Smoking and pregnancy

Smoking causes harm to babies even before they are born. Cigarette smoke contains more than 7,000 chemicals, (including about 70 that are known to cause cancer). You and your baby are exposed to these chemicals when you smoke or when someone smokes around you.

Smoking and your unborn baby
The umbilical cord is your baby’s lifeline. The blood that flows through this cord gives your baby all the oxygen and nutrients it needs to grow.

When you smoke a cigarette you inhale the gas carbon monoxide. This reduces the amount of oxygen going to your baby through the umbilical cord. This makes the baby’s heart beat more rapidly and increases stress on baby’s developing body. Smoking can also reduce the flow of blood to the baby.

Smoking harm during pregnancy and birth
Women who smoke have a greater risk of:

• Ectopic pregnancy (a pregnancy outside the uterus) and miscarriage.
• Having a premature baby (one that is born early).
• Having a sickly and small baby. A small baby does not make labour easier and can put the baby’s life in danger.
• Baby dying during or soon after birth.

After your baby is born

• The risk of sudden infant death syndrome (SIDS, or ‘cot death’) is increased if you smoke during pregnancy or after birth.
• Babies and children who are exposed to smoke are more likely to suffer from asthma, other respiratory infections and middle ear infections.

Breastfeeding
Breast milk protects your baby against infection and breastfeeding is one of the best things you can do for the health of your baby. However, smoking reduces the amount and quality of breast milk you produce and some harmful substances from cigarettes go into breast milk and to the baby.

If you are having difficulty quitting smoking, try not to smoke just before or during feeds, and always go outside to smoke. Wear a ‘smoking jacket’ and hair covering outside when you smoke and remove these items before coming back inside to prevent the smoke that clings to your clothing from affecting the baby. Wash your face and hands thoroughly before handling your baby. Ask family members to do the same.

Remember, even if you do smoke, breastfeeding is still better for your baby than formula feeding because of the important nutrients and protective factors in breast milk.

If you quit smoking within the first 16 weeks of pregnancy, most of the harmful effects of smoking can be avoided.
Passive smoking
Every time someone smokes around you or your baby, you are all smoking too. This is called ‘passive smoking’. Passive smoking can affect the health of babies and children:

- Babies and young children have smaller, more delicate lungs than adults. This means they are more affected by tobacco smoke.
- Keep your baby safe by asking smokers to always go outside your home and car to smoke.

Getting support to quit
If you decide to stop smoking and need support to help you quit, you can:

- Call Quitline 13 7848 (13 QUIT) and speak to a trained advisor (cost of a local call).
- Talk with your doctor, midwife or other health professional.
- Encourage your partner, other family members and close friends to quit too.
- Download the Quit for 2 Quit for you app if you have a Smartphone from: www.quitnow.gov.au click on tools.

Common questions
Can I use nicotine replacement therapy (NRT) during my pregnancy and while breastfeeding?

If you’re pregnant it is best to try to quit first without using NRT. However, if you have tried this and found it too difficult then NRT is an option and is safer than continuing to smoke. You and your baby will get less nicotine and none of the other 7,000 poisons present in cigarettes.

It is best to speak with your doctor, midwife, or other health professional before you start using NRT to check that you don’t have any health issues that may prevent you from using NRT. If you are taking other medications, your doctor may need to adjust the dosage while you are using NRT.

Oral forms of NRT (such as gum, lozenges, strips, oral spray and inhalators) are preferred for pregnant women because they provide an occasional dose rather than a constant dose of nicotine. Pregnant women will usually need the higher dose (4mg rather than 2mg) of gum or lozenge to manage nicotine withdrawal symptoms and cravings because the body metabolises nicotine quicker during pregnancy.

If you don’t tolerate the oral forms of NRT, you can use the patch. It is important to remove the patch at bed time and apply a new patch in the morning. Try the 25mg/16 hour patch or the 21mg/24 hour patch, removed at night. Some pregnant women require larger doses of NRT or even ‘combination therapy’ (oral NRT plus a patch) to relief cravings and withdrawal symptoms.

If you think you need more NRT or combination therapy, discuss this with your doctor, midwife or health professional.

Oral forms of NRT and patches can be used while breastfeeding. Use the oral form of NRT straight after a feed to lower the risk to your baby.

If I am already three months pregnant, is it still worth quitting?
Yes. If you quit smoking within the first 16 weeks, your risk of having a sickly and small baby will be similar to if you had never smoked. The earlier in pregnancy that you quit the better, however quitting any time is still good for you and your baby.

Is it OK to cut down, rather than quit?
There is no safe level of smoking during pregnancy. Even a few cigarettes a day means your baby is exposed to poisons that might affect their health and development. Reducing the number of cigarettes does not necessarily reduce the harm as the way you smoke may change, such as drawing harder on each cigarette so that you get much the same dose of nicotine and other toxins each day even though you are smoking less. You are also damaging your own health by continuing to smoke. If you are cutting down to quit, consider using NRT so that you don’t draw back so hard on the cigarettes you are smoking.

If smoking relaxes me, isn’t this good for my baby?
Smoking might seem relaxing, but it actually increases your heart rate and blood pressure. Every puff on a cigarette decreases the amount of oxygen your baby receives. This makes the baby’s heart beat more rapidly and increases stress on the baby’s developing body.

Remember, it’s never too late to quit smoking. The sooner you quit the better.

If you would like help with quitting smoking contact the Quitline 13 7848 (13 QUIT) or speak with your health professional.