

THE
FACTS

Smoking and Pregnancy

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Smoking Reduces Fertility

In women, smoking damages eggs. On average, **women who smoke often take longer to get pregnant and are more likely to have trouble getting pregnant** at all.

In men, smoking can cause **erectile dysfunction** and damage to sperm.

On average, infertility problems occur at about **twice the rate for men and women who smoke** compared to non-smokers.

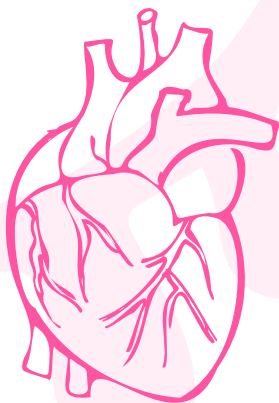
As soon as you **quit smoking, fertility starts to improve.**

When You Smoke, Your Baby “Smokes” too.

Every time you have a cigarette you are **breathing in harmful chemicals, which get into the mother’s blood and are passed on to the baby.**

Smoking reduces the amount of oxygen in the mother’s blood, **reducing the amount of oxygen available to the baby.**

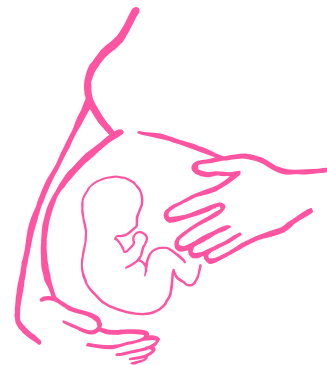
The nicotine in cigarettes **increases the baby’s heart rate.**



Risks Associated to Smoking During Pregnancy

Women who smoke during pregnancy are at an increased risk of:

- ▶ Miscarriage
- ▶ Ectopic pregnancy (when the **embryo implants outside of the uterus**)
- ▶ Problems with the placenta
- ▶ Pre-eclampsia (**a potentially fatal condition for the mother**)



The babies of women who smoke during pregnancy are at increased risk of:

- ▶ Premature birth
- ▶ Being born addicted to nicotine and **having to go through withdrawal**
- ▶ Low birth weight (underweight babies are at a **higher risk of a range of health problems**)
- ▶ Birth defects
- ▶ Sudden Infant Death Syndrome
- ▶ Middle ear infections and hearing impairment
- ▶ Asthma and other lung problems
- ▶ Poorer brain development, which can **lead to learning difficulties**

Is your GP aware of your quit attempt? • Do you need a referral to GP/Community Health/cessation expert? • Have you had a Quitline Fax referral? • have you got “Quitline” brochure?

Email: tis@gph.org.au | Call: [02] 6298 2900

Website: <https://bit.ly/ButtOutBoondah> | Facebook: <https://www.facebook.com/GPHTIS>

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Second Hand and Third Hand Smoke During Pregnancy

Mothers and their unborn babies are also at risk from **other people's cigarette smoke, or smoke that gets absorbed into furnishing, clothing etc** (see fact sheets 'Second Hand Smoke' and 'Third Hand Smoke').

Quitting is Best for You and Boori.

It is **never too late for you or your partner to quit**. Call the Aboriginal Quitline on **13 7848** (13 QUIT). The free app "Quit for you – quit for two" is specially designed for women who are **pregnant or planning to have a baby**. It's available on Apple iTunes and Google Play.

Nicotine Replacement Therapy

While it would be ideal to quit without nicotine replacement therapy (NRT), it can be difficult. Fortunately, NRT **can be used during pregnancy as the nicotine levels from NRT are lower than they are from smoking**. Your baby will not be exposed to the other harmful chemicals in cigarette smoke.

Intermittent NRT (gum, lozenges, spray) is preferred but if patches are required, **16-hour rather than 24-hour patches are recommended**.

Consult your health professional for advice on whether to use NRT and the right type and dose for you.

What About E-Cigarettes?

Use of e-cigarettes during pregnancy is not advised, as **the nicotine levels may be as high as conventional cigarettes**. Even if they contain no nicotine, **e-cigarettes contain other toxic chemicals, which could potentially harm the baby** (see fact sheet 'Vaping').



Vape or e-cigarette

When quitting gets tough, remember that by becoming a non-smoker, you are giving your baby the best start in life.

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