



# Nausea and vomiting with pregnancy

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## Information for women, birthing people, and their families

Nausea (feeling sick) and vomiting (being sick) are symptoms of pregnancy and affect most pregnant women / birthing people to some degree.

Although called “morning sickness”, it can happen at any time of the day or night.

### What can cause ‘morning sickness’?

Hormonal changes in the first three months of pregnancy are the main cause of morning sickness.

### How long can it last?

'Morning sickness' usually disappears around the 12th to 14th week of your pregnancy. Although in some pregnancies it may last longer.

### What can I do to help my symptoms?

- If you feel sick first thing in the morning, give yourself time to get up slowly.
- If possible, eat something like dry toast or a plain biscuit before you get up.
- Stay hydrated. If you are unable to drink, try sipping fluids and crushed ice.
- Eat small amounts of food often. For example, eat a slice of toast, and then if you are feeling alright have a small bowl of pasta two hours later.
- Meals that are high in carbohydrates and low in fat, such as potato, rice and pasta, are easier to tolerate.
- Food containing ginger, such as ginger biscuits, can sometimes help.
- Avoid foods and smells that make you feel sick. It helps if someone else can cook if you feel sick.
- Get plenty of rest and sleep whenever you can. Feeling tired can make the sickness worse.

- Distract yourself as much as you can. Often the nausea gets worse the more you think about it.
- Wear comfortable clothes; tight waistbands can make you feel worse.

### What if my symptoms continue?

If the above advice does not help, and you are still having morning sickness, please speak to your GP or midwife. They may be able to arrange for you to be seen by a member of the hospital's Maternity team.

### What is hyperemesis gravidarum?

Hyperemesis gravidarum is a severe form of sickness. Some women / birthing people will suffer from this, however not all nausea and vomiting during pregnancy is hyperemesis gravidarum. It appears to be more common when it is your first pregnancy or if you are pregnant with twins.

Hyperemesis gravidarum can lead to dehydration and weight loss in pregnancy. If you do suffer from this form of morning sickness, you may need to stay in hospital overnight for treatment (see below).

### What treatments may be offered to me in hospital?

- Treatment can include intravenous fluids, which are given directly into one of your veins through a drip. If you have severe vomiting, anti-sickness drugs may also need to be given through a vein or a muscle. You should feel much better after this, and be able to go home once your treatment is complete.
- You will be given anti-sickness tablets by the hospital to take home. If you feel better, you can cut down the number of tablets you are taking. **Do not do this until you have spoken to your midwife or GP.**

Most anti-sickness medications are safe to take during pregnancy. Your doctor or midwife will speak to about your medication before you start taking them, including any side effects you need to be aware of.

**Do not to take any medication until you have spoken to your midwife or GP.**

- If your vomiting gets worse, stop eating but try to keep sipping fluids and taking the anti-sickness tablets until you start to feel better. Please ask your GP for a repeat prescription before your tablets run out.
- When you arrive at hospital, the Maternity team will carry out some simple blood tests. If these tests show that you are dehydrated, and you have lost weight or you have a medical condition such as a heart, thyroid, or kidney problem, or diabetes, you may need to stay in hospital for treatment. You will discuss this with the Maternity team before any decisions are made.

### Do I need to have blood thinners?

Yes. If you are admitted to hospital with hyperemesis, you will be started on blood thinners. You will be offered these during your stay in hospital - you will not need them when you are well enough to go home. This is because you are more at risk of developing a VTE (venous thromboembolism) whilst in hospital.

If you go home and continue to vomit or be less mobile, please call Maternity Triage. The Maternity Triage number is at the bottom of this leaflet.

More information on blood clots is available in the **Reducing the risk of VTE in pregnancy and the postnatal period** leaflet. (/reducing-the-risk-of-venous-thromboembolism-vte-in-pregnancy-and-the-postnatal-period)

It is important to recognise the symptoms of a VTE. These may include:

- Swelling of your limb / leg, which can be sudden.
- Pain or tenderness in your limb / leg, often in the calf. This can increase when standing or walking.
- Change in skin colour - redness or purple. May appear as darker brown or discoloured skin in darker skin tones.
- An unexplained feeling of warmth in your limb / leg.
- Swollen veins that are hard or sore to touch.
- Shortness of breath, either at rest or on exertion, which may be sudden and unexplained. This is due to the blood clot restricting the blood flow through the lungs. In some cases, oxygen may be needed to help with this.
- An increased heart rate. This is due to the heart having to work harder to make sure enough oxygen is transported around the body.
- Tightness in your chest or chest pain. This may be constant or only when breathing deeply. This is due to inflammation in the lungs or lining of the lungs.
- Coughing. Occasionally, coughing up blood or blood-stained sputum.
- Feeling very unwell or collapsing.

If you have any of these symptoms or any concerns, please speak to your midwife or call Maternity Triage. Their phone number is on your lilac notes and at the bottom of this leaflet.

### **Who can I contact if I have concerns?**

For help and advice, contact our Maternity telephone triage service on 01227 206737.

### **Further help**

Remember that you are not alone.

Nausea and vomiting in pregnancy can be a difficult problem to cope with. It can be one of the most trying problems in early pregnancy. It can affect your mood and what tasks you are able to do, and make you feel tired and emotional.

If you ever feel you need extra support, please do not hesitate to ask for help. You can start by visiting our Pregnancy Sickness Support (<https://www.pregnancysicknesssupport.org.uk>) website.

**This leaflet has been produced with and for patients.**

**Please let us know:**

- If you have any accessibility needs; this includes needing a hearing loop or wanting someone to come with you to your appointment.
- If you need an interpreter.
- If you need this information in another format (such as Braille, audio, large print or Easy Read).

**You can let us know this by:**

- Visiting the Trust web site (<https://www.ekhuft.nhs.uk/ais>).
- Calling the number at the top of your appointment letter.
- Adding this information to the Patient Portal (<https://pp.ekhuft.nhs.uk/login>).
- Telling a member of staff at your next appointment.

**Any complaints, comments, concerns or compliments**, please speak to a member of your healthcare team. Or contact the Patient Advice and Liaison Service on 01227 783145 or email ([ekh-tr.pals@nhs.net](mailto:ekh-tr.pals@nhs.net)).

**Patients should not bring large sums of money or valuables into hospital.** Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property has been handed into Trust staff for safe-keeping.

**Further patient information leaflets** are available via the East Kent Hospitals' web site (<https://www.ekhuft.nhs.uk/patient-information>).

Reference number: Web 704

First published:  
January 2024

Last reviewed:  
December 2024

Next review date:  
May 2027

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