

Nausea and Vomiting in Pregnancy

Nausea and vomiting in pregnancy can range from “morning sickness” to severe vomiting called hyperemesis gravidarum.



What to Expect

Nausea and vomiting usually peak around week eight (8) to week twelve (12) and often improve by week sixteen (16) to twenty (20). Certain foods or smell might become triggers and make the nausea worse. There is no evidence that nausea and vomiting in pregnancy affect the success of the pregnancy.

Rarely, it can lead to nutritional issues. On rare occasions the vomiting can lead to bleeding under the placenta (placental abruption).

To date, no association has been found with increased rate of autism spectrum disorder, but more studies are needed. There is low risk of anxiety and anxiety related issues in their childhood.

Recommended Follow-Up

☐ Follow up in ___ days.

Name of Provider

Reason

Date/Time

Location

Contact Info

☐ _____

☐ _____



When to Get Help

See a pharmacist, or call 8-1-1 (7-1-1 for the hearing impaired) if:

- You have questions about your medication & condition.
- You need to refill or renew your medication.

See your health care provider, a walk-in clinic, or call 8-1-1 (7-1-1) if:

- Vomit three times per day for several days despite treatment.
- Blood in vomit – less than ¼ cup
- Weight loss (>5% of pre-pregnancy weight)
- You have questions or need more information.

Go to the nearest emergency department or urgent care if:

- Severe dehydration (dark urine, dizziness, dry mouth, weakness or fainting, no fluids down for 24 hours)
- Persistent vomiting

The information in this document is intended solely for the person to whom it was given by the health care team. This information does not replace the advice given to you by your health care provider.

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EMERGENCY CARE BC
Provincial Health Services Authority

EmergencyCareBC.ca

- Severe abdominal or chest pain/cramping
- Blood in vomit – more than ¼ cup or black diarrhea (melena)
- Calf pain or swelling

To Learn More:

- HealthLinkBC - call 8-1-1 (7-1-1 for deaf or hard of hearing) or go online to www.HealthLinkBC.ca



How to Care for Yourself at Home

Medication

Tums are a medication often recommended initially to try and decrease any reflux symptoms that are contributing. Ginger can help relieve with mild nausea. You may also get a prescription for Diclectin® (pyridoxine hydrochloride (vitamin B₆) and doxylamine succinate), metoclopramide, or ondansetron if the vomiting is severe. Dimenhydrinate (Gravol®) may also help and you can get this without a prescription – talk to your pharmacist.



Diet

Limit the triggering foods in your diet but otherwise continue to eat as you can tolerate. A high protein diet may help. Stay hydrated by sipping fluid slowly through the day. Avoid overeating, instead opting for frequent smaller meals.



Activity

Take it slow, trying to avoid sudden movements that may make you feel dizzy. Avoid triggers like certain smells or activities (riding in car).



Additional Information:

HealthLink BC: Nausea or Vomiting During Pregnancy.

<https://www.healthlinkbc.ca/pregnancy-parenting/pregnancy/your-health-during-pregnancy/nausea-or-vomiting-during-pregnancy>

REFERENCES

<https://www.bcwomens.ca/health-info/pregnancy-parenting/what-to-expect-in-pregnancy/coping-with-nausea-and-vomiting>

Find this information sheet on the ECBC website:

https://emergencycarebc.ca/clinical_resource/patient-information-sheet/nausea-and-vomiting-in-pregnancy/

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