

Let's have a conversation about



OPIOID USEDURING PREGNANCY

and beyond



PEOPLE WHO ARE PREGNANT, TRYING TO GET PREGNANT OR BREASTFEEDING

are encouraged not to use opioids for the health of their baby. Opioids include both prescription pain medications such as oxycodone, Percocet®, and morphine; and illicit drugs such as heroin and fentanyl. Opioid pain medications may be prescribed for severe or chronic pain but unfortunately can be highly addictive. If you are pregnant or planning to become pregnant talk to your health care provider about the risks, benefits, and other options for pain control before taking opioids. While nothing beats an open conversation with your health care provider, here are some facts about the risks of opioid use during pregnancy to help inform that next conversation.

IS ANY AMOUNT SAFE?

Illicit opioids like heroin and fentanyl are never recommended during pregnancy and pose significant risks to both pregnant people and their babies. If you are using illicit opioids, please talk to your health care provider about starting treatment with Methadone or Buprenorphine as these are safe alternatives during pregnancy. Prescription opioid pain medications are strong narcotics and their use also carries a risk. Speak with your health care provider and together you can decide the safest way to manage pain during pregnancy.

HOW CAN OPIOID USE AFFECT MY BABY?

The use of illicit or opioid pain medications during pregnancy have both been linked to health problems for the pregnant person and baby, including overdose. Babies can be born too early, have poor growth, or be stillborn. For the best chance for a healthy pregnancy, talk to your health care provider about opioid management options to reduce the negative effects for you or the baby.

About half of infants whose mothers use opioids during pregnancy develop symptoms of withdrawal after birth. This is called neonatal abstinence syndrome (NAS). Symptoms can range from fussiness and tight muscles to poor sleep and problems feeding. Babies are monitored for several days in the hospital after birth and supported until any symptoms improve. Most babies have mild or moderate symptoms that resolve without treatment, a few babies will need medication to treat symptoms of NAS.

I USED OPIOIDS BEFORE I KNEW I WAS PREGNANT, WHAT SHOULD I DO?

By stopping use when you found out you were pregnant, the negative effects on the developing baby will be lessened. If you continue use opioids regularly during pregnancy, please talk with a health care provider about supports for managing or stopping use.

WHAT IF THEY WERE PRESCRIBED?

If you take prescription opioid pain medications, talk to your health care provider about your prescription before stopping. You can discuss any risks associated with continuing the prescription and talk about other alternatives.

WHAT IF THEY WERE NOT PRESCRIBED?

If you are using illicit opioids or opioid pain medications without a prescription, talk to a health care provider about safe methods to stop or decrease use. Do not suddenly stop taking opioids as there are significant risks associated with opioid withdrawal for both you and your baby. The best thing you can do is to talk to your health care provider to help understand your reasons for use and find both support and treatment to ensure your pregnancy is as healthy as possible.

ARE MAINTENANCE TREATMENT PROGRAMS SAFER?

When combined with prenatal care and a treatment program, medications for addiction treatment (MAT) such as Methadone and Buprenorphine can lead to a healthier pregnancy. Engaging in a maintenance program can also connect you to community resources and peer recovery supports.

WHAT ABOUT BREASTFEEDING?

Breastfeeding is good for babies and is encouraged whenever it is safe. As opioids can pass through breastmilk to the baby causing sleepiness, slowed breathing and feeding problems, it is important to take opioid pain medications only when needed and exactly as prescribed. Breastfeeding is not recommended when there is continued use of illicit or non-prescribed opioids as the side effects on the baby can be much more severe. Pregnant people who are engaged in maintenance treatment including MAT are encouraged to breastfeed as only small amounts pass into breastmilk and it can help lessen symptoms of withdrawal for your baby after birth.

WHERE CAN I GET HELP?

If you continue to use opioids even when you don't want to or know you shouldn't or have tried to quit but can't, you may benefit from formal support to stop using. There are counselors, peer recovery coaches, and 12 step programs that may give you the support you need to stop. VTHelplink.org has information about treatment options. Your health care provider is another resource to help find a care method that works for you.

WHERE CAN I FIND MORE INFORMATION?

Visit VTHelplink.org, call 802.565.LINK (5465) or talk to your health care provider.

For more information, there's no better resource than your health care provider. Remember, they're not there to judge.

They're there to help you have the healthiest pregnancy possible by keeping the conversation going.



