



Information for Patients

Medications Advice for Patients Admitted to the Maternity Wards

Introduction

This information leaflet has been written to give you a basic understanding of some of the medications prescribed for antenatal and postnatal care. It contains brief information about what the medication is used for, how it works on the body, how you take the medication, the possible side effects and the safety of medications during pregnancy and/or breastfeeding.

You may take more medication than is written about in this booklet. Remember, everyone is an individual and your drug therapy may differ from other patients. Your medication has been specifically prescribed to cater for your medical needs. The information given in this booklet is intended as general guidance and is limited. If you have been given different advice by a doctor or pharmacist, follow their advice.

General advice

- Always keep medication out of the reach of children.
- Do not let anyone else take your medication.
- Do not take medication that has been prescribed for someone else.
- Keep all your medication in the original containers.
- If you suffer any unpleasant side effects from your medication, speak to your doctor/ midwife/ pharmacist.
- Inform your midwife if you start a new medication whilst pregnant or breast feeding.
- Always read the information leaflet provided with each prescribed medication.

Useful telephone numbers

Antenatal clinic 0161 276 6409
Triage..... 0161 276 6567
Pharmacy Medicines helpline..... 0161 276 6270

If you have any questions about your medication when you are discharged you can telephone the pharmacy medicines helpline number. The service is available Monday – Friday, 9.00 am – 5.00 pm. You can also e-mail: medicines.information@cmft.nhs.uk.

This service can only provide information on medicines prescribed for you by the hospital. Please have your medications with you when you telephone. If you have any queries whilst you are an in-patient, please discuss them with your ward pharmacist which can be arranged through your midwife.

Analgesics (pain relief):

• Paracetamol

What is it used for?

Paracetamol is commonly used for pain relief in pregnancy.

Paracetamol works by relieving pain and reducing high temperature and fever. It can provide effective relief from mild to moderate pain including: headache, toothache, sore throat, aches and pains, symptomatic relief of rheumatic aches and pains, influenza symptoms and feverishness.

How do I take it?

Paracetamol can be taken regularly or when required for pain.

- **Dosage:** Adults and young persons aged 12 or over: Take 2 tablets up to 4 times a day, as required. The tablets should be taken with water. Take only as much as you need to relieve your symptoms and leave at least 4 hours between each dose. Do not take more than 8 tablets in 24 hours.

What are the side effects?

Paracetamol is generally well tolerated in most patients.

Is it safe to use this medication during pregnancy and/or breastfeeding?

Paracetamol is commonly used during pregnancy and breastfeeding with very few safety concerns.

• Ibuprofen

What is it used for?

Ibuprofen is an anti-inflammatory drug used to treat inflammation in a variety of conditions. It is commonly used after a Caesarean section to help ease the inflammation after the procedure.

How do I take it?

Ibuprofen can be taken regularly or when required for pain relief.

- **Dosage:** Take 1 – 2 tablets (200-400mg) up to three times a day. Swallow tablets whole, with a glass of water. Ideally take the tablets with or after food. Take only as much as you need to relieve your symptoms and leave at least 6 hours between each dose. Do not take more than 6 tablets (1200mg) in 24 hours.

Who is Ibuprofen unsuitable for?

Patients with any of the following conditions should consult a doctor/midwife/pharmacist before taking ibuprofen:

- Asthma/breathing problems.
- Previous stomach ulcer.
- Previous reaction to aspirin, ibuprofen or other non-steroidal anti-inflammatory drug.
- Other medical conditions: for example kidney disease, heart disease, blood clotting disorders, liver disease.

What are the side effects?

Common side effects include headache, dizziness, feeling sick and diarrhoea.



STOP TAKING the medicine and seek immediate medical help if you:

- Pass blood in your faeces (stools/motions).
- Pass black tarry stools.
- Vomit any blood or dark particles that look like coffee grounds.
- Suffer an allergic reaction such as itching, dizziness, swelling of the face, lips, tongue, mouth and throat, which may cause shortness of breath or difficulty swallowing

Is it safe to use this medication during pregnancy and/or breastfeeding?

