

Obstetrics and Gynaecology

Emergency Gynae / Early Pregnancy Assessment Unit (EGU/EPAU)

Nausea and Vomiting in Pregnancy

What is Hyperemesis Gravidarum?

Around half of all pregnant women will feel sick and vomit in the early stages of pregnancy. This is often called morning sickness, but symptoms can occur at any time of the day not just in the morning. When the nausea and vomiting becomes excessive and prolonged, resulting in dehydration and loss of weight, it is known as **Hyperemesis gravidarum**.

How long will it last?

It can start as early as the fifth week of pregnancy, and may continue for several weeks and usually improve around the 12th week (Second Trimester). However it may (very rarely) continue throughout the pregnancy.

What causes it?

The exact causes are unknown, however it is believed to be related to raised levels of Beta hCG (a pregnancy hormone). As we don't know exactly what causes it, we cannot prevent it; however we aim to recognise it and treat it successfully.

Signs and symptoms

Signs and symptoms may include some of the following:

- Vomiting excessively (more than three to four times a day) and severe



Patient Information

nausea

- Excessive tiredness with some dizziness
- Passing small amounts of dark concentrated urine which may have a strong smell
- Dry skin
- Headaches
- Constipation

Can it be harmful?

If treated this condition has very little risk to you or your baby. In severe cases of hyperemesis you may become malnourished and confused.

Investigations

- A urine sample will be taken and checked for ketones (these are produced when the body breaks down its fat stores) to assess the level of dehydration and to rule out a urine infection.
- Blood tests may be required if the dehydration is severe, as indicated from the urine sample.
- Observations including blood pressure, pulse and temperature.
- If you require repeated hospital admissions then an ultrasound scan will be done to assess the pregnancy.

Treatment

- You will not be admitted to hospital if the dehydration is only mild; you will be discharged home with anti-sickness tablets. You can see your GP for a repeat prescription if required.
- If you are admitted to hospital, an intravenous drip will be attached to rehydrate you.
- Regular anti-sickness drugs will be given, either through your drip, by injection or by mouth if you can tolerate it. The drugs we give you will not cause any harm to your baby.
- Your urine will be continuously monitored for ketones until it returns to normal.
- Your bloods may be repeated if they were abnormal.
- Thiamine (a vitamin supplement) may be prescribed daily.

Patient Information

- You can eat a light diet and take fluids as you feel able.
- Your stay in hospital depends on the severity of your condition.

Discharge Advice

- You will be discharged once you can keep down food and fluids, although the feeling of nausea may still be present.
- Medication to help control the nausea or vomiting may be given; if you require more of these once you are home then please see your GP.
- If you are taking any anti-emetics, take these regularly before mealtimes or as prescribed to prevent nausea and vomiting.

Avoiding triggers of nausea

- Eat small and frequent meals or snacks. Try to eat these every 2-3 hours rather than 3 large meals. An empty stomach will make you feel more nauseous.
- Avoid any foods or smells that trigger symptoms (for example spicy or fatty foods).
- Avoid foods that have a strong smell. Eat in a well-ventilated room with relaxed surroundings.
- Try to eat cold foods. Cold meals may be more easily tolerated if nausea is smell related.
- Aim for dry and plain foods such as dry toast, plain biscuits, bread, rice, crackers and pasta bread, cereal, potato.
- Eat a small snack before going to sleep at night. This may prevent nausea in the morning when you wake up.
- If you are nauseous in the morning, eat 2-3 saltine crackers or a slice of dry toast before getting out of bed.
- Chew and swallow your foods well and slowly.
- Drink little and often rather than large amounts. Drink most of your liquids between meals. Try to drink 8 (soda pop can size) glasses of liquids every day.
- Pure (100%) fruit juice or lemonade may help your nausea.
- Do not eat high fat foods like fried foods, gravies, heavy sauces or rich desserts.

Practical Tips

Patient Information

- Always carry something to eat with you. Often you will spend most of your time too nauseated to eat, and then hunger will strike very quickly. This is your window of opportunity to eat something.
- If you are at work you should speak to your employer about allowing you to eat at your workplace or take breaks as it suits you.
- Wear loose fitting clothing around your waist.
- Try not to lie down for a couple of hours after eating.
- Avoid being very active and bending over after eating.
- Cooking smells can often make you feel nauseous. Avoid cooking as much as possible and make sure that windows are open and you are far from the kitchen while it is going on.
- Spend time outside to get fresh air. You may feel better if you do not get too hot either inside or outside of your home.

Avoiding dehydration

- Try having a bottle of water and sipping very slowly through a straw every 15-20 minutes.
- Try sucking on ice cubes made of juices.
- Freeze half of a bottle of mineral water and then top it up with fridge cold water; this keeps the water freezing cold for hours.
- Bottled mineral water may be more palatable than tap water.
- Do not drink alcohol or drinks that contain caffeine, such as soda, coffee, or black tea.

For further advice & information

For further information or advice please contact the EGU (Emergency Gynae Unit) on 024 7696 7000 or visit support groups such as Pregnancy Sickness Support: <http://www.pregnancysicknesssupport.org.uk>

HER foundation: www.hyperemesis.org

Morning Sickness Help: www.morningsicknesshelp.com

Patient Information

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 7243 and we will do our best to meet your needs.

The Trust operates a smoke free policy

To give feedback on this leaflet please email feedback@uhcw.nhs.uk

Document History

Department:	Obs & Gynae
Contact:	27000
Updated:	November 2020
Review:	November 2022
Version:	3.3
Reference:	HIC/LFT/1485/12