give you tips on what you can do to help yourself.

- More than half of pregnant women experience some degree of nausea and vomiting.
- Research shows that many women with nausea and vomiting are not able to do normal activities with family, social, and work life.
- You might experience sadness and feelings of isolation.
- It might seem as though you will never feel well again.
- Most women begin to feel better around 12 weeks (three months). A few will experience symptoms for a longer time or for the whole pregnancy.
- Extra care is needed when nausea and vomiting causes you to become dehydrated, unable to keep fluids or medications down, or lose weight.

**Although extremely unpleasant,  
most women with nausea and vomiting in pregnancy  
have healthy babies.**

**If this is morning sickness, why does it last all day?**

The cause of nausea and vomiting in pregnancy is not known. We also do not know why it can last all day. For some, the symptoms can be mild and have minimal effect on a woman's life. For others, the symptoms are so severe they might need treatment or admission to the hospital.

**What can I do to feel better?**

Different things work for different people. If one suggestion on the list doesn't work for you, try another – try them all!

**Diet Strategies – Food and Fluids**

- Eat what appeals to you. Do not worry about proper nutrition while nausea persists.
- Ask someone else to do the cooking, open the windows and turn on a fan.
- You might prefer cold foods especially if cooking odors bother you.
- You might want to eat small amounts of food every 1 to 2 hours throughout the day.
- Get up slowly. Do not lie down right after eating.
- Try eating a snack before getting out of bed (crackers, dry cereal or toast).
- Avoid greasy and spicy foods unless they appeal to you and they don't cause nausea.
- Try fluids in frozen form (popsicles made from juice, ice cubes).
- Try drinking fluids between meals rather than with meals.
- Suck on hard candies.

## **Survival Strategies**

- Acupressure: Sea-Bands (also used for seasickness) are available at most pharmacies.
- Stay cool! Being too warm may increase nausea.
- Wear loose clothing, especially around your neck, chest, and waist.
- Brush your teeth or rinse your mouth after throwing up.
- Give yourself permission to rest at least two hours more than usual.
- Plan so your family or friends can take care of some of the things that you usually do (such as housework, shopping, cooking, laundry, childcare, errands).
- Avoid smells that cause nausea (cooking odors, cigarette smoke, coffee, perfume).
- If you have too much saliva (spit), it may help to spit it out into a tissue rather than trying to swallow it.

## **Are there any medications I can take?**

All women have a 1 to 5% chance of giving birth to a baby with a defect or deformity. Studies tell us this risk is not any higher when you take certain medications for nausea and vomiting.

Ask your doctor or midwife for more information about safe medications to take in pregnancy.

## Examples of medications

- pyridoxine + doxylamine (e.g. Diclectin)
  - Often used as the first medication to treat nausea and vomiting in pregnancy.
  - Takes time to start working. Can take a few days to a week after start to take to feel better.
  - Usually taken 3 times a day.
    - 1 pill in the morning
    - 1 in the afternoon
    - 2 at bedtime (these can help with morning symptoms).
- dimenhydrinate (e.g. Gravol) might be suggested.
  - Often taken 1 hour before the Diclectin doses to help you keep the Diclectin down, and help relieve nausea.
  - Available as a tablet, chewable tablet, liquid, or suppository.
- ranitidine (e.g. Zantac ) might help with heart burn, acid reflux, and nausea
  - Can be taken when needed or 2 times a day.
  - Available both with and without a prescription.
- Extra vitamin B6 (pyridoxine) has been shown to be helpful for many women.
- Ginger can lessen the severity of nausea.
- Stop your prenatal vitamin and iron supplements until you are feeling better
  - Continue to take folic acid 0.4mg to 1.0mg a day.

It is important to follow your medication calendar. They will not work as well if you take them only when you feel sick.

**Medications, amounts, and/or times might need to be adjusted to treat your symptoms. This can take time.**

## **What is a suppository and how do I use it?**

Suppositories are medications formed into a solid bullet shape. They can be easily put into the rectum (back passage). They dissolve at body temperature and the medication is absorbed into the bloodstream. They are used when someone is continuously sick or not able to take anything by mouth.

## **How to put in a rectal suppository**

1. Wash your hands. Wear disposable gloves if you wish. Open package of the suppository. You might want to moisten the suppository with a little water or lubricant such as K-Y gel.
2. Position yourself comfortably by sitting, or lying on your side with the top leg bent and the other straight. Make sure that you can easily reach your rectum.
3. Place the pointed end of the suppository on your rectum. Gently push the suppository with your finger into the rectal opening.  
Continue pushing it until you feel the tight sphincter around your finger.  
Remove your finger, leaving the suppository in.  
If you do not insert it far enough, the suppository will slide back out.
4. Tighten your sphincter muscle to hold the suppository in place. Sit or lay still for about 15 minutes to allow the suppository to work.

| Medication Calendar                           |         |           |         |         |
|---|---------|-----------|---------|---------|
| Medication                                    | Morning | Afternoon | Evening | Bedtime |
| <b>Pyridoxine + doxylamine</b><br>(Diclectin) |         |           |         |         |
| <b>Dimenhydrinate</b><br>(Gravol)             |         |           |         |         |
| <b>Ranitidine</b><br>(Zantac)                 |         |           |         |         |
| <b>Folic acid</b>                             |         |           |         |         |
|   |         |           |         |         |
|   |         |           |         |         |

## **Antepartum Program Nausea and Vomiting of Pregnancy Clinics**

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### **Jim Pattison Outpatient Care and Surgery Centre**

Maternity Clinics: Nausea and Vomiting in Pregnancy  
9750 – 140<sup>th</sup> Street, Surrey

Office: 604-582-4559

Hours: 8:45<sub>AM</sub> to 4:15<sub>PM</sub>, 7 days a week

**After hours call: 604-585-5572**  
(Surrey Memorial Hospital Triage)

### **Abbotsford Regional Hospital and Cancer Care Centre**

Maternity Unit: Antenatal Outpatient Clinic  
32900 Marshall Road, Abbotsford

Office: 604-851-4700 ext. 642242

Hours: 8:00<sub>AM</sub> to 3:00<sub>PM</sub>, 7 days a week

**After hours call: 604-851-4814**  
(Abbotsford Regional Hospital Triage)

### **Royal Columbian Hospital**

Antepartum Assessment Clinic  
330 East Columbian Street, New Westminster

Office: 604-520-4182

Hours: 7:30<sub>AM</sub> to 3:00<sub>PM</sub>, 7 days a week

[www.fraserhealth.ca](http://www.fraserhealth.ca)

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Catalogue #257208 (February 2018)

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