



## Gastroenteritis in Pregnancy

Information in this leaflet is general in nature and should not take the place of advice from your health care provider. With every pregnancy there is a 3 to 5% risk of having a baby with a birth defect.

### What is gastroenteritis?

Gastroenteritis (often called "gastro") is a common illness that can cause abdominal cramps, diarrhoea and vomiting.<sup>1</sup> Other symptoms may include loss of appetite, bloating, nausea, fever and generally feeling unwell, including tiredness and body aches.<sup>2</sup> In most people the symptoms improve within a few days.<sup>2</sup>

### Causes of gastroenteritis

Viruses are the most common cause of gastroenteritis and are usually spread from person to person or through touching contaminated surfaces.<sup>1</sup> Contaminated food (food poisoning), water or handling infected animals can also cause gastroenteritis.<sup>1</sup>

Changes in bowel movements, such as constipation or less commonly diarrhoea, may also occur as pregnancy related symptoms without being considered gastroenteritis.<sup>3</sup> Diarrhoea that happens at or near term may be a sign of labour.<sup>3</sup> Consult your doctor if uncertain about the cause of your symptoms.

### Why treat?

The main risk associated with gastroenteritis, especially in pregnant women, is dehydration (loss of water), which sometimes results in a loss of sugar and salts that the body needs to function normally.<sup>2</sup> This can be prevented by replacing the water and salts lost by vomiting and diarrhoea.<sup>2</sup>

### Treatment of infectious gastroenteritis

People with diarrhoea or vomiting should

- Rest at home and not attend work<sup>1,4</sup>
- Drink small amounts (sips) of clear fluids such as water often (every five to ten minutes).<sup>1</sup> Oral rehydration drinks, such as Gastrolyte and Hydralyte, are available from chemists and also help to replace fluids and salts.<sup>1</sup>
- Eat if you feel hungry.<sup>1</sup> Start with bland foods such as crackers, rice, bananas or dry toast. Usually people are back on a normal diet in two to three days, even if diarrhoea continues.<sup>1</sup>
- **If symptoms are severe** such as you are unable to keep down enough fluids, not passing much urine, feeling dizzy when standing up, or passing urine that is dark in colour, then **urgent medical treatment** is recommended.<sup>1</sup> Treatment in hospital may be required and fluids may need to be administered intravenously (directly into the bloodstream using a thin tube that goes into the vein-this is often referred to as a "drip").<sup>2</sup>

### Medicines recommended

If medication is considered to control mild diarrhoea during periods of social inconvenience (such as travel or work), use the minimum effective dose for the shortest time possible.<sup>5</sup> Loperamide, which is most often recommended, and Diphenoxylate with Atropine (Lomotil) may be used in pregnancy.<sup>6</sup> However, antidiarrhoeal medications should be avoided for moderate to severe diarrhoea as they do not treat the underlying cause and may prolong the illness.<sup>1</sup>



If medication is needed to relieve nausea and vomiting there are a range of medicines which are safe to use in pregnancy. Consult your doctor or call MotherSafe for further advice.

**How is the spread of gastroenteritis prevented?**

After using the toilet, changing nappies and before eating or preparing food, wash your hands thoroughly with soap and running water for at least 10 seconds and dry them with a clean towel.<sup>1,2</sup> Do not prepare food for others or care for patients, children or the elderly until 48 hours after diarrhoea or vomiting ceases.<sup>1</sup>

For general food safety guidelines in pregnancy see the NSW food authority. [www.foodauthority.nsw.gov.au/Documents/foodsafetyandyou/pregnancy\\_brochure.pdf](http://www.foodauthority.nsw.gov.au/Documents/foodsafetyandyou/pregnancy_brochure.pdf)

**See your doctor if these strategies do not help**

**Ask your midwife, doctor or pharmacist for the brand names of these medicines.**

**References**

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