

Hyperemesis Gravidarum (Pregnancy Sickness)

Introduction

Nausea and vomiting in early pregnancy are very common. When the nausea and sickness become excessive and persistent to the extent that the woman is unable to keep food or liquid down, it is then called 'Hyperemesis Gravidarum'.

It may start as early as the sixth week of pregnancy, persist for several weeks and usually improves by 12th to 14th week.

Very rarely, it may continue throughout the pregnancy.

Occasionally, without treatment, it can be a serious condition due to the lack of nutrition for the mother and the developing pregnancy.

Causes

Definite causes are unknown. There may, however, be links to the normal hormonal changes in pregnancy and changes in thyroid hormone levels.

Twin pregnancies may also increase the chance of Hyperemesis Gravidarum. An abnormal form of pregnancy, called 'molar pregnancy', may also be associated with excessive sickness.

Hyperemesis Gravidarum may happen again in future pregnancies, although this does not always happen.

Signs and symptoms

These include:

- Prolonged and severe nausea and vomiting (more than three or four times a day).
- Weight loss.
- Excessive tiredness and dizziness.
- Passing smaller amounts of more concentrated urine.
- Experiencing headaches and rarely confusion.
- Skin becoming pale and dry.

These are all features of dehydration (lacking fluid), which require medical treatment.

Investigations that may be performed

Blood tests and a sample of urine will be taken to assess the degree of dehydration and to rule out the possibility of a urinary infection that may make the sickness worse. The blood pressure, pulse rate and body temperature will be measured. If you have not had an ultrasound scan, one will be arranged to confirm that the pregnancy is normal and to rule out multiple pregnancy.

Treatment

- Your treatment will depend on your symptoms (vomiting) and by the level of dehydration. The latter is indicated by the number of ketones in your urine sample.
- You will be allowed home if your vomiting is controlled and you are not dehydrated.
- If however, your vomiting is not under control, and you are getting more dehydrated, you will be advised to commence rehydration treatment either as an outpatient or as an inpatient depending on whether you fulfil a set of criteria for outpatient rehydration program.
- The treatment will involve having a cannula placed into a vein of your arm to administer fluids.
- To reduce the nausea and vomiting, anti-sickness medication may be administered either through your cannula, by injection, or oral tablet.
- Anti-sickness medications are not licensed for use in pregnancy however they appear to be safe in pregnancy.
- You may take fluids and a light diet as you feel able.
- Your blood tests and/or urine will continue to be monitored until levels are returning to normal.
- You may be given a vitamin supplement (thiamine) through your intravenous cannula.
- If you are being treated as an outpatient then you will be asked to return daily for rehydration and medication up to a total of 4 days, after which you will be discharged or considered for inpatient management.
- If you are being treated as an inpatient you will be discharged once your vomiting remains controlled and your urine ketones are negative.

Advice on discharge from hospital

You will be discharged home with oral medication to help control the nausea and vomiting.

There are certain things you can do to help yourself:

- Get plenty of rest because both emotional and physical stress can worsen nausea.
- Ask for help with other children, housework etc.
- Ensure you eat small, frequent meals and it is advisable not to drink at the same time as you eat - it is less likely to induce vomiting if you keep fluids to thirty minutes each side of food.
- Listen to your body - eat what you fancy but avoid spicy and fatty foods. Try different drinks- if you usually prefer hot drinks try cold ones and vice versa. You may find ice-lollies or ice cubes helpful to suck.
- Ginger in the form of biscuits, tea, capsules, ale or root beer may be helpful.

Alternative therapies can be helpful to relieve symptoms - these include `sea-bands` which are acupressure wristbands for travel sickness - these are available from chemists. Acupuncture can be effective to relieve symptoms.

Conclusion

Nausea and vomiting are common in pregnancy, particularly during the early stages. Rarely it may become excessive and require medical help. Although this can be a serious condition, with correct treatment there will be little harm to you or your baby, providing you follow medical advice sensibly.

Although you may need admission, we can minimise your stay with daily hydration, thus allowing you to have more time in your home environment.

