

Frequently Asked Questions-OB

- ❑ May I have **adhesive nails** applied while pregnant?

This process has no known risk. It might be prudent to have nail solvents applied in a well-ventilated environment (M.D. Consensus 1/01).

- ❑ Can I go on **amusement rides** while pregnant?

We suggest avoiding amusement rides after the fourth month of pregnancy as the safety bar on the ride may impede the gravid uterus (M.D. consensus 10/97).

- ❑ May I use **artificial sweeteners** during pregnancy?

You may use aspartame (NutraSweet®) during pregnancy. Aspartame is composed of two amino acids (protein); research has not suggested any fetal harm (M.D. consensus 9/96).

You may use sucralose (Splenda®) during pregnancy. Most ingested sucralose is excreted unchanged in feces. Of the small amount that is absorbed, most is eliminated unchanged in urine within about 24 hours. There is no evidence of pregnancy or fetal harm in safety studies (MFL Approval 5/05).

- ❑ I have **asthma**. Should I continue to take my medications in pregnancy?

Yes. The known risk of uncontrolled asthma to the mother and fetus warrants treatment to prevent or treat asthma with medication. (MFL Approval 10/04).

- ❑ Is it unsafe to sleep or lay on one's **back** during pregnancy?

The concern about a pregnant woman lying on her back comes from the potential for the growing uterus to compress major blood vessels that run along the spine. This has probably been over-emphasized by writers of books and magazines about pregnancy. If blood flow is affected, most women find it uncomfortable to stay on their backs and will naturally shift their weight. Just a slight tilt to the hips can alleviate the problem. If you find yourself on your back when awakening from sleep, there is no concern. If you like to sleep on your back, try a small pillow or wedge placed under one hip to allow the uterus to slightly fall to one side. While a side-lying position improves blood flow from your extremities and to your uterus, there are only minor differences between the left and the right side. Either side is fine. (M.D. consensus 5/01).

- ❑ May I use **caffeine** while pregnant?

The research on caffeine safety in pregnancy is inconclusive. Some studies have suggested an increased risk of miscarriage with heavy caffeine use (the equivalent of 3 or more cups of coffee per day). Therefore, pregnant women who consume caffeine should do so in moderation (2 or less cups of coffee per day or equivalent).

Average caffeine mg./serving:
Coffee 90

Tea 60
Soda 30
Chocolate 10

Decaffeinated beverages are water processed or contain the chemical methylene Chloride in minute amounts (not thought to pose a risk to pregnancy). (M.D. Consensus 9/96).

- ❑ I am worried about **chemical exposures** in the workplace.

Your employer is mandated by the government (via OSHA) to identify all potential hazards in the workplace and to provide you with information about these hazards, including known health risks and ways to avoid exposure.

If you have concerns about chemical exposure in the workplace, discuss the matter with your supervisor (M.D. Consensus 10/97).

- ❑ May I have **chiropractic care** while pregnant?

Manipulation is acceptable. We advise that you defer x-rays until after pregnancy (M.D. Consensus 1/01).

- ❑ May I use **cortisone cream** while pregnant?

OTC strength hydrocortisone cream (0.5% or 1%) may be used (M.D. Consensus 9/96).

- ❑ Do I need to do the **Cystic Fibrosis** screening if I had a negative **sweat test** in childhood?

Yes. The sweat test is a diagnostic test; it does not identify carriers of the Cystic Fibrosis gene. (MFL Approval 10/04).

- ❑ May I have **dental cleaning** and preventative care during pregnancy?

Yes, though we advise against routine screening x-rays. (MFL Approval 10/04).

- ❑ May I have care for a **dental problem** during pregnancy?

- Yes. Diagnostic x-rays are acceptable, if deemed necessary by the dentist; the gravid pelvis should be appropriately shielded.
- Novocain anesthesia may be used.
- Antibiotic therapy may be prescribed per the "Approved Medications in Pregnancy" list.
- Percocet or Tylenol #3 may be used for analgesia. (MFL Approval 10/04).

- ❑ May I have **electrolysis** while pregnant?

We do not recommend it, due to risk of infection (M.D. Consensus 8/00).

- ❑ I am pregnant and found out that there has been a **gas leak** (or I smelled fumes) in my home.

If you smell gas, leave the house immediately and call the gas company, due to the risk of explosion. Exposure to gas or fumes does not affect the fetus if the mother is conscious; the oxygen dissociation curve of maternal and fetal blood prevents the development of fetal hypoxia.

Serum testing for carbon monoxide is of limited value as Co2 is rapidly replaced with oxygen when the person is removed from the hypoxic environment.

If the patient requires further reassurance, advise her to obtain a Co2 monitor for her home (MFL Approval 10/03).

❑ May I eat **fish** while pregnant?

In general, fish is a healthy protein choice for pregnant women. However, you should take certain precautions. Avoid eating raw seafood (e.g., sushi, oysters on the half shell) due to the possible presence of parasites or bacteria, which would be killed in the cooking process.

Fresh water fish (from lakes and rivers) may be contaminated with pollutants (such as PCBs) and therefore should be avoided. You can safely consume fish raised on "farms."

