

I AM PREGNANT

What medicines are safe?

The medicines listed below are generally regarded as safe in pregnancy. Very few studies on medications have been conducted on pregnant women. However these medications are not known to cause any birth defects or have any adverse effects on a pregnancy. Sometimes the stress and discomfort experienced by a mother by not taking a medication when necessary can have a greater negative effect on maternal-fetal well being.

MEDICATIONS	HOW DOES IT AFFECT ME AND MY BABY?
Allergy Medications	Antihistamines that make you sleepy are generally safe i.e. ChlorTripolon (<i>chlropheniramine</i>), Benadryl (<i>diphenhydramine</i>)
Antibiotics	There are a number of antibiotics that are safe for use in pregnancy as prescribed by your midwife/physician. * See prescription medicines below
Anti-depressant medications	Anti-depressant medications and the risks versus the benefits should be carefully considered for use during pregnancy. See SSRI's below.
Anti-nausea Medications	* Check with your midwife before using Diclectin – a prescription drug containing Vitamin B6 and an antihistamine/antiemetic. It is approved for use by Health Canada. Dimenhydrinate (<i>Gravol</i>) can be used for “breakthrough” vomiting.
Asthma Medications	Most asthma medications are safe and should be used as directed by your midwife/physician.
Cold Medications	For nasal congestion try nasal sprays , i.e. saline solution Salinex, Otrivin, or oral decongestants i.e. Sudafed (<i>pseudoephedrine</i>) Cough suppressants i.e. Benlyn DM (<i>Dextromethorphan</i>) and Expectorants Robitussin plain (<i>guaifenesin</i>) are generally safe products to use short term. Hot “Lemon Drinks” i.e. Neocitran are a combination of acetaminophen (<i>Tylenol</i>), NSAID's i.e. ibuprofen, acetylsalicylic acid, (<i>Advil, Aspirin</i>), cough suppressants, decongestants, & antihistamines, all of which appear to have no increased risk in the 1st and 2nd trimesters with short term use. Do not use products containing NSAID's i.e. ibuprofen, acetylsalicylic acid, in the 3rd trimester . SUMMARY: Pregnant women suffering from the common cold can be reassured about the safety of short-term use of OTC cold medications. These drugs, however, should not be used indiscriminately or for extended periods of time. In addition, use should be confined to only those products that are appropriate for the symptoms. It is important to read labels carefully.
Heartburn Medications	* Use products that say “No sodium” or “Sodium Free” Calcium carbonate (<i>Tums, Rolaids</i>) Aluminum hydroxide and Magnesium hydroxide (<i>Maalox</i>) and Alginic compound, (<i>Gaviscon</i>) are safe products. Acid suppressing drugs, i.e. Ranitidine (<i>Zantac</i>) are considered safe for use in pregnancy, especially if they enhance the pregnant mother's ability to eat appropriately and sleep well. * Check with your midwife.
Laxatives	For constipation it is best to make dietary adjustments e.g. adding fibre (bran cereal) & increasing water consumption and exercise first. Psyllium fibre bulk-forming agents, (<i>Metamucil</i>) or Psyllium Hulls can be helpful. Some laxatives/ herbal laxative teas can be used safely in pregnancy on a short term basis but consult your midwife first.

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Lice Medications	Products that contain <i>Permethrins (NIX)</i> or <i>Pyrethrins (R+C)</i> are preferred. Use as directed on the package.
Prescription Medications	There are certain instances where the use of prescription medicines are necessary for the safety of both the mother and the baby, e.g. antibiotics, anticonvulsants, insulin, anti-depressants. Choices have to be made in identifying the safest and most effective therapy for you. Treatment recommendations from your physician/midwife may vary depending on your individual circumstances: These are some of the antibiotics that are regarded as safe and can be used under a midwife's or physician's orders: <i>Penicillin, Amoxicillin, Ampicillin, Clindamycin, Erythromycin, Cephalexin and Nitrofurantoin</i> (not past 38 weeks of pregnancy).
Pain-killing or Analgesic medications	Acetaminophen (<i>Tylenol, extra-strength</i>) is safe. NSAID's i.e. ibuprofen (<i>Advil</i>), acetylsalicylic acid (<i>Aspirin</i>), naproxen (<i>Naprosen</i>) are also safe in the first 6 months but should be avoided in the 3 rd trimester of pregnancy. Codeine or other pain medications under a midwife/physician's order are safe for occasional use.
SSRI's	The use of SSRI's (selective serotonin re-uptake inhibitors) in pregnancy has not been well studied. Decisions to begin or discontinue anti-depressant medication during pregnancy need to be carefully considered. There are side-effects of the medications that affect the mother and the fetus and these risks need to be weighed against any possible benefits. There may be other resources to help reduce emotional distress and improve mood that are as effective and less concerning. Talk to your midwife/physician.
Yeast Treatments	Most vaginal creams & suppositories/ovules (<i>Canesten, Monistat</i>) are safe. Discuss with caregiver which treatment i.e. 1, 3 or 7 day is appropriate. *Do not use iodine containing products.

