Opioid Pain Medication in Pregnancy

What are opioid pain medications?
Opioids [OH-pee-oidz] are strong pain medications available only by prescription. They are sometimes prescribed after surgery or childbirth. Your prescription may have brand names such as Percocet, or Tylenol #3. It may also include generic names such as oxycodone or hydrocodone.

How are they used?
Opioids are usually prescribed for short-term pain (lasting a few days to a few weeks) from an illness, injury, or surgery. For long-term (chronic) pain, many doctors recommend non-opioid treatments. Studies show these are more effective and safe for patients.

How do I keep myself and my baby safe?
BEFORE YOU START opioid medication:

• **Tell your doctor about everything else you’re taking.** Bring a list of the prescriptions, over-the-counter medications, patches, vitamins, and herbal pills you take. Tell your doctor if you use street drugs or drink alcohol.

• **Talk to your doctor or pharmacist about the prescription.** Be sure you understand what you’re taking, why you’re taking it, and how to take it. If the directions on the bottle don’t make sense to you, ask them to explain.

• **Learn what side effects to watch out for.**
  - Constipation is the most common side effect. To prevent and treat it, drink extra water and take in plenty of fiber (fruits and vegetables are good sources). You can also ask your doctor if it’s okay to take a mild laxative.
  - Slow breathing is the most serious side effect. This is also called respiratory [RES-pir-ah tore-ee] depression, and it can be deadly.

What do I need to do next?
1. Read this entire fact sheet to learn about the risks and benefits of opioid medication.
2. Talk to your doctor about the specific risks and benefits for you and your baby.
3. Talk to your doctor or pharmacist about how and when to take your medication. Make sure you are very clear about what to do.

Do opioids put my baby at risk?
When taken as prescribed, opioids don’t appear to affect a baby’s development during pregnancy. However, they do get into the baby’s bloodstream. **If you take opioids, there is a strong risk your baby will go through withdrawal after delivery.** This is called neonatal abstinence syndrome, or NAS.

**Neonatal abstinence syndrome (NAS)**
Opioid withdrawal in a newborn (NAS) is seen in babies whose mothers took opioid pain medication during pregnancy—as well as in babies whose mothers took heroin, suboxone, or methadone.

• NAS symptoms may not appear for up to 5 days after delivery. Symptoms can include fever, diarrhea, excessive crying, tremors, and poor feeding.
• Babies with NAS may need to stay longer in the hospital after delivery for extra care and monitoring. The hospital stay can last several days or even weeks.
• Once home, a baby with NAS may continue to need sensitive care for several months, until symptoms subside.
WHILE YOU’RE TAKING opioid medication
The best way to protect yourself and your baby is to follow your doctor’s instructions.

• Do NOT take more pain medication than directed. Even if you feel worse, do not take a higher dose than your doctor ordered, and do not take it more often.
• Do NOT take sleep aids, anti-anxiety medication, or other pain relievers (not even Tylenol) without your doctor’s permission.
• Do NOT drink alcohol or use street drugs while taking opioid pain medication.
• Take the medication only as long as you need it. When the pain gets better, stop taking it. To avoid side effects that can happen when you stop suddenly, you may need to “taper off” the dosage for a few days.
• Do NOT drive a car or use dangerous machinery until you know how the medication affects you.
• Tell the people you live with they should call 911 right away if they notice you’re having trouble breathing or waking up. Respiratory depression is often caused by an overdose of opioid medication. Respiratory depression caused by accidental overdose is a leading cause of accidental death in women younger than 50. Ask your doctor or pharmacist about getting naloxone, a medication that can reverse an overdose.

General risks of opioids
Opioids can be risky for anyone who uses them.

• If you take opioid medication for long periods of time, you can develop a tolerance. This means your usual dose of medication will be less effective. Also, opioids can sometimes trigger a response in which you actually feel more pain than before (called hyperalgesia [hi-per-al-GEE-ya]).
• If you stop the medication suddenly, you may have withdrawal symptoms. Common symptoms are sweating, chills, abdominal pain, nausea, vomiting, and diarrhea.
• Opioids pose a much greater risk of misuse and addiction than was once thought. The risk of this is even greater for people who combine opioids with alcohol or with drugs for sleep or anxiety.
  – Misuse is when you use the medication in ways that aren’t prescribed. For example, you share the medication with someone else, or you take it just to get high.
  – Addiction is a disease that leads you to compulsively use the medication, even though it could be harming you. For example, taking the medication could be hurting your ability to work or study, have good relationships, or stay out of trouble with the law.

WHEN YOU FINISH taking opioid medications
Dispose of leftover medicine at a drug collection site. Unused pills can be dangerous to leave around. You can find drop-off locations at the following websites:

• Use Only As Directed (useonlyasdirected.org)

It’s best not to flush medications down the toilet as they can contaminate the water supply.