

PATIENT INFORMATION

Cannabis in Pregnancy

Talking about cannabis use in pregnancy with your midwife or obstetrician may feel difficult. This leaflet is designed to inform you of the risks involved and how you can get further support.

Cannabis risks for all:

Short-term effects:

- Faint, dizzy, lethargic, confusion/paranoia, panic attacks, reduced attention span, impact on coordination, increased appetite.

Long-term effects:

- Risk of addiction and withdrawal symptoms (restless, difficulty sleeping, irritability, mood swings,
- Developing mental health problems
- Lung-related diseases; bronchitis, cancer (additional risk if smoked with tobacco)
- Reduced fertility; cannabis use can impact on sperm production and ovulation
- Increased risk of cardiovascular disease and stroke

Cannabis and mental health

Using cannabis may trigger mental health problems even if you have never suffered with any before. If you already have ongoing mental health problems, or if you have a family history of mental health disorders, ongoing use can increase your risk of developing more severe symptoms. Recent research has shown that the younger you are when you start using cannabis, the greater the risk of mental health issues due to the effect on the brain.

Cannabis in pregnancy

There is limited reliable research and as with many drugs and medicines, there is more research needed to fully explore the effects of using cannabis in pregnancy. However, there is enough to suggest that it may be harmful to you and your unborn baby during pregnancy and well into childhood.

The risks as we currently understand them are:

- Low birth weight
- Reduced alertness
- Slower growth
- Cannabis has not been linked to birth defects, however the effects on the developing brain may be lasting, and remain as the baby grows to an adolescent. There may be an association with learning and behavioural issues in children who were exposed to cannabis during pregnancy.

As cannabis is usually smoked with tobacco, the risks to the baby also include the same as smoking including the reduction in oxygen and nutrition via the placenta as well as:

- Increased risk of miscarriage and stillbirth
- Increased risk of pregnancy and birth complications
- Increased risk of pre-term birth
- Increased risk of asthma/breathing conditions
- Increased risk of SIDS (Sudden Infant Death Syndrome)

Newborn care

After they are born, your baby will be seen by a midwife for their Newborn and Infant Physical Examination Screening (as is routinely recommended for all babies). Some babies may be irritable, unsettled and have difficulties feeding for a period of time if you have been using cannabis during your pregnancy. This may mean that you need to stay in hospital a little longer to ensure baby settles and starts to feed effectively.

Cannabis and breastfeeding

We know that a chemical called TCH (tetrahydrocannabinol) passes to your baby through your breastmilk. Some studies suggest that infant exposed to this have impacts to their motor development (movements and responses). However, more studies are needed to establish the true effects of cannabis on breastfeeding.

Breastfeeding is considered the healthiest choice to feed your baby; professional recommendation would be to stop smoking cannabis whilst breastfeeding.

Sudden Infant Death Syndrome (SIDS)

The risk of SIDS is greater if you smoke or use drugs and alcohol in pregnancy and after birth.

Ways to reduce the risk include:

- Do not share a bed with your baby as drugs and alcohol can make you more sleepy and less likely to be responsive to your baby's needs

- Provide a smoke free environment for your baby: no smoking in enclosed areas, don't allow people to smoke around your baby/avoid smoky areas, cover hair and change clothes after smoking, wash hands and face after smoking
- There is lots more advice and information on ways to reduce risk on the following:
www.nhs.uk/conditions/sudden-infant-death-syndrome and [The Lullaby Trust - Safer sleep for babies, Support for families](http://www.thelullabytrust.org.uk/Safer-sleep-for-babies)

Effects on parenting

Being under the influence of cannabis while parenting can affect how you interact with your child.

- You may miss your baby's/child's cues for hunger, to be comforted, or to play and learn.
- It can also affect your ability to judge, to make good decisions and to protect your child from danger.

The effects of cannabis **can last for several hours**. Be sure that there is always someone available who is not under the influence of substances to take care of your child's needs.

Being attentive to your baby/child is important to their development. It is through relationships with you, and other adults that your child learns to trust, learn and thrive.

Recommendations

- Professional recommendation is that you discontinue smoking cannabis when you are pregnant and breastfeeding in order to have the healthiest pregnancy and early childhood.
- Talking about cannabis use in pregnancy with your midwife or consultant can be difficult but it is important to be open and honest so that we can provide the most appropriate care for you and your baby. Additional monitoring of your baby's growth and development may be needed.
- Attending ante-natal appointments –these services are here to help you and your baby stay as healthy as possible.

Further advice and support

Pregnancy can be a good motivator to stop cannabis use and make positive lifestyle changes and there is support available to help you to do this:

Smokefree Pregnancy Service – self referral to tsdft.smokefreepregnancy@nhs.net or through your midwife.

Torbay Recovery Initiative (Torbay Drug & Alcohol Service)

Walnut Lodge
Walnut Road
Chelston
Torquay
TQ2 6HP

Tel: 01803 604330

Together Drug and Alcohol Service (Devon)

Templar House
Scott Close
Newton Abbot
Devon
TQ12 1GJ

0800 233 5444

For further assistance or to receive this information in a different format, please contact the department which created this leaflet.

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