

## **ASTHMA IN PREGNANCY**

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Asthma is a frequent medical condition that occurs in approximately 17 million Americans, and many people with asthma suffer from allergies as well. Women of child bearing age, who are or may become pregnant, need special consideration in treating their asthma or allergies. The treatment plan needs to consider the medical condition of the patient, while reducing the risks to the unborn child.

For many years, it was suggested that a woman with asthma may risk complications during pregnancy. Most complications from asthma result from patients who are poorly controlled and who experience daily symptoms, and have frequent emergency room visits or hospitalizations because of their asthma. Poor asthma control can result from a fear of using medication during pregnancy, leading to under-treatment and unstable asthma. The risks to the child include premature birth, low birth weight and other complications.

Recent information suggests risks to the unborn child can be minimized, if a mother's asthma is under good control. In general, asthma medications in use today are safe for use during pregnancy. Although pregnant women rarely participate in studies of medication side effects, there is extensive data available from long-term use of these medications and from laboratory studies on animals.

For patients with allergies, it is important to know that many allergy medications are also safe for use during pregnancy. Some over-the-counter medications should be avoided however, so it's important for your physician to know what medicines you use. Allergy shots are not started on pregnant patients, but can be continued during pregnancy for patients currently receiving them. The dose will not be increased however, to avoid the risk of a significant reaction to the shots.

In treating allergies or asthma, it is important to emphasize environmental controls, which help avoid exposure to allergic triggers such as dust, pet dander, or pollen. Having an understanding of allergic triggers is an important part of a treatment plan. Allergic triggers are a cause of asthma attacks, so avoidance is essential and can help reduce the need for medication. Also, patients with asthma should monitor their asthma with a peak flow meter. This can help track asthma control and identify a potential attack before symptoms even develop.

If possible, before becoming pregnant, a patient should discuss the status of her asthma and allergies with her physician. If it's not possible, patients should contact their physician as soon as they know they are pregnant. By doing so, adjustments can be made to the treatment plan so control of asthma symptoms can be improved or maintained. When asthma is under good control, the mother and baby can avoid the risks of complications. When using medications, patients should understand their safety for use during pregnancy. It is important to remember that the risks of poorly controlled asthma generally outweigh the risks of today's medications. Finally, it is important to remember that asthma and allergy control should be monitored throughout pregnancy.