The Food and Drug Administration (FDA) recommends that pregnant women avoid eating certain kinds of fish that may contain high levels of methyl mercury, a contaminant known to be harmful to the developing nervous system of babies. Fish such as swordfish, shark, king mackerel and tilefish contain this form of mercury (M.D. Consensus 4/01).

❑ Should I use a **fluoride** supplement while pregnant?

Fluoride contributes to the development of decay-resistant dentition.

The role of fluoride in prenatal tooth development is poorly understood, and fluoride toxicity is possible. Therefore, supplementation in pregnancy is not recommended. Natural sources of fluoride are drinking water, fish, and tea (M.D. Consensus 9/96).

❑ May I process my **hair** (perm, color) while pregnant?

There is no evidence that hair processing is dangerous in pregnancy. However, a cautious approach might be to delay treatments until after the first trimester (M.D. Consensus 9/96).

❑ May I use **insect repellent** containing DEET while I am pregnant?

Yes. The Centers for Disease Control states there are no reported adverse effects following the use of repellents containing DEET in pregnancy. Furthermore, use of these products will minimize one's exposure to viruses such as West Nile. Use products with low concentration (MFL Approval 10/03).

❑ May I have **laser hair reduction** while pregnant?

We do not advise it, due to a small risk of infection (M.D. Consensus 10/00).

❑ What can I do to prevent **listeriosis** in pregnancy?

Listeriosis is a bacterial infection caused by consumption of contaminated foods. The incidence is rare (1:830 pregnant women per year in the U.S.). To prevent listeriosis, wash fruits and vegetables before using, avoid deli meats and unpasteurized dairy products. (Refer patient to ACOG *Planning Your Pregnancy and Birth*, p.396 for more information). (M.D. Consensus 1/02).

- ❑ May I have **massage** therapy while pregnant?

Yes (M.D. Consensus 1/01).

- ❑ Can I ride a **motorcycle** while pregnant?

Riding a motorcycle is not inherently dangerous to pregnancy but it is a riskier mode of transportation. If you feel uncomfortable with this risk, avoid motorcycle riding until after pregnancy (M.D. Consensus 10/97).

- ❑ Is **MSG** consumption harmful in pregnancy?

MSG has not been specifically studied in human pregnancy. In animal studies there were no teratogenic effects seen in chicks or rabbits exposed to MSG, while mouse and rat offspring demonstrated brain lesions and behavioral change.

MSG is prevalent in the food supply. Request that MSG not be added to food when dining out. Creating a diet that emphasizes whole, unprocessed foods will limit exposure (M.D. Consensus 10/97).

- ❑ During pregnancy, what can I do to prevent or treat **motion sickness**?

1. "Sea Bands," an accupressure technique worn on the wrists. They are available without prescription at pharmacies.
 2. Vitamin B-6 50 mg. tid.
- (M.D. Consensus 10/97).

- ❑ May I **paint** while pregnant?

Pregnant women may use latex paint in well-ventilated areas. Pregnant women should avoid scraping surfaces painted before 1960 due to the potential for lead contamination (M.D. Consensus 9/96).

- ❑ May I **sunbathe** or use a **tanning booth** while pregnant?

Tanning poses no pregnancy risk but does contribute to an increased risk of skin cancer and premature wrinkles in the mother. A sunscreen of SPF 15 is advised (M.D. Consensus 9/96).

- ❑ May I use **sunscreen** while I am pregnant?

Yes. The Food & Drug Administration notes that these compounds are minimally absorbed from the skin into the bloodstream. While there are no studies using these products in human pregnancy, they are not expected to be harmful (MFL Approval 10/03).

- ❑ May I use **teeth whitening** products while I am pregnant?

Since it is thought that only a small amount of the product would be absorbed, it is not thought to be harmful. However, these are relatively new products and it is advised to avoid them until more information is available (MFL Approval, 10/03).

- ❑ May I **travel** while pregnant?

In general, the answer is yes. It is safe to travel by air in pressurized cabins. Pregnant women should probably avoid travel to third world countries or very high altitudes, and to curtail travel out of New England after the 36th week of gestation. To prevent formation of blood clots during longer flights, pregnant women are advised to wear support stockings and to move the lower legs periodically. (M.D. Consensus 9/96).

- ❑ During pregnancy, how much **weight** may I lift while doing my job?

A pregnant woman may lift upwards to 25 pounds during pregnancy in the performance of her job. The amount of weight lifted at home performing activities of daily living (e.g., childcare, and housework) is at the discretion of the patient in consultation with her clinician, if appropriate.

During pregnancy, hormonal changes cause joint relaxation, thereby increasing the risk of maternal injury while lifting. In addition, a woman's center of gravity shifts forward, impeding her ability to hold weights close to her body and potentially causing balance difficulty. For these reasons, it is important for pregnant women to practice good body mechanics while lifting weight.

If you feel as though you cannot safely lift weight during the course of your job, enlist the assistance of coworkers or negotiate a job modification with your supervisor (M.D. Consensus 12/01).