Anxiety and depression

Ongoing nausea and vomiting can make you feel miserable and depressed. If you are feeling like this speak to your family and midwife/GP as soon as possible so that they can help you with this. Please don't suffer in silence.

Hospital admission

Not all women with SNVP are admitted to hospital, you may be treated in the Gynaecology Day Assessment Unit (GDAU) or the Emergency Department, then discharged home. Occasionally some women with SNVP require a hospital admission for rehydration, anti-sickness medication and rest.

Hospital discharge

Family support is also important in helping treat SNVP. It is vital that family and friends know how you feel so they can help you through this difficult time. They may be able to help especially when you go home by helping to prepare food, doing housework and helping to look after other children to allow you to get some rest.

Helpful resources

Compendium for a Healthy Pregnancy and Normal Birth *by Joan Donley.* ISBN: 0473098776. Available to borrow from the Manawatu Home Birth Association website: www.homebirthmanawatu.wordpress.com/library

Hyperemesis Education and Research Foundation (HER): www.helpher.org/mothers/survival-guide-downloads/

After reading this information are there any questions you would like to ask?

List them below and ask your midwife/ LMC at your next appointment

Feedback

If you have any concerns please talk to a member of staff providing your care. They will do their best to address your concerns.

If you are still not satisfied, you can contact our Customer Relations Coordinator, phone (06) 350 8980 or (06) 350 8974 or email customer@midcentraldhb.govt.nz

You can also provide feedback to us by completing a **"Tell Us What You Think"** form located in most services, or using our online feedback form via our website **www.midcentraldhb.govt.nz**

Severe Nausea and Vomiting in Pregnancy (SNVP)



DON'T SUFFER IN SILENCE – SEEK HELP

Nausea and vomiting in early pregnancy is very common. When the nausea and sickness becomes constant and overwhelming and you are unable to keep food or drinks down, it is then called 'hyperemesis gravidarum' or Severe Nausea and Vomiting in Pregnancy (SNVP).

You may start to feel unwell as early as the 6th week of pregnancy or when you realize that you're pregnant; this may persist for several weeks and usually improves by the 12th to 14th week. Very rarely, it may continue throughout the pregnancy.

SNVP can become a serious condition without treatment and can lead to dehydration, weight loss and malnutrition (the body unable to absorb food vital for wellbeing).

What causes SNVP?

The definite causes are poorly understood; SNVP is one of the most misunderstood and often unseen problems of pregnancy. The most likely cause is the rising levels of pregnancy hormones (chemicals produced in the body to maintain the pregnancy).

Other possible causes:

- * Family history
- * Twin pregnancies
- * An abnormal form of pregnancy called 'molar pregnancy'
- Other medical conditions such as: asthma, pre-existing diabetes, thyroid disorders, depression or psychiatric illness and GI disorder.

Signs and symptoms:

- Constant and ongoing severe nausea and vomiting (more than three or four times per day)
- * Weight loss
- * So tired that it is difficult to look after yourself or your family
- * Passing less amounts of, but more concentrated urine
- * Experiencing headaches
- * Dizziness and fainting
- * Skin becoming pale and dry.

Contact your Midwife or GP if you have been unable to keep down water or food for 24 hours or more.

Investigations

Investigations/tests may be needed if:

- * Your symptoms are severe
- * You are not able to keep any food or fluids down
- * If you start losing weight.

Blood tests and a urine sample will be taken to check how dehydrated you may be. Your midwife/ GP may check your blood pressure, pulse rate and body temperature to assess how the dehydration is affecting you.

Ultrasound scan – Your midwife/GP may arrange for you to have a scan to check that the pregnancy is progressing normally and to check the number of babies.

Relieving symptoms

- * **Eating** little but often (every 2–3 hours) may help, especially when you first wake up.
- * Take your time getting out of bed.
- * Avoid eating rich, spicy or fatty foods. Bread, crackers and cold meals may be better, especially if nausea is associated with food smells. Aim to **drink** 2–3 litres a day taking small sips at a time. Avoid alcohol and caffeine.
- * Some studies have shown that taking **ginger** in the form of biscuits, tea, tablets and drinks

(non alcoholic) may be effective for relieving nausea and vomiting.

- * Make sure that you have plenty of **rest** and get enough sleep in early pregnancy. Being tired is thought to make nausea and vomiting during pregnancy worse.
- * Move around slowly and avoid sudden movements.
- * Acupressure. P6 (wrist) acupressure may be effective for relieving nausea and vomiting in pregnancy. Acupressure is the application of pressure only and does not need needles.

Some women find homeopathic or herbal remedies effective – but check with your midwife/ GP that these are suitable during your pregnancy.

Treatment

The aim of SNVP treatment is to:

- * Rehydrate: Break the cycle of vomiting that leads to dehydration.
- * Medication: To stop/ease the nausea/vomiting Stop medication such as iron supplements that can worsen the nausea and vomiting.
- * Ensure that there are no other medical problems that could be causing the nausea and vomiting.

How is SNVP treated?

- Fluid replacement: Provided via an intravenous drip - often this is enough to start making you feel better and then you will be able to start eating and drinking again.
- * Anti-sickness medication: There are several anti-sickness medications that can be used on their own, or in combination. None of the antisickness tablets commonly used in pregnancy are known to have ill effects for the baby. If you are in hospital we can give you anti-sickness medication as an injection, once you feel better you can have this medication prescribed in a tablet form to take home.
- * **Vitamin therapy:** Initially vitamin B can be given intravenously (through a drip) but once you are feeling better vitamin B and folic acid can be taken as tablets.