## **Drug and Alcohol Treatment**

If you are not in treatment and are misusing drug and alcohol while pregnant then it is sensible to seek professional treatment.

This will be tailored to your needs depending on the type and severity of your drug use

If you are over 18 and live in Bedford Borough or Central Bedfordshire then call 0333 332 4019 or refer online at www.changeyourtomorrow.co.uk.

Please inform us that you are pregnant when you refer

## **Your Partner**

If your partner is using drugs or alcohol they can also seek help from P2R. It's important that you both receive help at the same time so that you can

## **More Resources**

If you need more generic advice around pregnancy then you can find this online at https://www.nhs.uk/pregnancy/ or via your GP



#### Sectordstire & Lutor mental health and wellbeing services provided by ELFT

## Path 2 Recovery

# Drug and Alcohol use in pregnancy

## Pregnancy and Drug and Alcohol Use

This leaflet gives information on the effects of drug and alcohol use in pregnancy.

- It may be useful to talk through these issues in a keywork session, using this leaflet
- It is not meant to scare or upset you.
- It gives accurate information to help you stop your drug or alcohol use during pregnancy. You may be feeling worried how your drinking, or drug use, may affect your baby.
- If you suffer withdrawal symptoms when you don't have a drink, or when you don't use drugs. DO NOT suddenly stop drinking or taking drugs. This can be dangerous for you and your baby.
- Seek help from your midwife or P2R keyworker.
- Most women who use drugs or alcohol will have a healthy baby,

## Looking after yourself and your baby

Street drugs like heroin and cocaine can be mixed with many things such as talcum powder, brick dust or chalk. These can damage your liver and kidneys. It is better if you only use prescribed drugs when you are pregnant.

It is important that you:

- Eat well and regularly
- Get good antenatal care
- Engage in treatment at P2R—and tell your keyworker early on that you are pregnant
- Take medication like Methadone or Buprenorphine as prescribed
- Stop taking street drugs (such as cannabis, amphetamines, ecstasy, cocaine, crack and solvents)
- If you drink alcohol dependently consider reducing make a plan with your keyworker
- If you drink occasionally consider stopping altogether

## **Alcohol Use**

Alcohol crosses freely through the placenta to the baby. It can cause problems including small babies, premature birth and miscarriage

There is no time in pregnancy where drinking is considered safe. Drinking should be avoided. Even occasional binge drinking may be harmful to your baby (more than 6 units at any one time).

Moderate or binge drinking can cause long term learning and behavioural problems that persist throughout life. Foetal Alcohol Syndrome is a rare condition caused by drinking in pregnancy. It can affect brain development, and cause learning and behavioural problems in children which continue throughout life.

If you are drinking alcohol regularly, or dependently it's important to talk to your keyworker about reducing.

You must NEVER to stop drinking suddenly when you are dependent – you may have seizures, this can be dangerous for you and baby.

## **Opioids and Opiates**

Sometimes your GP may prescribe you an opiate based medication for pain relief. These opiates will pass through the placenta to your baby - if you take these drugs, your baby also receives them. All opiates, used over time, will cause dependency

If you are pregnant and using drugs like heroin or methadone they also pass to your baby through the placenta. If you experience withdrawal symptoms from opiates, so will your baby.

If you use opiate based drugs do NOT just stop taking your medication. This may cause withdrawal symptoms to you and your baby. This may increase the risk of miscarriage or premature birth.

Work with your keyworker at P2R who can help you stabilise or reduce your opiate/opioid use.

## Withdrawal from Opiates

Babies whose mothers have been taking opiates may show signs of withdrawal from the drug, but can safely be treated in hospital. Withdrawal symptoms, might include:

- Fever
- Excessive sneezing
- Trembling
- Irritability
- Vomiting
- Diarrhoea
- Continual crying
- These babies are also at increased risk of cot death

If your baby does suffer from withdrawal following birth the midwives and neonatal staff are trained to help you care for your baby.

