



Pregnancy  
Sickness  
Support

## Preparing for an HG pregnancy Personal Worksheet

### Disclaimer:

None of the information provided on this website is meant to suggest any medical course of action. Instead the information is intended to inform and to raise awareness so that these issues can be discussed by / with qualified Healthcare Professionals with their patients. The responsibility for any medical treatment rests with the prescriber.

The intention of this work sheet is to help you prepare for a pregnancy and think through your previous experience to help make a plan in advance of this one.

### Think about your care providers:

Was your GP supportive and sympathetic?    Yes            No

    If No is changing GP an option?    Yes            No

Did you see a consultant and was he/she helpful?    Yes            No

\* If your consultant previously was good than ask to be referred for a pre-pregnancy consultation

Was your midwife helpful and supportive?    Yes            No

    If no is there the option of other midwives in the area?    Yes    No

\*There is helpful information for midwives on our website

Were your family and friends helpful and supportive?    Yes    No

Have you got plans for childcare in place if required?    Yes    No

**Your current state of health:**

Are you fit and healthy?

Height \_\_\_\_\_

Weight \_\_\_\_\_

Use google to work out your BMI \_\_\_\_\_

Do you need to put on weight or lose some weight before this pregnancy? It is good to have some reserves to loose but it is not good to be overweight – write your own plan here:

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**In your last pregnancy what medications helped and what didn't:**

**Last pregnancy I tried:** Buccastem, Pyridoxine (vitamin B6), Promethazine, Cyclizine, Stemetil, Metoclopramide, Ranitidine, Omeprazole, Domperidone, Ondansetron (alongside lactulose), steroids, other.....(delete/add as appropriate)

**Other things I tried:** Hypnotherapy, acupuncture and acupressure bands, ginger capsules (250mg X 4 per day), other.....

What worked.....

What did not work.....

Side effects I experienced.....

I do not want to try ..... again.

The most helpful medications were .....

Medications I did not try last time but would like to discuss with the doctor this time are .....

Were you able to keep oral medications down? Yes No

Were you offered dissolvable medications or suppositories? Yes No

**Hospital admission:**

If you were admitted to hospital during your last pregnancy how did you find it?

I.e A relief to be in hospital and receiving fluid and medication IV or Distressing and stressful

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If you found it stressful and distressing then can you pin point why? i.e. admission via a&e, unsympathetic staff, disturbed sleep, busy ward, smells, sensory stimulation, separation from husband/children etc., side effects from treatments, needle phobia

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If you had the option of IV as a day patient did you prefer that? Yes No

Do you know about other services in your local area, such as Hospital at Home, Acute Care at Home as an alternative to hospital admission?

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**Preparing for your next pregnancy:**

Do you hope to try pre-emptive medication? Yes No

- Diclectin. Used as a pre-emptive treatment has been found to lessen severity and shortens length of sickness, KOREN, G. & MALTEPE, C. (2004) Pre-emptive therapy for severe nausea and vomiting of pregnancy and hyperemesis gravidarum. *J Obstet Gynaecol*, 24, 530-3.) Starting treatment early is found to be most effective. It is a Canadian drug but the procedure of how to get this in the UK at <http://www.pregnancysicknesssupport.org.uk/healthcare-professionals/medication/obtaining-diclectin/>. Effectively treating symptoms early in pregnancy can make a woman less sick and decrease the time it takes to recover. Delaying treatment until you have been vomiting for several weeks makes it harder to gain control over the vomiting cycle. [Maltepe, C. and Koren, G. \(2013\). "Preemptive Treatment of](#)

[Nausea and Vomiting of Pregnancy: Results of a Randomized Controlled Trial." Obstetrics and Gynecology International](http://dx.doi.org/10.1155/2013/809787) Volume 2013, Article ID 809787, 8 pages  
<http://dx.doi.org/10.1155/2013/809787>

- Realistically it is unlikely a GP will obtain Diclectin for you but the components of Diclectin are an old fashioned antihistamine such as cyclizine (50mg 3 x a day) or promethazine (Avomine) (25mg 3 x a day) in combination with pyridoxine (vitamin B6) (10 mg 4 X a day). A GP should be able to prescribe these. You can point them to research on our website if they need further information.

**Other medications I wish to be considered:** Buccastem, Pyridoxine (vitamin B6), Promethazine, Cyclizine, Stemetil, Metoclopramide, Ranitidine, Omeprazole, Domperidone, Ondansetron (alongside lactulose), steroids, other.....(delete/add as appropriate)

**Hospital admission:**

- Do you want to request day patient treatment if it is available? Bear in mind there are pros and cons, such as extra travelling and extra needles for new IV sites!
- If you went through a&e last time can you avoid that this time?
- Do you have a preferred hospital to go to?

Any other things for you to consider such as child care, managing house work, cooking and shopping, employment (information about rights on our website) and any other factors which need to be planned for in this pregnancy:

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