



Pregnancy  
Sickness  
Support

## Information for media

[www.pregnancysicknesssupport.org.uk](http://www.pregnancysicknesssupport.org.uk)

### **What is difference between morning sickness and hyperemesis gravidarum?**

“Morning Sickness”, or as we prefer to say, Pregnancy Sickness (as it is rarely confined to the morning) is a fairly normal part of pregnancy, affecting up to 80% of pregnant women. Although it is generally considered pretty unpleasant it should not interfere with a woman's ability to function normally and her ability to eat and drink normal normally. When mild, pregnancy sickness, can be improved with a range of self help techniques such as eating little and often, resting, avoiding triggers such as odours and caffeinated drinks and possibly with remedies such as ginger (as a 250mg capsule 4 times a day... not as a ginger biscuit!).

Hyperemesis Gravidarum (HG) is a severe complication of pregnancy and NOT a normal part of it. When a woman had HG she will find normal functioning very difficult and struggle to maintain adequate food and fluid intake. Women can experience vomiting in excess of 30 times per day, dry retching and feel severely nauseous constantly. The condition is characterised by dehydration and weight loss of more than 5% of pre-pregnancy weight (weight loss can be up to or in excess of 20% of pre-pregnancy weight). Other symptoms women with HG may experience include extremely heightened sense of smell, extreme fatigue, headaches, depression and extreme isolation.

HG can lead to more severe complications including oesophageal tears, muscle wasting and risk of DVT from bed rest, serious vitamin deficiency from excessive vomiting and complications from extreme dehydration. Recent research has shown increased risk of placental abruption and small for gestational age babies in cases of HG continuing in 2<sup>nd</sup> trimester. Before IV fluid was introduced HG was the leading cause of death in early pregnancy.

See chart also.

### **How common is it?**

HG affects 1-2% of pregnant women. Extreme pregnancy sickness, which does not result in hospital admission, may affect many, many more pregnant women and countless number of pregnant women are suffering at home without treatment.

### **Do we know what causes it?**

The exact mechanism of Pregnancy Sickness is not fully understood but it is suspected that it is due to the hormones produced during pregnancy, which are at their highest levels in the first trimester. (for interested healthcare professionals there is further information on our website)

### **What is treatment?**

There are a number of treatments available and there is information about the various options on our website. Initially though, an old fashioned antihistamine, such as Cyclizine combined with

Pyridoxine (Vitamin B6) is thoroughly proven to be safe and effective; it is these components that make up a drug called Diclectin which is licensed in Canada for treatment of nausea and vomiting in pregnancy! If this treatment is started early it is very safe and effective. In subsequent pregnancies using this pre-emptively is found to significantly reduce the severity of the condition

### **What is PSS?**

Pregnancy Sickness Support is the only national charity for Pregnancy Sickness and Hyperemesis Gravidarum. Our aims are to not only to provide information and support for women suffering with the condition and their carers but also raise awareness both in the public and within the medical field about this little known and often misunderstood condition. We are involved in ongoing research and we provide information and education to the public, healthcare professionals and the media.

### **How important is family and friend support and what does PSS offer?**

Support is hugely important, in fact, it cannot be overstated. The condition is so massively debilitating and in first pregnancies can be sudden, totally unexpected and really quite scary. What was supposed to be a happy and exciting time can rapidly become a horrible depressing nightmare! Often the nausea is just as bad, if not worse than the vomiting and it can be hard for people around to understand because they can't see it. HG is hugely isolating as the sufferer is often bed-bound and well meaning comments such as trying alternative therapies, getting fresh air or thinking positively can really add to that sense of isolation as it highlights to the sufferer that no one understands how seriously ill they feel. The reality is that it is very hard to understand if you have not been through it and that is why we have developed a national peer support network of women who have suffered HG and want to support others suffering. We can provide telephone, email or text support and on occasion supporters may visit sufferers at home or in hospital. We also provide information leaflets and have support on facebook and twitter.

### **Referral by GP, Midwife or self-referral?**

A woman can be referred to us by a healthcare professional, a relative or they can contact us themselves. The website is very easy to use and someone should get back to them usually within 24hrs. We also support partners and relatives of sufferers.

### **Do you need more volunteers and do they require training or are they 'mums with personal experience'?**

We do need more volunteers not just to support women but also for fund raising and awareness raising such as leaflet distribution. Our supporters are mums with personal experience but they do have training also. Volunteers wanting to raise awareness and fund raise for us do not need personal experience; we welcome any support!

### **Anything else you would like to add?**

Our key message is that pregnancy sickness is not "just morning sickness", it is on a spectrum; at the extreme end of that spectrum it can be so severe is it life threatening. But well before that extreme end, it is a very horrible and debilitating condition which can seriously impact on a woman's ability to function, let alone enjoy her pregnancy. We would like to see far greater recognition of this condition by healthcare professionals and more proactive treatment so that women are not left to suffer in silence under the illusion that "it's normal" in the way so many are now.