Nausea and vomiting in pregnancy

Differential diagnoses
- Non-pregnancy related (e.g. sepsis, appendicitis)
- Morning sickness
- Hyperemesis gravidarum

Investigations
- FBE
- UE (+/- CMP)
- LFT
- Urine MCS and ketones, +/- TSH
- Early pregnancy ultrasound scan, to exclude gestational trophoblastic disease and multiple pregnancy

Mild-moderate nausea and vomiting

Non pharmacological interventions
- Dietary, activity changes
- Herbal remedies
- Acupressure, acustimulation, acupuncture
- Relaxation, hypnotherapy
- Homeopathy
- Massage
- Counselling, emotional support

Pharmacological interventions
- Pyridoxine
  + Doxylamine
  + Second antihistamine: promethazine, dimenhydrinate
  + Metoclopramide or prochlorperazine

Rehydration
- Out-patient IV hydration may be required for some women with mild-moderate nausea and vomiting

Hyperemesis gravidarum

All interventions as per mild-mod nausea and vomiting
  Plus

Additional oral pharmacological intervention
- Ondansetron
- Chlorpromazine
- Thiamine

Admit to hospital if
- Not tolerating orals
- Dehydrated +/- ketotic
- Unable to tolerate fluids orally or refractory to oral anti-emetic treatment
- See eHandbook page for in-patient management

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Hyperemesis assessment and management