

### **What is morning sickness?**

Sickness is the nausea and vomiting that some women suffer in early pregnancy. It is thought to be caused by the sudden increase in hormones during pregnancy. Other changes such as neurologic, metabolic or psychosomatic factors may also play a part. Although morning sickness is more common in the morning, it may last all day.

### **How long will morning sickness last?**

Morning sickness is very common in early pregnancy. It tends to diminish later in pregnancy and usually ends by the second trimester (fourth month).

### **Will morning sickness hurt my baby?**

Morning sickness should not hurt your baby. Many doctors believe morning sickness is a good sign because it means the placenta is developing well. Morning sickness may be a problem if you are unable to keep any foods or fluids down and begin to lose weight. The tips below may help reduce morning sickness:

### **Tips to relieve morning sickness:**

- Eat saltine crackers and other bland foods with the onset of nausea.
- Changing the type of vitamins you are taking may help. (The amount of iron in prenatal vitamins may bother women. If you think your morning sickness is related to your vitamins, talk with your doctor. Different prenatal vitamins contain different amounts of iron).
- Eat small meals throughout the day so you are never too full or too hungry.
- Avoid rich foods.
- Eat low-fat protein foods (lean meat, broiled or canned fish, poultry without skin, eggs, boiled beans).
- Eat more Carbohydrates (plain baked potato, white rice, pasta, cereals, dry toast, fruit, fruit juices).
- Try gelatin desserts (Jell-O), Flavored frozen dessert (Popsicles), broth, non-diet ginger ale, decaffeinated or herbal teas and pretzels.

Keep in mind that your symptoms should end soon and morning sickness does not mean that your baby is sick.

This information provides a general overview on morning sickness and may not apply in each individual case.

## **Over The Counter Medications Allowed During Pregnancy and Lactation**

### **Antihistamines:**

Actifed, Benadryl, Sudafed, Chlor-Trimeton DM DM, Chlor-Trimeton D, Claritin, Claritin D

**Cough:**

Robitussin Plain, Robitussin DM, Robitussin PE (not if taking Sudafed or Brethine / Terbutaline)

**(Any cough drop that does not contain zinc)**

**Calcium Supplement:**

Tums EX (two tablets twice daily), Viactiv

**Constipation:**

Colace, Fibercon, Konsyl, Metamucil, Perdiem

- Increase dietary roughage, bran, dark green leafy vegetables, fruits daily\*\*
- Drink eight to ten glasses of water daily\*\*

**Decongestants:**

Sudafed, Sudafed Sinus, Sudafed non-drying, Actifed, Tylenol Sinus

**Diarrhea:**

Immodium AD

**Dry Skin:**

Cocoa Butter, Eucerin Lotion, Vitamin E Lotion

**Fever:**

Tylenol Plain, Tylenol Extra Strength (**2 tablets every four to six hours**)

Do not take more than 12 tablets in 24 hours

**Gas:**

Mylicon, Mylanta Antacid/Anti gas, Mylanta GAS, Phazyme

**Hemorrhoids:**

Annusol Suppository/ointment with or without cortisone, Preparation H

**Heartburn:**

Gavison, Maalox, Mylanta, Pepcid AC, Tums, Zantac

**Iron Supplement:**

Ferro-Sequels, Ferancee HP, Slow Fe

**Itch:**

Benedryl Ointment, Caladryl Lotion, Cortaid, Hydrocortisone Anti-Itch Ointment

**Nasal Spray:**

Afrin – (Do not use longer than THREE days)

Ocean and Nasal Mist – May be used as needed.

**Over the Counter Medications Allowed During Pregnancy and Lactation (Continued)**

**Nausea:**

Emetrol, Relief Band, Sea Bands, Vitamin B6 (25 mg 3 times daily)

**Pain:**

Tylenol, Tylenol Extra Strength

**Poison Ivy:**

Caladryl lotion, Ivy Dry – Clean affected area with soap and then apply medication.

**Sore Throat:**

Chloraseptic Oral Strips, Chloraseptic Spray, Sucrets or other throat lozenges.

**Sleep:**

Benadryl Plain 20-25 mg, Tylenol PM (Occasional use only- **Do not use on a daily basis**)

**Yeast:**

Femstat 3, Gynelotrimin Cream, Monistat 3 or 7 Cream/Suppositories (Insert applicator halfway only)

**Dental Procedures:**

Your dentist may use lidocaine injections, but **DO NOT USE GAS.** Tell your dentist that you're pregnant prior to any procedures. If you usually have antibiotics, prior to any dental procedures, continue to do so. (Amoxicillin 2 grams orally, one hour prior to the procedure or Azithromycin or Clarithromycin 500 mg orally, one hour prior to the procedure.)

**Miscellaneous:**

No studies have been done indicating that the following procedures have an adverse effect on fetal development: Hair color (after 1<sup>st</sup> trimester – 12 weeks), Artificial Nails, or Tooth Whitening.

**Attention:**

If you are ill or have any questions regarding various medications, please call the triage nurse and have the following information available:

Name,  
Date of Birth,  
Doctor's Name,  
Pharmacy Number,  
Name of Medication (if requesting a refill)

Thank you, the Doctor's and staff of  
The Women's Specialists of Fayette  
are available at (770)632-9900 for your questions and/or concerns.