Hyperemesis Gravidarum



Patient Information

Women's Health Service

What is Hyperemesis Gravidarum?

Nausea and vomiting are the most common symptoms experienced in early pregnancy, with around 70-85% of women experiencing nausea, and 50% of pregnant women experiencing vomiting. In a smaller number of women the vomiting can be ongoing, often and severe - in these cases it is known as Hyperemesis Gravidarum.

Hyperemesis affects 1 to 10 of every 100 women and is diagnosed when the nausea and vomiting are so severe that the woman needs to be admitted to hospital. Hyperemesis usually occurs in weeks 8-12 of pregnancy and may continue until 20 weeks.

What causes Hyperemesis Gravidarum?

It is not known what causes Hyperemesis but it is believed to be caused by rising levels of hormones in your body which are needed to continue a pregnancy. Some women are more sensitive to these hormones than others. Sometimes emotions can make the symptoms of nausea or vomiting worse such as feeling worried about your family or relationship, worries about money or the pregnancy itself or many other reasons.

Women with twin pregnancies are more likely to get hyperemesis because the hormone levels are higher.

Is Hyperemesis Gravidarum harmful for me or my baby?

Hyperemesis may cause you to become dehydrated and disturb your body's electrolyte (salt) balance. You may feel tired and even more nauseated as the nutrients in your body reduce. If this is not treated for a long period of time it can lead to excessive weight loss, damage to your kidneys and liver and when very extreme, death.

When Hyperemesis is very bad, babies can sometimes be born early or may be small at birth.

These problems are very rare today if the condition is treated.

Usually some nausea and vomiting is a sign of a healthy pregnancy.

How is Hyperemesis Gravidarum treated?

Treating hyperemesis can be difficult as it is not always possible to completely stop the nausea and vomiting, and many women who suffer with hyperemesis might need to come to hospital more than once.

As part of your treatment you will be given fluid through an intravenous (IV) drip to improve your dehydration (fluid levels in your body). Most women start feeling better after this and often are able to start eating and drinking again. Some women may also benefit from anti-nausea medication to allow them to eat and drink normally.

What will happen to me when I go to hospital?

Not all women who go to the hospital with nausea and vomiting need to be admitted. When you are seen at the hospital, you will be examined to assess how dehydrated you are, you will need to give a urine and a blood sample which will be tested. Other causes of vomiting in pregnancy will be looked for (e.g. thyroid problems, urinary tract infection).

An ultrasound scan of your pregnancy will be organised to look for reasons for increased nausea and vomiting, such as a twin pregnancy. Intravenous (IV) fluids and medications may be given.

Medications can be given which help to stop the vomiting and reduce your feeling of nausea. These medicines are safe to take in pregnancy however you need to be aware that your baby will also receive small doses of these medications through the placenta. Knowing this, it is up to you whether you want to take these medications while pregnant.

Most women with hyperemesis can be looked after as day patients. Women are usually only admitted to hospital if the hyperemesis is very bad and the symptoms are difficult to get under control. Once you

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are feeling better you will be able to start eating and drinking. You may be referred to a Dietician while in hospital who will be able to talk to you about managing the nausea and maintaining eating while pregnant.

Once you begin to eat and drink again the following may be helpful:

- Try to avoid hunger as this increases nausea.
- Have a small light breakfast before getting up (breakfast in bed!).
- Eat small amounts of food often rather than the normal three large meals a day.
- Carry a water bottle and some sugar (e.g. Barley Sugars). Sports-type energy drinks may be useful, but dilute very sugary drinks such as commercial fruit juices or carbonated drinks by half.
- Eat low fat, high protein foods such as lean meat, canned fish, poultry without skin, eggs and beans, and easily digested carbohydrate such as fruit, breads, cereals, rice, pasta and potatoes. These foods provide important nutrients and may prevent low blood sugar levels, which can in turn cause nausea.
- Avoid fatty, greasy and fried foods as these are harder to digest and the smell of cooking could trigger your nausea.
- If cooking food causes you to have nausea and vomiting try to eat cold foods or get someone else to cook for you.
- Try sitting upright after meals to reduce the frequency of gastric reflux.

Family support is also important in helping to treat hyperemesis. 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 look after other children to allow you to get some rest.

Alternative remedies may also be helpful in treating hyperemesis. The most common alternative treatments are acupuncture and acupressure which apply pressure to the nausea points in your body. For some women taking ginger can be helpful – you can

try this in crystallised form or by drinking ginger ale or herb teas with ginger in them.

Unfortunately you may find after trying all of these things that you continue to have ongoing nausea and vomiting. If you continue to have abnormal blood and urine tests it may be necessary to try nasogastric feeding to treat you.

Nasogastric feeding is when a thin tube is passed through your nose and down into your stomach. A liquid food is then administered via a pump into your stomach. Some women feel much better soon after starting this treatment.

Although there are a number of treatments for hyperemesis it is not always possible to stop the symptoms completely. Sometimes you may need to come to hospital several times and you will need to be patient and we try different treatments to find the one that works for you. Most of the time the symptoms of Hyperemesis get better as your pregnancy progresses – usually after 12-14 weeks.

Further reading/websites of interest

E Medicine patient information
http://www.emedicinehealth.com/pregnancy_vomiting/article_em.htm

An up to date source of information.

Hyperemesis Education and Research Foundation www.hyperemesis.org/index.php
An education and support site for hyperemesis sufferers and their families.

There are many online forums where pregnant women can chat about common symptoms and concerns. However, it is most important that you discuss any treatments you want to try with your Midwife or Doctor as it may not be safe in pregnancy.

If you have any concerns regarding Hyperemesis and your health please contact the **Gynaecology Ward/Womens Health Assessment Unit** on **04 8060740 (24 hour coverage).**