

# PREGNANCY PROBLEMS: A GUIDE FOR PHARMACY

Pregnancy causes many changes to the body, some of which can result in troublesome symptoms. Here we explain what pharmacy teams can do to help women seeking advice.

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- Causes
- Symptoms
- Advice
- Referral

## 1 CARDIOVASCULAR SYSTEM

### FEELING FAINT

- Hypotension (low blood pressure) caused by physiological changes during pregnancy and pressure of the uterus on a major vein that takes blood from the lower extremities to the heart.
- Often include sudden ringing in the ears, sweating, fast deep breathing and/or dizziness.
- Sit or lie down on your side. Get up slowly.
- Refer to GP or midwife if fainting occurs.

### SWOLLEN EXTREMITIES

- Increased blood volume and water retention, along with reduced blood flow, causes fluid to leak into surrounding tissues.
- Feet, ankles, legs and fingers appear swollen.
- Stay hydrated. Avoid standing for long periods and raise the feet and legs whenever possible. Wearing comfortable shoes, walking and daily leg and calf stretches can help.
- Sudden swelling of the hands or feet can be a sign of pre-eclampsia, which requires immediate referral to a doctor. Swelling, along with persistent pain, usually in one leg, redness, warmth and tenderness may also indicate a blood clot (deep vein thrombosis), which requires immediate referral.

### ITCHING

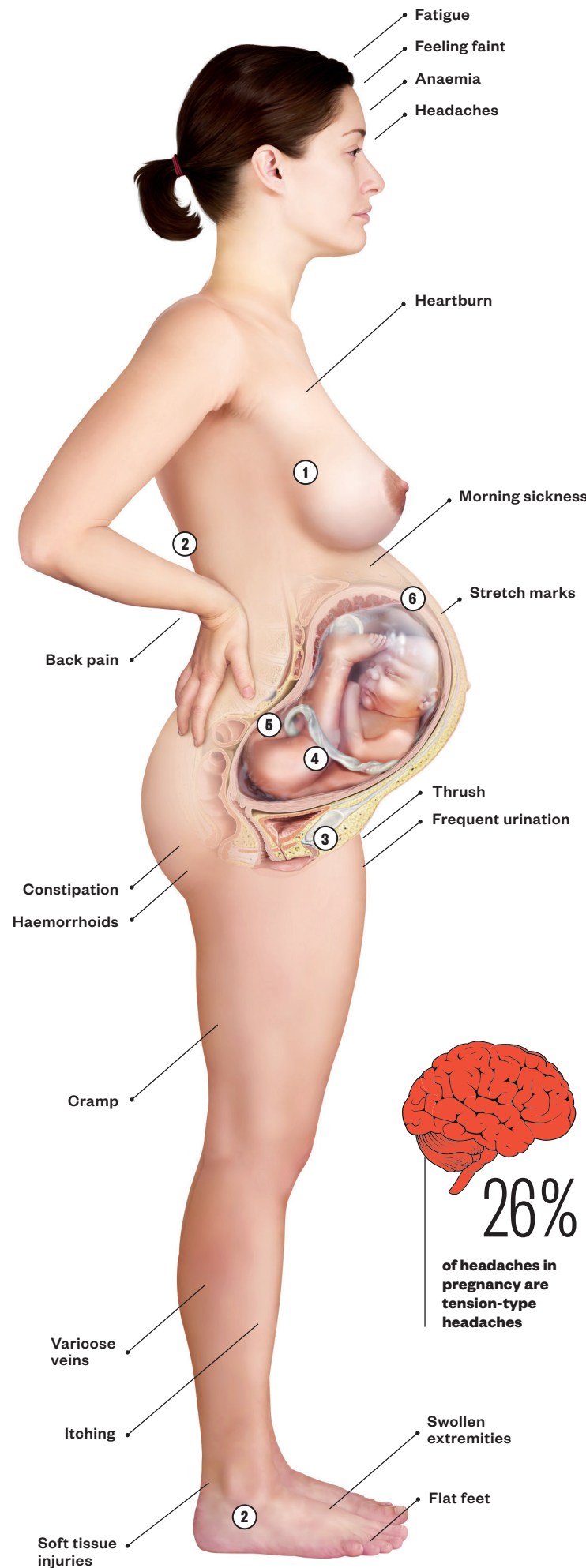
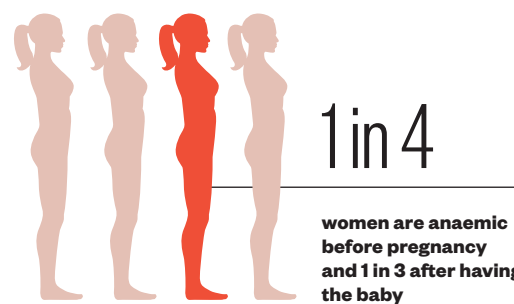
- Raised temperature and increased blood flow to the skin.
- Itching.
- Stay hydrated and wear loose cotton clothes. Use emollients to soothe the skin.
- If itching is severe, particularly on the palms and soles of the feet, it can be a sign of intrahepatic cholestasis of pregnancy, a liver disorder that requires immediate referral to a doctor.

