

## Pregnancy and travel

Generally speaking, the safest time for a pregnant woman to travel is during her second trimester, provided she isn't experiencing any complications. If you are pregnant and considering travel, you must consult with your doctor, especially if your pregnancy is high-risk. Take into consideration the standard of medical care at your chosen destination, just in case you need help. Some countries have reciprocal health care arrangements - check with Medicare. Travelling to developing nations is never a good idea during pregnancy for various reasons, including the risk of disease and the comparatively low standard of medical facilities.

### High-risk pregnancies

Pregnant women experiencing complications are advised not to travel. Some of these complications include:

- Cervical problems, such as 'incompetent cervix'
- Vaginal bleeding
- Multiple foetuses
- If you are aged 35 years or over and pregnant for the first time
- Gestational diabetes, past or present
- High blood pressure, past or present
- Pre-eclampsia, past or present
- Abnormalities of the placenta, past or present
- Prior miscarriage
- Prior ectopic pregnancy
- Prior premature labour.

### Immunisation warnings

Travellers to most developing nations need to be vaccinated against diseases such as typhoid, but most vaccines are either dangerous to unborn babies or haven't been adequately tested for safety on pregnant women. Generally, all live virus vaccines (such as mumps and measles) should be avoided during pregnancy. Some vaccines, such as yellow fever, may cautiously be given after the first trimester. Be advised by your doctor. It is recommended that pregnant women delay any travel to developing nations until after their babies are born.

### The risk of malaria

Malaria is an infection carried by particular species of mosquito. A pregnant woman who catches malaria risks miscarriage, premature labour and stillbirth. Some antimalarial drugs (such as chloroquine) are considered safe to take during pregnancy, but others (such as doxycycline) are potentially harmful to the unborn baby. It is recommended that pregnant women avoid travelling to areas where malaria is present.

### Before the flight

If you are travelling by plane, suggestions include:

- Before planning your trip, consult with your doctor to discuss any potential risks particular to your pregnancy. For example, a woman with gestational diabetes or multiple foetuses is generally advised not to fly.
- Air travel in the last six weeks of pregnancy could trigger premature labour.
- Some airlines won't allow a woman over 35 weeks gestation to fly.

- Some airlines require that pregnant women over 35 weeks gestation have a doctor's note of approval for flying.
- Some travel insurance policies may not cover pregnancy. Check the fine print.
- Arrange with the airline for a bulkhead seat or a seat near an exit for extra leg room.
- Booking an aisle seat makes getting up to go to the toilet a little easier.

## Your medical kit

Discuss your medical kit with your doctor before you leave. Remember to pack this kit in your carry-on luggage so you can access it during the flight. As well as standard items (such as bandages, thermometer and tweezers), your medical kit should contain:

- Preparations to help you treat common pregnancy complaints, such as heartburn, thrush, constipation and haemorrhoids.
- Oral rehydration preparations in case of travellers' diarrhoea while away.
- Multivitamin tablets formulated for pregnancy.
- Urine dipsticks to check glucose levels (if required).

## Air travel concerns

General cautions include:

- Wear your seat belt under your belly and across your lap.
- A pregnant woman's circulation is already under strain. The lower cabin pressure inside a plane can theoretically increase the risk of blood clots. Stretch and move your legs regularly while seated. Consider wearing support stockings for the duration of the flight.
- Drink plenty of water to reduce the risk of dehydration. Keeping up your fluid intake will also reduce the risk of deep vein thrombosis (DVT).
- Walking up and down the aisles isn't a good idea, as unexpected turbulence could knock you off your feet. Only get out of your seat when necessary, such as going to the toilet.
- Many pregnant women experience anaemia. If you are feeling short of breath or light-headed while in the air, ask one of the flight attendants to give you breathing oxygen.

## Some holiday activities can be dangerous

Certain sporting activities carry an increased risk to the unborn baby. Activities to avoid include:

- **Water skiing** - coming off the skis could force water into the vagina.
- **Scuba diving** - the changes in blood gases may harm your baby. However, snorkelling is fine.
- **Saunas and hot tubs** - raising your body temperature can harm your baby.
- **High altitude activities** - such as mountain climbing. At heights of 3,000m or more, the oxygen level in the air is low. This compromises the oxygen available to your baby. Pregnant women are also more vulnerable to developing altitude sickness.

## Travellers' diarrhoea

Be careful to avoid food poisoning, as certain infections can harm the baby or trigger miscarriage. General suggestions include:

- Avoid food buffets, seafood, undercooked meats, soft cheeses and pates.
- Wash hands thoroughly after going to the toilet, before preparing food and before eating.
- In developing nations, only eat fruit that you have peeled yourself. Avoid leafy greens and salads because they could have been washed in contaminated water.
- If unsure of the water supply, drink bottled water. Use bottled water when brushing your teeth. Ensure that all eating utensils are thoroughly dried after washing.
- Avoid ice.
- If you must use the local water, boil it thoroughly for five minutes first.
- Avoid treating unsafe water with iodine, as iodine can cause your unborn baby to develop a goitre (enlarged thyroid gland), if consumed over a few weeks.

## Medications should be avoided

Pregnant women should be wary of taking drugs of any kind. Some drugs can pass to the baby, via the placenta, and cause birth defects and miscarriage. General cautions include:

- Avoid taking any over-the-counter medication unless advised by your doctor who knows you are pregnant.
- Drugs that are commonly used to treat travellers' diarrhoea are dangerous during pregnancy.
- Limit alcohol or, ideally, avoid it altogether.
- Avoid using 'social' or 'recreational' drugs.

## Where to get help

- Your doctor
- NURSE-ON-CALL Tel. 1300 60 60 24 – for expert health information and advice (24 hours, 7 days)
- Medicare
- Travel agent
- Airline

## Things to remember

- The safest time for a pregnant woman to travel is during her second trimester, provided she isn't experiencing any complications.
- If you are pregnant and considering travel, you must consult with your doctor, especially if your pregnancy is high-risk.
- Avoid travelling to developing nations during pregnancy.
- Pregnant women should be wary of taking drugs of any kind, including those commonly used to treat travellers' diarrhoea.

**This page has been produced in consultation with, and approved by:**

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