Ibuprofen is only occasionally used in pregnancy under the supervision of your doctor so do not purchase it pharmacies/shops. Ibuprofen is considered as a suitable treatment option whilst breastfeeding.

• Dihydrocodeine

What is it used for?

Dihydrocodeine is used for the relief of moderate pain.

How should I take it?

Dihydrocodeine can be taken when required depending on the level of pain you are experiencing. Do not drink alcohol whilst taking dihydrocodeine.

- **Dosage:** Adults and children over 12 years: 30mg every 4 hours up to a maximum of 4 tablets (120mg) a day.

What are the side effects?

The most common side effects with dihydrocodeine are drowsiness, constipation, feeling sick and dry mouth.

Is it safe to use this medication during pregnancy and/or breastfeeding?

Use of dihydrocodeine during pregnancy as an analgesic can be justified where paracetamol has not been effective. This should be prescribed by a doctor.

Dihydrocodeine can be used with caution during breast feeding. If possible use the minimum effective dose for the least amount of time possible.



IMPORTANT: If you are breast feeding whilst taking dihydrocodeine, inform your midwife immediately if your baby is showing signs of increased drowsiness, difficulty feeding, breathing problems or anything else unusual.

Research has shown that some babies may be more susceptible than others to these side effects. If you would like any further information regarding the use of dihydrocodeine in pregnancy/breast feeding please discuss it with your midwife/doctor/pharmacist.

- **Ferrous sulphate (Iron supplements)**

What is it used for?

Iron supplements are used to treat iron deficiency anaemia. When the body does not get enough iron, it cannot produce the number of normal red blood cells needed to keep you in good health. It is common for patients who are pregnant or who have just given birth to have this condition. These medicines work by replacing body iron. Iron is a mineral that the body needs to produce red blood cells.

How should I take it?

Iron supplements should not be taken within one hour before or two hours after eating or drinking the following products: tea, coffee, milk, eggs and whole grains. These products can reduce the absorption of iron. Swallow the tablets whole with water. Although iron preparations are best absorbed on an empty stomach, they may be taken after food to reduce effects on the stomach.

- **Dosage:** Treatment of iron deficiency anaemia: 1 tablet 2-3 times a day.

What are the side effects?

Like all medicines, ferrous sulphate tablets can cause side effects, although not everybody gets them. The most common side effects are constipation, diarrhoea, stomach pain, feeling sick and blackened stools.

Is it safe to use this medication during pregnancy and/or breastfeeding?

Ferrous sulphate tablets are commonly used safely in both pregnancy and breastfeeding. Ensure that you do not take more than the recommended dose.

Alternative iron preparation for patients who cannot tolerate tablets

If you cannot tolerate ferrous sulphate tablets an alternative is available called Sytron. Sytron is a liquid form of iron, the drug is called **sodium feredetate**. The same side effect and safety information applies as above for ferrous sulphate. The usual dose range is 5-10ml one to three times daily

- **Laxatives**

What are they used for?

Laxatives are used to treat constipation. Pregnant women may experience constipation, which can be very uncomfortable. This is because the whole digestive system is influenced by hormonal changes during pregnancy. It is important for pregnant women to look after their diet and maintain regular bowel habits to avoid unnecessary discomfort.

What else can I do to prevent becoming constipated?

The following hints are helpful in maintaining regular bowel habits:

- Eat enough fibre containing foods, for example wholegrain bread and fruit and vegetables.
- Drink sufficient liquid.
- Take exercise.

Laxatives may be prescribed during your pregnancy and after birth. If you feel that you need a laxative please discuss it with your midwife/doctor. Not all laxatives that you can buy are suitable for use in pregnancy.

Side effects of laxatives

Common side effects of laxatives include feeling bloated, increased wind and mild abdominal pain.

Commonly used laxatives in pregnancy/after birth:

1. Lactulose

Lactulose is a liquid laxative used to treat and prevent constipation. Lactulose can take 2-3 days to have an effect; it is generally considered a gentle laxative.