### ANAEMIA

- Dietary iron deficiency or low iron stores caused by recent pregnancy or heavy menstrual bleeding, combined with extra iron requirements during pregnancy.
- Fatigue, pale skin, shortness of breath, palpitations or dizziness.
- Eat a diet rich in red meat, chicken, fish, beans, lentils, peas, leafy greens, citrus fruits and dried fruits.
- Refer to the GP or midwife for investigation and treatment with iron supplements.

### VARICOSE VEINS

- The uterus puts pressure on the veins in the pelvis and this, combined with increased blood volume and the pregnancy hormone progesterone — which relaxes blood vessel walls — makes veins more likely to swell.
- Enlarged, lumpy, blue veins visible under the skin. Can cause heaviness, itching, swollen feet and ankles, muscle cramps and throbbing.
- Do not sit or stand for long periods. Do not cross your legs when sitting. Keep mobile and do leg and foot exercises. Put your feet up whenever possible, including sleeping with your legs higher than your body using a pillow. Wear compression stockings or support tights.
- Refer to GP or midwife if painful.



## 2 MUSCULOSKELETAL SYSTEM

### BACK PAIN

- The hormone relaxin causes the ligaments to become softer and stretch, which can place strain on the joints of the lower back and pelvis, leading to back pain.
- Pain in the lower back.
- Wear flat shoes. Use a supportive mattress and chair, and get enough rest. Try exercising in water, massage therapy or back care classes. Take care when lifting and carrying heavier items. If necessary, take paracetamol for the shortest time possible.
- If severe, physiotherapy may be needed. Refer to the GP or midwife if the pain could be early labour, if the woman has a fever, bleeding from their vagina or pain when they pass urine, lost feeling in one or both legs, bottom, or genitals, or pain in one or both sides.

Lower back pain affects about 50% of pregnant women

### SOFT TISSUE INJURIES

- Flat feet can lead to soft tissue injuries, such as plantar fasciitis and heel spurs.
- Heel pain when weight bearing that is worse in the morning but improves on walking.
- Off-the-shelf insoles can be purchased if appropriate.
- If painful, refer to GP or podiatrist for stretches and insoles.

## 3 GENITO-URINARY SYSTEM

### FREQUENT URINATION

- Pressure on the bladder from the growing uterus and relaxation of pelvic floor muscles.
- Needing to pass urine often, urine leakage.
- Restrict drinks in the evening. In later pregnancy, rock back and forwards on the toilet to reduce pressure on the bladder and help to ensure complete emptying. Pelvic floor exercise can help.
- Refer to GP if there is pain when passing urine or blood in the urine because this could indicate an infection.