## Cocaine

Cocaine use in pregnancy can affect you and your unborn baby in many ways. During the early stages of pregnancy, it may increase the risk of miscarriage. Later in Pregnancy it can trigger early labour - it reduces blood flow to the placenta and causes poor growth. As a result cocaine exposed babies are more likely to be born of low birth weight and have more health problems, including urinary tract infections and heart defects. Cocaine may also cause an unborn baby to have a stroke. This can result in irreversible brain damage and sometimes the baby will die in the womb (still birth). Cocaine may cause the placenta to peel away from the wall of the uterus (womb) during pregnancy causing a large bleed. This is called a placental abruption. Immediate delivery by caesarean section is necessary.

Babies who are regularly exposed to cocaine before birth sometimes have feeding difficulties and sleep disturbance. As newborns they may be irritable, jittery and they may startle and cry at the gentlest touch and sound. These babies may be difficult to comfort because they are suffering the withdrawal from these drugs. Generally, these behavioural disturbances are temporary and will resolve over the next few months.

## Caffeine

Excessive caffeine consumption (over five mugs of coffee per day) may over stimulate the baby and cause it to be wakeful and fussy

## **Breastfeeding and Alcohol Use**

Alcohol freely passes in to breast milk. During the first year of life your baby's brain is still developing at a rapid rate. It is possible that heavy drinking may affect your baby's brain development.

Alcohol can disturb your baby's sleep pattern and reduce your milk supply. It is better to avoid drinking alcohol as much as possible. If you do drink, it is better not to breastfeed.

## **Benzodiazepines**

Benzodiazepines pass freely across the placenta to the baby. Benzodiazepines are sedatives, often used to stop anxiety. They are very addictive and dependency can develop quickly. Benzodiazepine usage in pregnancy has been linked to facial abnormalities – like increased risk of cleft palate. Even moderate amounts of benzodiazepines used in pregnancy cause withdrawal symptoms in your baby including: Breathing difficulties, disturbed sleep patterns, sweating, fever, feeding difficulties

High benzodiazepine use in the later part of your pregnancy can lead to your baby being born 'floppy' and slow to breath. Your baby may have difficulty sucking and swallowing. Please work with your keyworker on a slow safe reduction plan.

## **Ecstasy and Amphetamines**

The effects of ecstasy use during pregnancy are not fully known. There may be an increased risk of heart defects and skeletal deformities. Babies exposed to ecstasy may face some of the same risks as babies exposed to other forms of stimulants like amphetamines and crystal meth. Some research suggests increased risk of birth defects including cleft palate and heart and lung defects.

There may also be pregnancy complications. These include high blood pressure which can slow down your baby's growth, by reducing blood flow to the baby. Other complications can be premature birth. Being born too early can lead to breathing difficulties for your baby because their lungs are not fully developed. Babies who are exposed to amphetamines appear to undergo withdrawal symptoms, including jitteriness, drowsiness, breathing Problems

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### Cannabis

Cannabis use in pregnancy can affect brain development of the unborn. When cannabis is smoked, it's estimated that it can give off three times as much tar and five times more carbon monoxide than smoking a tobacco cigarette. If smoked with tobacco there is also an increased chance of your baby being smaller than average, increased risk of sudden death and many other pregnancy complications.

It is safe to stop smoking cannabis, your keyworker can help support you.

## **Cannabis and Breastfeeding**

If you intend to breastfeed, it's probably best not to smoke. Breast milk is high in fat. The chemical in cannabis attaches to fatty tissue and can remain in your baby's body for several weeks. Large amounts of cannabis can be passed through the breast milk for several hours after smoking cannabis.

The brain and nervous system of newborns continues to develop until they are about 18 months old. Babies exposed to cannabis through mother's milk are at an increased risk of experiencing delays in physical development (for example, holding objects, co-ordination, crawling and walking). Babies and children should be kept away from cannabis smoke. People who smoke should do so outside your home and away from your baby. Babies exposed to cannabis during pregnancy may be more likely to exhibit behavioural changes as older children

### Nicotine

If a mother smokes less than 20 cigarettes a day the risk to her baby from nicotine in the breast milk are small. Heavier smoking can reduce the mother's milk supply by affecting the let-down and milk flow. On rare occasions it can cause the baby to have sickness & diarrhoea