Nausea (feeling like you need to be sick) or vomiting are common in early pregnancy. This is often worse in the morning and is commonly known as morning sickness. Nausea and vomiting usually begin around the sixth week of pregnancy due to changes in hormone levels, and settle by around 12-16 weeks. For some women, sickness can persist later into the pregnancy.

For most women, morning sickness is unpleasant but can be controlled with changes to diet, fluid and medications. The symptoms can affect your daily activities or cause you to lose time from work. For some, the sickness can be so severe that they become dehydrated and lose weight, and need to be treated in hospital with fluid and medications through a drip. This condition is known as hyperemesis gravidarum.

Some women are more likely to experience severe symptoms, including those who:

- Are expecting two or more babies.
- Have a family history of hyperemesis, or have had it in a previous pregnancy.
- Suffer from motion or travel sickness.
- Have other medical problems, such as diabetes, thyroid or liver problems.

Does it affect the baby?

Nausea and vomiting during pregnancy is very common. For the vast majority of women, the baby still gets the nutrients it needs and there will be no effect on its health or growth. In women who have severe vomiting causing weight loss, it can affect the baby’s birth weight and development. Ask your doctor or midwife if you have any concerns.

What you can do

Nausea and vomiting affects every woman differently, with different timing and triggers. You may need to try different eating times, types of food, fluid, medications and activity to find what works best for you. Here are some suggestions:

- Adequate sleep is important. Extra sleep or napping more than normal may help.
- Eat small, frequent meals or snacks, high in carbohydrate or protein and low in fat.
- Small snacks of salty carbohydrates, such as chips or cracker biscuits may help.
- Eat larger meals when your nausea is better, rather than at traditional meal times.
- Try cold food, and limiting time spent cooking food and getting others to help if possible.
- Avoid spicy foods and strong odours including cigarette smoke, perfumes and chemicals.
- Keep hydrated with regular sips of water, lemonade, ice-blocks, sports drinks, tea or soup.

Medications

Your doctor may prescribe anti-nausea (anti-emetic) medication. The following medications are frequently and safely used to treat nausea and vomiting in pregnancy:

- Vitamin B₆ (pyridoxine) – available without prescription, 25mg tablets. Usual dose is half or one tablet three times daily. Side effects are very rare.
- Doxylamine (Restavit, Dozile) – available without prescription, 25mg tablets. Usual dose is one tablet at night, adding half a tablet in the morning and afternoon if tolerated. Side effects are dry mouth and sedation or sleepiness.
Nausea and Vomiting in Pregnancy

- Metoclopramide (Maxolon, Pramin) - requires prescription, 10mg tablets. Usual dose is one tablet, up to three times a day. Side effects are mild sedation. In rare cases, it can cause restlessness or twitching.
- Ondansetron (Zofran, Ondaz, Zondan) - requires prescription, 4mg tablets or wafers. Usual dose is one tablet or wafer, twice or three times daily.

Different medications work for different people, and your requirements may change as your pregnancy progresses. Your doctor may recommend different medications or a combination.

Constipation and acid reflux may make your nausea worse. Let your doctor know if you experience these symptoms, as there may be simple treatments.

**Follow up**

It is important to arrange early follow-up with your GP, obstetrician or antenatal clinic, to check on you and your baby’s health and ensure that any medications you are taking are working for you.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Strength</th>
<th>Number of Tablets</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Example: pyridoxine</td>
<td>25mg</td>
<td>One</td>
<td>Three times daily</td>
</tr>
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</table>

**Look after yourself**

Morning sickness or hyperemesis can significantly affect your life, sometimes making it hard to go to work, meet friends or family or enjoy activities. You may feel physically or mentally exhausted, which can lead to feelings of unhappiness or depression. Your doctor or midwife can offer support and arrange help, so let them know if your health is affecting your mood.

**When to come back to the Emergency Department**

- If you are having trouble maintaining your food or fluid intake due to nausea or vomiting.
- If you are experiencing symptoms of dehydration, such as severe thirst, decreased urine, dizziness or lightheadedness.
- If you feel unable to cope with your symptoms at home.

When coming into hospital, it is helpful if you can bring your yellow (antenatal) card, your medications, any doctor’s letters, medical notes or ultrasound results.

**Seeking help:**

In a medical emergency go to your nearest emergency department or call 000.