



Lauren Maggi, October 23, 2023

Evaluation and management of Nausea and Vomiting in Pregnancy

Definition or Key Clinical Information: The specific cause of nausea and vomiting in pregnancy (NVP) is unknown, though the hypothesized causes include: genetic factors, hormonal factors, *Helicobacter pylori*, gastrointestinal dysmotility, placenta related factors, and psychosocial factors (Liu et al., 2022). Diagnosis is done by client report of the severity and frequency of symptoms, though the severity of affects of the symptoms, such as hydration, may be assessed using urine analysis and blood analysis (Barley et al., 2020). Up to 70% of pregnancies experience NVP, though only 1.8% report the common “morning sickness” of NVP only being in the morning (Liu et al., 2022). 15%-20% report NVP late in pregnancy, and 5% report NVP throughout pregnancy (Zhang et al., 2020). NVP can cause negative effects on quality of life including feelings of inadequacy, anxiety, and increased stress (Nassif et al., 2022).

Assessment

Risk Factors

- <20 years of age (Liu et al., 2022)
- Primigravida (Liu et al., 2022)
- <12 years of education (Liu et al., 2022)
- Non-Smokers (Liu et al., 2022)
- Oral contraceptive use before pregnancy (Liu et al., 2022)
- Multiple gestation (Liu et al., 2022)
- Low physical activity (Zhang et al., 2020)
- History of GI disease (Zhang et al., 2020)

Subjective Symptoms

- Frequent nausea
- Frequent vomiting
- Lack of appetite

Objective Signs

- Weight loss
- Visual examination of urine

Clinical Impressions

- Client has low energy
- Client has poor coloring of the skin

Clinical Test Considerations

- Urine analysis to look at urine specific gravity (USG)
- Blood analysis to look at the plasma/serum osmolality (Barley et al., 2020)

Differential Diagnosis

- Hyperemesis gravidarum
- Peptic Ulcers
- Cholecystitis
- Gastroenteritis
- Hepatitis
- Pancreatitis
- Genitourinary conditions such as UTI or pyelonephritis
- Metabolic conditions
- Neurological conditions
- Drug-induced nausea and vomiting (Gabra et al., 2019)

Management plan

Therapeutic measures to consider within the CPM scope

- Aromatherapy-Inhalation of lemon oil combined with a carrier oil on a cotton ball (Nassif et al., 2022)
- 1g-1.5g of ginger once a day for 4 days (Nassif et al., 2022)
- Acupressure bracelets (Nassif et al., 2022)
- IV Fluids (Liu et al., 2022)
- Dramamine (Liu et al., 2022)
- Unisom and B6 (Liu et al., 2022)

Therapeutic measures commonly used by other practitioners

- Acupuncture of the PC-6 point
- Ondansetron (Zofran)
- Doxylamine-pyridoxine (Diclegis)
- Metoclopramide (Reglan) (Liu et al., 2022)

Ongoing care Follow up in 4-7 days to see if symptoms have lessened. If the ability to eat or drink is still diminished and dehydration has occurred or is imminent, IV fluids should be administered.

Indications for Consult, Collaboration, or Referral

- In the case of severe hyperemesis gravidarum, a feeding tube may need to be placed
- Referral for acupuncture
- In the case of intrauterine growth restriction caused by NVP, referral to OB
- In the case of hypertension caused by NVP, referral to OB

Client and family education

- Handouts given on nutrition, aromatherapy, and self-acupressure

References

- Barley, O. R., Chapman, D. W., & Abbiss, C. R. (2020). Reviewing the current methods of assessing hydration in athletes. *Journal of the International Society of Sports Nutrition*, 17(1). <https://doi.org/10.1186/s12970-020-00381-6>
- Gabra, A., Habib, H., & Gabra, M. (2019). Hyperemesis gravidarum, diagnosis, and pathogenesis. *Critical Care Obstetrics and Gynecology*, 05(01). <https://doi.org/10.21767/2471-9803.1000172>
- Liu, C., Zhao, G., Qiao, D., Wang, L., He, Y., Zhao, M., Fan, Y., & Jiang, E. (2022). Emerging progress in nausea and vomiting of pregnancy and hyperemesis gravidarum: Challenges and opportunities. *Frontiers in Medicine*, 8, 1–17. <https://doi.org/10.3389/fmed.2021.809270>
- Nassif, M., Costa, I., Ribeiro, P., Moura, C., & Oliveira, P. (2022). Integrative and complementary practices to control nausea and vomiting in pregnant women: A systematic review. *Revista da Escola de Enfermagem da USP*, 56. <https://doi.org/10.1590/1980-220x-reeusp-2021-0515en>
- Zhang, H., Wu, S., Feng, J., & Liu, Z. (2020). Risk factors of prolonged nausea and vomiting during pregnancy. *Risk Management and Healthcare Policy*, 13, 2645–2654. <https://doi.org/10.2147/rmhp.s273791>