

Frequently asked questions

How can I know if taking drugs has harmed my baby before I give birth?

It is important to talk to your midwife or doctor about what drug you have been taking during your pregnancy. Your midwife or doctor will be able to provide you with information about the potential side effects on your baby and support if you are finding it difficult to stop using drugs.

What if I am taking more than one drug?

Combining drugs can change their effect and the impact on a baby is not well known. There is an increased risk to your baby when some drugs are combined.

What if I have to take a prescribed medication for my own health?

If you are taking prescribed medication it is important to discuss this with your doctor. Some pregnant women may need to take ongoing medication for medical conditions such as asthma, epilepsy, diabetes, high blood pressure, depression or as analgesia for pain. Your doctor will be able to advise if the prescribed medication is necessary and safe for you to take during your pregnancy.

In some cases, prescribed medication can potentially be harmful to take while you are pregnant. Your doctor may look at changing you to a medication that is of reduced risk.

Suggestions to help you stop using drugs

- There are clinics that specialise in helping pregnant women deal with their drug use. If you are having trouble stopping, or are at risk of relapsing, talk to your midwife or doctor. They can refer you to a service that can support you through the quitting process.
- Counselling can help you make the transition from drug use by exploring personal issues and triggers for drug use, and managing stress.
- Replace things in your life that usually involve taking drugs. Think of other things to do, places to go or friends to see who do not use drugs.
- Find new ways of dealing with stressful situations such as relaxation, deep breathing, going for a walk, spending time in nature or with pets.

Support is available

If you are finding it difficult to stop using cannabis, speed or other drugs, or you have any questions, you can talk to:

- your midwife or doctor
- your child health nurse.

Or contact:

Alcohol & Drug Information Service (ADIS)
FREECALL: 1800 177 833 (Charges apply from mobile phones)

Queensland Health
13 HEALTH (13 43 25 84)
www.health.qld.gov.au/13health/

Alcohol and Drug Foundation Qld
(07) 3834 0200
www.adfq.org/

Australian Drug Information Network
www.adin.com.au

Queensland Health: Alcohol, Tobacco, and other Drugs
www.health.qld.gov.au/atod/

Australian Breastfeeding Association
www.breastfeeding.asn.au

Queensland Health Breastfeeding – information for mothers and families
www.health.qld.gov.au/breastfeeding/mother_familiesh.asp

Tobacco and Alcohol Branch
Preventative Health Directorate
Division of the Chief Health Officer
PO Box 2368, Fortitude Valley BC 4006
tel (+61)(07)3329 9833
atodweb@health.qld.gov.au
www.health.qld.gov.au/atod/

Over the counter and other drug use



in pregnancy and breastfeeding

Taking drugs or medication during pregnancy can be harmful to you and your baby.

It can be hard to know what is safe and what is not safe to take while you are pregnant. Talking openly with your doctor or midwife is the best way to find out what is safe. It is important to tell your doctor or midwife everything you are taking so they can provide the best care for you and your baby throughout your pregnancy, as well as provide information and support services if required.



How drugs can harm your unborn baby

A range of risks have been linked with drug use in pregnancy and the amount of damage to the baby depends on many things including:

- the type of drug
- the amount of drugs taken
- how often they are taken
- the stage of pregnancy
- other personal and lifestyle factors.

Prescribed medications

If you are taking prescribed medications it is important to tell your midwife or doctor as soon as you know you are pregnant. Your doctor will then discuss with you the need to continue taking the medication or if it is unsafe to take during your pregnancy. The doctor will discuss stopping or reducing the medication or where possible changing your medication to one that is safer to use during pregnancy. Your doctor will also discuss the risks and benefits of starting or stopping your medication during your pregnancy, based on the best interest of you and your baby.

Medications such as benzodiazepines are sometimes prescribed for sedation (sleeping tablets) or for the relief of anxiety. These drugs cross through the placenta and can cause a baby to become drowsy, have respiratory problems or to have less muscle tone, and can put your baby at risk of neonatal withdrawals after birth.

Over-the-counter drugs

A range of legal medications and substances, not controlled by prescription, are sold over-the-counter at pharmacies, supermarkets, convenience stores and other retail outlets. These drugs include a range of pain killers (i.e. aspirin®, Nurofen®), anti-histamines and other medications, as well as vitamins, herbal and traditional remedies. Before using any over-the-counter drugs during pregnancy or whilst breastfeeding it is best to talk to your doctor or midwife.

Cannabis

Research has shown that smoking cannabis while pregnant may increase the risk of developmental problems in children. The effects include:

- subtle effects on memory reasoning
- brain function
- impulsive behaviour
- hyperactivity and
- childhood depression.

When cannabis is mixed with tobacco your baby is exposed to two harmful drugs. Research shows that pregnant women who smoke cannabis are at a greater risk of having a baby with a low birthweight and growth concerns. A smaller baby is more likely to become distressed and labour may be more complicated. Low birthweight babies are also more likely to develop health problems in infancy and childhood.

Amphetamines

The use of amphetamine-type drugs such as speed, ice, or crystal meth and ecstasy during pregnancy can cause pregnant women to have seizures and/or heart problems and increases the chance of stillbirth, premature delivery, and miscarriage. Reduced blood flow can limit the amount of oxygen and nutrients to your baby, resulting in reduced growth and smaller head size. Amphetamine use may also affect your baby's nervous system, brain structure and development.

Heroin

Heroin use can increase the risk of miscarriage, premature birth, low birth weight and make your baby more likely to suffer from illnesses. Heroin use in pregnancy can also put your baby at risk of neonatal withdrawals after birth. Opioid Replacement Therapy is the safest way to manage heroin use during pregnancy. Your midwife or doctor can refer you to an opioid treatment program for support and treatment.

Cocaine

Using cocaine while pregnant increases your chances of miscarriage and premature birth. Cocaine can cause the placenta to separate from the wall of the uterus which can be fatal to you and your baby. Cocaine increases your heart rate, reducing blood supply and oxygen levels to your unborn baby. Cocaine use during pregnancy can lead to the baby having a low birthweight and growth concerns. Problems with aggression, attention and behaviour are also experienced by many children exposed to cocaine during pregnancy.

After the birth of your baby

Side effects from taking drugs may mean you are not able to respond to your baby's needs as easily. If you or your baby's carer is less responsive as a result of these effects, the baby may be at increased risk of injury. Some types of drugs can have a sedative effect and others may make you very tired even after the drug wears off.

Taking drugs and having baby sleep in your bed is not recommended, as some drugs may cause deep sleep and make you less responsive to your baby's needs. Sharing a bed with your baby while under the influence of a drug that causes sedation or alters your level of consciousness, or when you are very tired, increases your baby's risk of Sudden Infant Death Syndrome (SIDS) and fatal sleeping accidents.

Breastfeeding

Breastfeeding is the best option for your baby. Little is known about the long term effects of drug use while breastfeeding. However, it is recommended not to take drugs while breastfeeding.

If you decide to take drugs, you may be able to minimise the harm to your baby by breastfeeding your baby immediately before drug use or expressing milk before taking drugs, so that you have a safe supply ready to go for your baby. It is also very important that you plan for a trusted person to take care of your baby if you are taking drugs that make you feel drowsy or very tired. It is best to talk to your child health nurse or doctor if you are taking drugs while breastfeeding.