## 4 ENDOCRINE SYSTEM

### FATIGUE

- Progesterone causes tiredness during early pregnancy. Later in the pregnancy, carrying the extra weight of the foetus and difficulty sleeping contribute to fatigue.
- Feeling tired or exhausted.
- Rest as much as possible, eat a healthy diet and get plenty of sleep.
- Refer to GP or midwife if fatigue persists because it could be a sign of anaemia.

### CRAMP

- Muscles bearing the increasing weight of the foetus; the foetus putting pressure on the main vein from the legs; and the hormone progesterone affecting muscle tone in the legs can all contribute to cramp.
- Sudden contraction and pain in the muscles of the legs or feet.
- Stay hydrated, massage the area and do daily foot and calf stretches. Wear comfortable shoes and take a warm bath before bedtime.
- On rare occasions, persistent pain, usually in one leg, along with swelling, redness, warmth and tenderness can indicate a blood clot, which requires immediate referral to a doctor or midwife.

### FLAT FEET

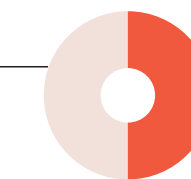
- The pregnancy hormone relaxin, which helps to soften the ligaments around the hips and pelvis, also decreases the stability of the medial ankle and plantar arch. Together with the extra weight carried during pregnancy, this causes the arch to drop.
- When the arch flattens, the foot can roll inwards when walking (overpronation), which can increase strain on the feet, calves and back, causing pain. The flattened arch also causes the feet to increase in width and length.
- Wear supportive, comfortable footwear in a larger size if necessary. Off-the-shelf insoles can be purchased if appropriate.
- If painful, refer to GP or podiatrist for stretches and insoles.

### THRUSH

- A yeast infection caused by *Candida albicans*. Higher levels of oestrogen during pregnancy allow thrush to thrive.
- White, odourless discharge, itching and irritation in the vagina and vulva, soreness and stinging during sex or urination, redness.
- Topical clotrimazole is considered safe during pregnancy. Insert pessaries with fingers rather than the applicator. Oral therapy is contraindicated. Take a shower not a bath, use water and emollient instead of soap, and wear cotton underwear.
- Refer to GP or midwife if over-the-counter (OTC) treatment is unsuccessful.

### HEADACHES

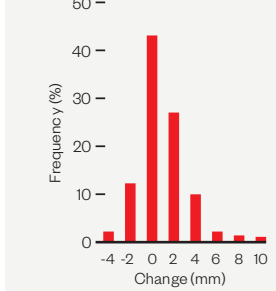
- Hormonal changes and increased blood volume can lead to headaches, which can be exacerbated by stress, dehydration, lack of sleep and caffeine withdrawal.
- Dull, aching head pain, tightness across the forehead or back of the head.
- Take paracetamol for the shortest time possible, drink plenty of water and rest.
- If the headache is severe or accompanied by blurred vision or vomiting, it can be a symptom of pre-eclampsia, which requires immediate referral to a doctor or midwife.



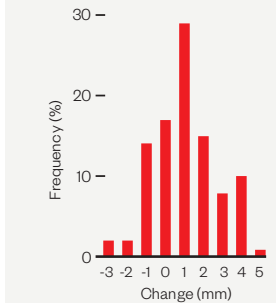
## 2-10mm

a. At 19 weeks post partum, 61% of 49 women had an increase in foot length (most of them in the order of 2-10mm), and b. 71% of 49 participants had an arch drop (many in the 1-5mm range)

### a. Foot length

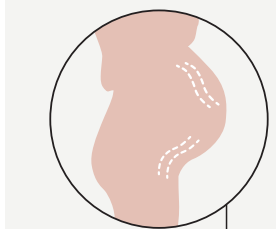


### b. Arch drop



## 2-10%

of women have asymptomatic bacteriuria during pregnancy and, if untreated, 30% may develop pyelonephritis