The brand names of products used in these tables are not an endorsement but are given as examples to help you identify and recognize products and medications. This information is presented as an educational service. It is not intended as a substitute for medical care and advice.

References:

Motherisk Program, Hospital for Sick Children, Toronto, Ontario
www.motherisk.org

College of Midwives of British Columbia
www.cmbc.ca

SSRI Antidepressants During Pregnancy: Considerations and Risks
 Canadian Women's Health Network, April 2010

www.consumerhealthdigest.com Artificial Sweeteners

www.americanpregnancy.org Artificial Sweeteners.

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What commonly used products should I be careful around?

PRODUCTS	HOW DOES IT AFFECT ME AND MY BABY?
Alcohol	A safe amount of alcohol use in pregnancy is not known and current recommendations are that safest course is not to use any alcohol in pregnancy. Excessive drinking has been known to cause birth defects and affect a baby's development. A new study has found no evidence of harm with an occasional drink before the pregnancy was known or during the course of the pregnancy.
Caffeine	Small amounts are generally safe (equivalent to 3 or less cups of coffee a day). Large amounts may increase the chances of miscarriage, preterm delivery and low birth weight.
Cigarette smoking	No smoking is best for you and your baby while you are pregnant. If you cannot quit completely cut down as much as possible. Smoking does not cause birth defects but increases the risk of low birth weight, miscarriage and preterm delivery. These risks may be reduced if you quit smoking before the 30 th week of pregnancy. Second hand smoke should also be avoided.
Hair colours and perms	Occasional use of these products are safe for use as directed. You can also check with your hairdresser. Use in a well-ventilated area.
Household cleaners	Most products are safe for use as directed. Use products in well-ventilated areas with appropriate safeguards, i.e. gloves. Do not use industrial strength products in the home.
Household Paints	If you need to paint use latex-based (water soluble) paints in well-ventilated areas. Avoid using latex paints that contain solvents such as ethylene glycol and /or biocides. Do not use oil-based paints.
Insecticides	Try a mineral oil based products such as Skin-so-Soft. Read labels of products and use sparingly, ones that contain less than 50% DEET.
Pesticides	It is best to avoid all pesticides. For home interiors, after spraying, stay out of the home 2-3 times longer than recommended by the manufacturer. Ventilate the area well.
Sugar Substitutes	Although the moderate use of artificial sweetening agents: saccharin (Sweet N Low), sodium cyclamate (Sugar Twin), sucralose (Splenda), aspartame (NutraSweet), in pregnancy is considered generally safe there is continued controversy as they cross the placenta and are excreted in breast milk. The most common health risks linked to artificial sweeteners include visual impairment, seizures, headaches, dizziness, high blood pressure, tinnitus, fibromyalgia-like muscle pain, depression, speech impairment, miscarriage and memory loss. In many countries their use is not approved. Avoidance is best. Caution and/or limited use is recommended.
Vitamins	The use of folic acid (at least 0.4 mg and preferably 1.0 mg per day) is recommended while planning for, and in early pregnancy to protect newborns from neural tube defects (spina bifida). Vitamin D (2000 IU) and Omega 3's (1000 mg) are also recommended. High amounts of Vitamin A, (more than 8000 IU) should be avoided.
Xrays	The amount of radiation from xrays is generally very small however make sure the technician knows you are pregnant and wear a lead apron over your belly.

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