- **Dosage:** Usually 5-10ml twice daily. Must be taken regularly to have an effect.

2. Fybogel: (Ispaghula husk)

Fybogel is a high fibre drink that works to increase the fibre in your diet. Increased fibre in the diet helps to gently relieve constipation. Fybogel is considered a gentle laxative. It is important to maintain an adequate fluid intake whilst on Fybogel.

- **Dosage:** The usual dose is one sachet mixed with a glass of water up to twice daily.

Safety of lactulose and Fybogel in pregnancy/breast feeding

Lactulose and Fybogel are not absorbed into the blood therefore only have a local effect on the gut. Both drugs are generally considered safe to use in pregnancy and breastfeeding, under the advice of your midwife or doctor.

- **Low molecular weight heparins (LMWH)**

The two most commonly used low molecular weight heparins in Central Manchester are tinzaparin (Innohep) and dalteparin (Fragmin). Your doctor/midwife will select the one that is most suitable for you and your condition.

What are low molecular weight heparins (LMWH) used for?

In general LMWH are used to prevent blood clots. Blood clots usually present as deep vein thrombosis (DVT) usually in a leg vein, or pulmonary embolism (PE) - a blood clot in the lung. Blood clots are more common during pregnancy and some patients will be more at risk of blood clots than others. Your risk factors for developing a blood clot will be assessed in ante natal clinic and if you are admitted to the ward.

Use of LMWH after a Caesarean section?

Most patients will be prescribed dalteparin (Fragmin) for seven days following a Caesarean section. If you were on a LMWH during your pregnancy your doctor may want you to stay on the same treatment regimen you were on before. Your doctor/midwife should inform you how long to continue this for.

- **Dosage: after Caesarean section** Dalteparin 5000 units once daily, for seven days.

Is it safe to use this medication during pregnancy and breast feeding?

LMWH have not been found to cause harmful effects during pregnancy or breast feeding.

How is it administered?

Dalteparin (Fragmin) is given as a single, once daily, subcutaneous injection, which means it is injected beneath the skin. It is usually injected into a skin fold in your abdomen (stomach), or the upper part of your thigh. It should not be injected into your muscles.

How to inject dalteparin (Fragmin)

This section of the leaflet explains how you should go about injecting Fragmin yourself, but you should only do so if you have been given permission by your doctor/midwife and you have been shown how to administer the injection. It is a simple process and one that you can do at home. Fragmin is given by a small injection under the skin. You should take the dose of Fragmin at the time recommended by your doctor.

Please follow the steps explained below:

Wash and dry your hands. The injection site should be cleaned.

Please note that if a carer is doing the injecting, it is recommended that they wear gloves to perform the injection.

- Step 1:** Get yourself into a comfortable sitting down position where you can see your stomach.
- Step 2:** Choose an injection site either on your stomach or outer aspects of your left or right thigh. It is important that you change the site each time.
- Step 3:** Pick up the syringe and remove the grey rubber cover by pulling it straight off. You will notice an air bubble in the syringe. It is supposed to be there and you can just ignore it. It is important not to press the plunger just yet as some of the medicine may be lost.
- Step 4:** Hold the syringe in one hand and with the other hand, gently pinch a fold of skin with its fatty tissue between your thumb and index finger. This will be the injection site.
- Step 5:** Hold the syringe above the folded skin keeping it at a right angle. Insert the needle into the skin until the needle is fully inserted.
- Step 6:** Now press the plunger and inject the dalteparin (Fragmin) slowly until all of the medicine has been injected. Keep pinching the fold of skin while you are injecting and then release the fold of skin and pull the needle out. If there is any oozing of blood at the injection site, apply gentle pressure. Do not rub the injection site as this may encourage bruising.

Dispose of the syringe in the yellow sharps box provided. Keep your sharps box out of reach of other people. When the sharps box is almost full please speak to your doctor or midwife.