

If you smoke more than 10 to 15 cigarettes a day, especially if you need to smoke early in the day, then it is likely that you are very dependent on nicotine

Your doctor has advised you to use Nicotine Replacement Therapy

If you are smoking while pregnant or breastfeeding, your doctor or health care worker will recommend you try to quit without medicine. Next, you may be recommended to use medicine while you are pregnant, especially if you were unable to quit from the advice given. Many medicines used to stop smoking cannot be used during pregnancy except Nicotine Replacement therapy (NRT).

NRT releases nicotine into the bloodstream of the smoker who is trying to quit. This is helpful in relieving cravings and discomfort from withdrawal symptoms. Safety of the NRT products has not been adequately evaluated in pregnant women, so it's real life effects are not well-known.

Although nicotine is a toxin, pregnant and breastfeeding women already expose their child to nicotine if they continue to smoke. Smoking cigarettes results in much higher levels of nicotine in blood than NRT.

Overall, NRT is considered to be safer than continuing to smoke. Cigarette smoke contains many more chemicals known to be toxic to yourself and your unborn or breastfed child.



Tobacco smoke contains over 4,000 toxic chemicals which pass onto an unborn baby. Some of the risks of smoking while pregnant include:

- Miscarriage
- Complications during the birth
- Having a low-weight baby who is more vulnerable to infection and health problems in adulthood
- Pre-term delivery (birth at less than 37 weeks)
- The baby being born with a cleft lip or cross-eyes
- The baby being born with weaker lungs, which may persist into adulthood
- The baby having a weaker immune system
- The baby being overweight or obese in childhood

High nicotine levels in cigarettes reduce the oxygen and nourishment to the unborn baby. It also increases mother's and baby's heart rate and blood pressure. Nicotine from NRT produces a much smaller effect than smoking.

What is the best choice of NRT in pregnancy and breastfeeding?

Nicotine replacement should be used as early on in the pregnancy as possible with the aim of quitting and stopping as soon as possible.

Intermittent forms of NRT like gum, lozenge or inhaler are recommended to use first, as these products usually provide a lower overall daily dose than the patch.

Patches are used as a second choice especially if your body cannot have other forms of NRT or you have trouble stopping smoking completely, while using other forms. If patches are chosen, it is best to remove them before going to bed.



Here are some tips to help you stay smoke free¹

- Eating breakfast reduces cravings
- A small dessert after a main meal can reduce craving
- Short bursts of exercise can reduce cravings
- Halve your caffeine intake
- Reducing alcohol can increase your chances of successfully quitting
- Make your house & car smoke free
- Avoid being around other smokers
- Changing routines that are normally associated with smoking can help you decrease your daily cigarette intake

Having a partner who is a non-smoker or quits smoking is an advantage.

Nicotine from cigarettes and NRT passes into the breastmilk and may alter the flavour of breastmilk. If you continue to smoke while breastfeeding you should breastfeed your child before using NRT like gum or lozenges. This ensures that the longest possible time between use of NRT and breastfeeding, so the child is exposed to less nicotine.

Remember, the amount of nicotine from NRT is less than that from cigarettes, and less dangerous to your child than secondhand smoke.

Telephone numbers and people who can help keep you on track:

- Call Quitline 13 7848 or visit <http://www.quitnow.gov.au/>
- Quit For You Quit For Baby – free quit smoking app for mum's-to be.
- Download the 'My QuitBuddy' app on your smartphone to track your progress
- See your local doctor, pharmacist or healthcare provider when you are at home
- Addiction Services offers free face-to-face counselling and advice to smokers in the Metro South area, you can contact them for more information:

Inala 07 3275 5300
Cleveland 07 3825 6060
Logan Central & Browns Plains 07 3089 4084

Aboriginal and Torres Strait Islander Support:
<http://quit.nosmokes.com.au/>

Disclaimer: The information contained in this brochure is intended to support not replace discussion with your doctor or health care professional.

Acknowledgments

This brochure was adapted from Quit Victoria website:
<http://www.quit.org.au/about/frequently-asked-questions/faqs-pregnancy-and-quitting-smoking/faq-pregnancy-quitting-medications.html>

References

RACGP
 Supporting smoking cessation: a guide for health professionals
[\(www.racgp.org.au/your-practice/guidelines/smoking-cessation/\)](http://www.racgp.org.au/your-practice/guidelines/smoking-cessation/)

National Clinical Guidelines for the Management of Drug Use During Pregnancy, Birth and the early Development Years of the Newborn
http://www.drugsandalcohol.ie/6297/1/3795_National_clinical_guidelines.pdf



Partnering with Consumers - This patient information brochure supports National Safety and Quality Health Service Standard 2 (2.4.1) Consumers and/or carers provided feedback on this patient information.

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