Stretch marks affect 55-90% of pregnant women

## 5 GASTROINTESTINAL SYSTEM

### MORNING SICKNESS

- Physiological changes, such as raised oestrogen and human chorionic gonadotropin levels, and transient hyperthyroidism can induce nausea. Low blood glucose can also contribute.
- Nausea and vomiting usually starts in the first trimester and tends to resolve by week 16, but may last longer.
- Eat smaller meals more frequently, avoid spicy foods and caffeine, and prevent fatigue. Drink plenty of fluids — taking small sips can help. Avoid smells that make you feel sick. Try getting up slowly in the morning and eating plain foods. Consider using ginger or P6 (wrist) acupressure.
- If severe, refer to GP for pharmacological treatment with antiemetics.

### HAEMORRHOIDS

- Progesterone relaxes blood vessels and the growing uterus reduces blood flow from the lower extremities, which can cause the veins in the anus to swell. Straining can aggravate haemorrhoids.
- Itching, aching, soreness or swelling around the anus, pain when passing a stool and a mucus discharge afterwards, a lump hanging outside the anus and bleeding after passing a stool.
- Eat lots of fibre, avoid standing for long periods and take regular exercise. Use a cloth wrung out in iced water to ease the pain. If the piles stick out, push them gently back inside using a lubricating jelly. Avoid straining, use moist toilet paper and pat, rather than rub, the area. If severe, use haemorrhoid creams, ointments or suppositories for a short period; however, most products are not licensed during pregnancy.
- Refer to GP or midwife if OTC treatment is unsuccessful.

### HEARTBURN

- Progesterone relaxes the stomach sphincter, allowing gastric acid to enter the oesophagus. In addition, the growing uterus pushes on the stomach, which can force gastric acid into the oesophagus.
- Burning sensation in the middle of the chest, an unpleasant taste in the mouth, bloating, nausea and hiccups. Symptoms are often worse after eating or when lying down. Most common after 27 weeks.
- Avoid trigger factors, such as caffeine and fatty or spicy foods. Limit portion sizes and avoid eating less than three hours before bed. Raise your head and shoulders in bed. Drinking milk may help. If necessary, treat with antacids with or without an alginate. Products containing sodium bicarbonate or magnesium trisilicate are not recommended. Aluminium compounds can have a constipating effect, whereas magnesium-based preparations are more likely to cause loose stools. If needed, try a short course of omeprazole.
- Refer to GP or midwife if OTC treatment is unsuccessful.

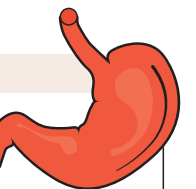
## 6 SKIN

### STRETCH MARKS

- Weight gain and hormonal changes cause the dermis to tear, revealing the deeper layers and blood vessels.
- Narrow pink or purple lines that appear on the thighs, buttocks, abdomen and breasts.
- Creams, gels and lotions can moisturise the skin but there is little evidence that they prevent or improve the appearance of stretch marks.
- Massaging the area may help to prevent stretch marks.

### CONSTIPATION

- Hormonal changes together with displacement of the stomach and intestines by the uterus can cause reduced gastric motility and constipation.
- Difficulty opening the bowels.
- Eat high-fibre foods, exercise regularly and drink plenty of water. Iron supplements may need to be reviewed. If needed, try a bulk-forming laxative. If unsuccessful, add or switch to lactulose or macrogols, or a short course of low-dose stimulant laxative (e.g. bisacodyl or senna — but not during the third trimester). Only use laxatives for a short period.
- Refer to GP if OTC treatment is unsuccessful.



80%

Of pregnant women have heartburn

Sources: NHS Choices; *The Pregnancy Book: Conditions And Problems In Pregnancy*; Bumps (provided by the UK Teratology Information Service); National Institute for Health and Care Excellence; Patient.info; *Am J Phys Med Rehabil* 2013;92:232; *J Headache Pain* 2017;18:106; *Hippokratia* 2011;15:205; *International Journal of Women's Dermatology* 2017;3:77  
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