Pregnancy Planning for Women Being Treated for Opioid Use Disorder

How does opioid use disorder (OUD) treatment affect pregnancy?

- Your chances of becoming pregnant increase as your OUD treatment becomes more effective.
- An unplanned pregnancy can impact your recovery because it can add complications to your life when you are already dealing with many changes.
- If you want to wait until you are better prepared to become pregnant, your care team can help you find out about your family planning options.
- You will need to start taking 1 milligram of folic acid or a prenatal vitamin with 1 milligram of folic acid daily:



- Before you become pregnant.
- If you are pregnant.
- Babies exposed to opioids before birth may develop withdrawal signs called neonatal abstinence syndrome (NAS) or neonatal opioid withdrawal syndrome (NOWS). Longer term effects of OUD medicine on the infant are possible, but more research needs to be done to understand these longer term effects.
- Your OUD medicine dose may change during your pregnancy.
 - Your dose may need to be temporarily increased during your third trimester when your body changes the most.
 - You should never change your medicine routine unless you have talked to your care team first.
 - Changing your dose will NOT change the severity of NAS/NOWS for your baby.
- Your pregnancy will be safest if:
 - You are living in a calm, stable place.
 - You know you can maintain your recovery.
 - You take care of yourself and are ready to be a mother.



What should you do if you become pregnant while being treated for OUD?

- Talk to your care team about questions you may have.
- Begin prenatal care with your healthcare provider as soon as possible. Regular medical prenatal visits can provide pregnancy screenings for conditions that should be treated to ensure good health for you and your baby.
- Don't assume that your treatment medicines like methadone or buprenorphine are dangerous. They can be used safely during pregnancy.
- Discuss your treatment options with your care team. The risk for relapse is high when people stop taking their treatment medicines, so it is important for many women to continue taking them. Any decisions about OUD medicine should be made carefully with you and your provider.

What should you consider when planning a pregnancy?

- Discuss how to prepare for pregnancy with your care team.
 - They can help you quit smoking and drinking alcohol and offer other suggestions to help you.
 - If you don't have an OB/GYN provider, your care team can recommend one.
- At your first appointment with your OB/GYN provider, discuss all your medicines, including those you are taking for OUD.
- Talk to your care team about safe options for treating pain during or shortly after delivery.
- Think about seeking additional counseling or another form of support.
 - Pregnancy and parenting can be stressful and overwhelming.
 - Counseling can help you make good decisions about your health.
- Your care team can work with you to stay on track with your recovery.

Planning for Pregnancy While Being Treated for Opioid Use Disorder

What do you need to do when you are pregnant?

As soon as you find out you are pregnant

- Contact your OUD care team immediately to let them know of your pregnancy.
 - They will advise you about any potential changes in your treatment.
 - They can help you find an OB/GYN provider if you don't have one.



- Make your first medical appointment with an OB/GYN provider for prenatal care and follow the schedule of visits that your OB/GYN provider recommends.
- Talk with your OB/GYN provider about your medical history, especially if you suffer from anxiety, depression, bipolar disorder, attention deficit hyperactivity disorder, hypertension, or diabetes.
- Ask your care team about which medicines are safe to use during pregnancy and which are not safe; you might need to make some changes.
- Stop using alcohol and tobacco and drugs that are harmful to pregnancy.
 - Quitting smoking and drinking while in (or getting into) treatment may improve your chances of recovery from other substances.
 - Smoke-free environments and abstaining from drinking alcohol during pregnancy are best for your child's lifelong health.

During your pregnancy

- Learn about NAS/NOWS.
 - Find out what you can expect during your pregnancy and after delivery to reduce NAS/NOWS severity.
 - Ask your care team about breastfeeding, safe

sleep practices, and other ways to comfort your baby and keep your baby healthy.

- Participate in childbirth classes before the baby is born and parenting classes during and after pregnancy.
- Learn as much as you can about how to provide a safe and healthy home for your baby.
- Remember that help is available to you and your baby after birth.
 - Your pediatric provider can answer your questions about your baby's development.



- Early childhood programs (e.g., State Pre-K, Head Start, Early Head Start, Model Early Childhood Programs, Nurse Home Visiting) are available for all family members.

Identify people you can count on before and after your baby is born

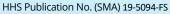
- Think about who is in your circle of friends and family now.
 - Will people in your circle help you during the pregnancy and after your baby arrives?
 - Will they help you provide a safe environment to raise your baby?
- If you answer no to either of these questions, talk with your care team about finding support before, during, and after your baby arrives.
- Ask for help whenever you need it.
 - Pregnancy can add a lot of stress to your life and may impact your ability to stay in recovery.
 - Your group or individual therapy classes can help you while you are pregnant and afterward.
 - Counseling or other types of support can keep you on track with recovery and prepare you for the rewards and challenges of being a mother.
- Stay connected and ask your care team for help when you feel sad or depressed.



Take care of yourself. A healthy mother means a healthy baby!



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