

Medicines for Mommies

This guide will help answer some questions about using medicines during pregnancy. Please feel free to ask us any questions left unanswered.

Prenatal Vitamins: Every pregnant woman should be taking vitamins. Non-prescription prenatal vitamins are fine. If you are having trouble taking a prenatal vitamin because of nausea, constipation, or some other reason, please discuss it with us. We can find solutions for most problems. Taking the vitamin with your largest meal or before bedtime usually decreases problems.

Calcium: Most prenatal vitamins have very little calcium in them, usually 200mg. (Natafort has no calcium.) You need **1200 mg of Calcium every day** to build your baby's bones. You can get calcium from your diet or a supplement. To get all the calcium from your diet you would have to eat and drink 4 portions (300mg) a day; an 8oz glass of milk, a cup of yogurt, a large portion of cheese, or a bowl of ice cream. It's not a problem if you don't like milk. Don't drink a lot of chocolate milk just to get calcium. An 8oz Tropicana Pure Premium calcium fortified orange juice has 350mg of calcium. The Viactive chocolate chews have 500mg of calcium in each square. At the end of the day while brushing your teeth, count your calcium intake. Take the amount that is missing as a calcium tablet or Tums. There is a 600mg extra strength E-X Tums and a 400 mg regular strength Tums.

Allergies: Many women can stay on their allergy medicine during pregnancy. If you just need an antihistamine occasionally, **Benadryl** (Diphenhydramine) or **Claritin** are fine. Remember that many decongestants, like **Afrin** (Oxymetazoline HCL) can cause dependence or rebound congestion.

Backache: is common in pregnancy. Hot water bottles are great around the house. Heating pads, hot baths and massages from a loving family member or friend help too. Back support belts can be bought at some maternity stores. See Pain Relief.

Colds: are usually caused by viruses, so an antibiotic will not help in most cases. All you can do is treat each symptom.

Aches: Rest is the best thing. See pain relief.

Congestion: Sudafed (Pseudoephedrine HCL) helps congestion. Avoid if possible during the first and late third trimesters. It can raise your blood pressure. Remember that many decongestants, like Afrin (Oxymetazoline HCL), cause dependence or rebound congestion. If you have old decongestants in your cabinet, make sure they do not contain phenylpropanolamine. It has been pulled from the market. Also avoid phenylephrine, another decongestant.

Cough: Cough drops are fine. Use Robitussin (Guaifenesin) with or without DM, (Dextromethorphan). Be sure the product does not contain alcohol. For strong coughs ask us for a prescription cough suppressant.

Runny Nose: Antihistamines dry up body fluids. **Chlor-Trimeton** and **Benadryl** (Diphenhydramine) work well. Please drink lots of fluids if you take them. And remember, antihistamines can cause drowsiness.

Sore Throat: **Cough drops** and **Throat lozenges**. A hot steam vaporizer at night will help many symptoms. See pain relief.

Constipation: is easy to prevent. Drink lots of fluids. Buy a stool softener called **Colace** (docusate sodium). It is a red gel capsule. Take 2 at night with a half glass of water if you did not have a soft, painless bowel movement that day. This will prevent constipation the following day. It's alright if you need the stool softener every night. It will not harm the baby and will not cause dependence like a laxative can. If you are still having hard stools using docusate sodium at night, start drinking a teaspoon full of **Metamucil** (Powdered fiber) every morning in a glass of water. Also, cereals with good fiber are "All Bran with Extra Fiber", "Raisin Bran" and "Fiber One." If your constipation is bad use **Milk of Magnesia**, a **Fleet enema** or both. Rectal **Glycerine suppositories** are safe. See Hemorrhoids for more information.

Diarrhea: Remember to drink lots of fluids, especially sports drinks. Do not use Pepto-Bismol or other products containing Bismuth. If it lasts more than a few hours you can ask us for a prescription medicine.

Fever: Call the office for a fever above 100.4 Fahrenheit. For lower fever, use **Tylenol**. See Pain Relief for doses. Remember to drink a lot of fluids and rest.

Gas Pain: Use products with **Simethicone** like Mylicon, Mylanta Gas or Maalox Ant-Gas or a generic brand. Drops, tablets and gel tabs are all fine.

Heartburn or Indigestion: is common throughout pregnancy. Tums often helps, see **Calcium**. You can also use Maalox or Mylanta. Do not use Pepto-Bismol or other products containing Bismuth. Avoid Alka-Seltzer, it contains Aspirin.

Headaches: can be frequent in early pregnancy. See Pain Relief. There are prescription pain medications for migraines.

Hemorrhoids: The best way to prevent hemorrhoids is to prevent constipation. If you already have hemorrhoids they may not go away in pregnancy, but you can keep them from getting worse by preventing constipation. If your hemorrhoids are painful or bleeding you need to treat them with an over-the-counter hemorrhoid medicine. Ointment is a better water repellent than cream. Make sure it has **1% Cortisone** for healing. Buy the least expensive brand. Usually Preparation H is the most expensive. Witch Hazel Pads (Tucks medicated pads) help too. For severe pain there are prescription medicines.

Ligament Pain: is the most common from the 15th to 20th week of pregnancy. The ligaments that hold the uterus in place begin stretching. The pains are usually sudden and sharp in the lower pelvic area. They do not last a long time and are harmless. Contact us for any sharp pains that last for a long time, or if there is also a fever.

Nausea and Vomiting: usually gets better after the first trimester, unless it is caused by illness. Drink small sips of water throughout the day. Eat in smaller portions, and snack consistently throughout the day. Eating protein rich foods will help most with the nausea. Also ok to try over-the-counter ginger supplements. If none of your tricks are working, ask us for recommendations or a prescription.

Pain Relief: Tylenol is the only over-the-counter pain reliever that you can use. NSAIDS like Ibuprofen (Motrin, Advil) are not safe in late pregnancy. We do use them in certain situations, but please only take them when we advise it. Also, avoid Aspirin. Tylenol (Acetaminophen) is safe for the baby, if taken correctly. Regular strength is 325mg. Two every 4 hours is the correct dose. Only take 3 for very strong pain. Extra strength is 500mg. Two every 6 hours is the correct dose for very strong pain. Try to take just 1½ tablets or 2 regular strength. Never take 3 extra strength tablets. If this does not help the pain enough, ask us. There are prescription pain relievers we can give you.

Sciatic Pain: The sciatic nerve is the biggest nerve in the body. It runs from the buttocks down the back of the legs. It gets irritated easily in pregnancy and produces sharp pains. These pains are harmless, but they can make movement difficult. Pain relievers may help some. A few women will need physical therapy. Some women will need to limit activity.

Sleeping Problems: Women complain the most about trouble sleeping at the end of pregnancy. One or two **Benadryl 25mg** (Diphenhydramine) 1 hour before bed is not harmful to the baby and may help you sleep. If you need more help ask us.

Yeast: All of the over-the-counter yeast meds are okay all through pregnancy. The anti-yeast pill, Diflucan, may not be used during pregnancy. You can help prevent yeast by taking acidophilus, a healthy milk bacteria. It is found as a tablet or in certain milk and yogurt, indicated on the label.