

Do asthma medicines harm the baby during pregnancy and breast feeding?

- Although not all of the medications have the same degree of approval to be used in pregnancy almost all the medicines are safe for the baby and not associated with any birth defects.
- When breastfeeding, the use of most asthma medicines does not affect your baby or interfere with your milk production.
- Inhaled medicines are better as they are absorbed less by the blood stream and thus less, if any, appear in the milk.
- Leukotriene modifiers and theophylline are generally avoided because they are taken orally.
- Ask your doctor about your previous medications and their side effects.

Will my baby inherit my asthma?

- The chances of a child getting asthma are higher if both parents have asthma. If only the mother has asthma, the chances of the child developing asthma are higher than if only the father has asthma.
- Reducing exposure to allergens during pregnancy and the first year of the baby's life might lower the risk of your baby getting asthma.
- Children of mothers who do not smoke are less likely to develop asthma.
- Breastfeeding for the first 6-12 months of life may help prevent or delay the development of certain allergies and help relieve asthma symptoms.

How can I monitor and prevent my asthma attacks during pregnancy?

- Early awareness of asthma symptoms
- Regular/daily peak flow monitoring and maintaining a peak flow chart
- Avoiding contact with asthma triggers
- Taking control medications regularly
- Identify asthma symptoms before they become worse
- Do not run out of medications
- Visit the doctor or health care provider regularly

ASTHMA AND PREGNANCY



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Asthma Facts for the Pregnant Mother

- More than 17 million Americans have asthma.
- Approximately 6 million women under the age of 45 are affected with asthma.
- Asthma is one of the most common complications of pregnancy.
- Asthma does not increase your chances of having a baby with birth defects or of having multiple births.
- Asthma can be controlled during pregnancy with little or no risk to you or your baby.

What is Asthma?

Asthma is a chronic disease caused by the inflammation of the airways in the respiratory system. During an asthma attack, there is swelling of the lining of the lungs, the muscles tighten around the airways, and an excess of mucous production, all which block the flow of air.

What are the symptoms of asthma?

Symptoms usually vary by individual, severity of asthma and attack. They include:

- Chronic Cough
- Wheezing
- Shortness of breath
- Tightness in chest, pain or pressure
- Dry cough, especially at night

Is it asthma or pregnancy symptoms?

As pregnancy progresses, activities such as climbing stairs may leave you short of breath as there is less room in the body for deep breaths. But that should not make you cough or wheeze. If the breathing improves after using your bronchodilator or the problems happen at night then it's probably because of asthma and you have to report immediately to your doctor.

What is the effect of asthma on pregnancy?

Uncontrolled asthma, when untreated and ignored during pregnancy can affect both mother and baby. It creates a high risk of pre-eclampsia (very high blood pressure, ankle swelling, and kidney problems), seizures, premature and complicated labor to the mother. For the unborn child, it can cause preterm birth, low birth weight, slowed growth and even loss of life.

What is the effect of pregnancy on asthma?

About one third of women notice improvement in their asthma during pregnancy, one third



have increase in severity and one third find no change in their asthma. Asthma often worsens between the second and third trimesters and improves especially in the third trimester.

What makes asthma worse when you are pregnant?

The environmental triggers that can make asthma worse, include:

- Irritants like smoke, mold, cockroaches, pet dander and pollen
- Allergies
- Exercise
- Infections like sinusitis and the common cold
- Weather changes, especially cold
- Emotions
- Gastro esophageal reflux
- Hormonal changes

What are the medications to control asthma during pregnancy?

The goal of treating you is to keep you healthy and breathing normally. The medications commonly needed during asthma are:

Long-Term Control Medicines or Controllers

- These are used to maintain control of asthma and prevent attacks even when asthma is stable.
- Inhaled corticosteroids like budesonide and beclomethasone are taken on a regular basis. They cause some thrush which can be avoided by rinsing the mouth.
- Long acting bronchodilators like salmeterol can cause some headache and shaky hands.
- Anti-inflammatory drugs like cromolyn can also be used as a substitute.

Quick Relief Medications or Rescuers

- These are used to control acute attacks for a short time, not for long term.
- Short acting bronchodilators like albuterol (can cause some headache and shaky hands).

Can I take my shots during pregnancy if I have asthma?

The annual flu shot is recommended for pregnant women with asthma during the second or third trimester.

Allergy shots should not be started during pregnancy.

If you have been receiving allergy shots and have not shown any severe reactions, talk to your doctor about continuing them at the same dose.