

Talking to Your Providers About Substance Use

- ❖ Obstetricians, midwives, and family practitioners all provide care to pregnant people. Some providers can also provide treatment for substance use disorders. All providers can help you access local Hubs or Spokes to initiate Medications for Opioid Use Disorder (MOUD), also known as Medications for Addiction Treatment (MAT) or help you access treatment for alcohol or cannabis use disorder.
- ❖ No matter who provides your pregnancy care, we all want the best for you and your unborn baby. Please talk to us about any substances you may be using so we can have a conversation about any risks and steps you can take to have a healthy pregnancy.
- ❖ We ask about substance use at every visit for every pregnant person to provide the best care and keep the conversation open about your current use and goals for decreasing or stopping use.
- ❖ If you are receiving pregnancy and substance use disorder care from different providers, please consider signing releases so we can share relevant information to provide the best care for you and your baby.



One More Conversation **Can** Make The Difference

One More Conversation is a campaign by the Vermont Department of Health to give pregnant people information, questions to ask, and courage to reach out to health care providers and continue the conversation.

[Substance Use in Pregnancy | Vermont Department of Health \(healthvermont.gov\)](https://www.healthvermont.gov/family/pregnancy/substance-use-pregnancy)

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Treatment of Opioid-Use Disorder During Pregnancy

- ❖ When you are using opioids including heroin or pain medications (such as OxyContin, Percocet, Vicodin, etc.) regularly and are sick when you don't use them, chemical changes have happened in your brain that makes it extremely difficult to stop without help.
- ❖ When a pregnant person goes into withdrawal, the baby also experiences withdrawal, which can be dangerous.
- ❖ If you become pregnant and are using opioids, there are prescription medications available that can help you and your baby have a healthy pregnancy.
- ❖ Medications for Opioid-Use Disorder (MOUD) also known as Medications for Addiction Treatment (MAT) include Methadone, Buprenorphine (Subutex), and Buprenorphine-Naloxone (Suboxone). This is the preferred treatments for pregnant people with opioid-use disorder.
- ❖ MOUD/MAT help you and your baby. These medicines prevent withdrawal symptoms, decrease your cravings to use, and are safe to use during pregnancy and breastfeeding.
- ❖ Many babies will have some symptoms after birth that improve with supportive care. Less than 25% of babies born to mothers receiving MOUD/MAT will need medications (such as methadone or morphine) to treat withdrawal.
- ❖ The dose of MOUD/MAT does not predict an infant's need for treatment. It is important you continue an effective dose during pregnancy as decreasing it may not change the baby's need for treatment and may lead to withdrawal symptoms for you.
- ❖ If your baby needs medicine for withdrawal symptoms, it does not mean your baby was born "addicted". The baby just needs the medicine (often just one or a few doses), to help them manage their symptoms until they resolve on their own.





Tobacco Use in Pregnancy

The birth of your baby is exciting and represents a new beginning for everyone. It can provide a wonderful opportunity to consider making positive changes.

❖ What are the risks of smoking for my baby?

Smoking and vaping tobacco products during pregnancy may lead to:

- Premature birth
- Low birth weight
- Nicotine withdrawal symptoms
- Increased the need for treatment for Neonatal Abstinence Syndrome

Babies exposed to secondhand tobacco smoke are at an increased risk of having:

- Pneumonia
- Ear infections
- Asthma and other breathing problems
- Sudden infant death syndrome

❖ Quitting is hard, will cutting back help?

If you can quit using tobacco products, this is the healthiest choice for you and your baby. However, decreasing the number of cigarettes to less than six a day or reducing the amount of vaping before birth, can decrease the withdrawal symptoms that your baby may have.

❖ What resources are available to help me quit?

Call: 1-800-Quit Now (1-800-784-8669) for Vermont State quit line



Vermont: <https://802quits.org/>

New York: <https://www.nysmokefree.com/>



❖ Where can I get more information?

Vermont Department of Health One More Conversation: Tobacco Fact Sheet
[adap_1MC_TobaccoFactSheet.pdf \(healthvermont.gov\)](https://healthvermont.gov/adap_1MC_TobaccoFactSheet.pdf)



Cannabis Use in Pregnancy

Though challenging, reducing or stopping cannabis use during your pregnancy is a great step you can take to provide a safe and healthy beginning to your baby's life.

❖ What are the risks of using cannabis for my baby?

Using THC containing cannabis products during pregnancy may lead to infants having:

- Lower birth weight
- Decreased muscle tone
- Delays in motor development

During breastfeeding THC from smoking, vaping, or eating cannabis can be found in breast milk within 20 minutes of use and is present for up to 6 days. Infants exposed to THC via breastfeeding may have:

- Sleepiness
- Difficulties breastfeeding or sucking

Babies exposed to secondhand cannabis smoke are at an increased risk of having:

- Respiratory infections and breathing problems
- Sudden infant death syndrome

❖ What about cannabis use for morning sickness?

As THC is associated with risks for your baby, talk to your pregnancy provider about other treatment options for nausea and vomiting, anxiety or sleep difficulties that may be safer than cannabis use.

❖ What resources are available to help me quit cannabis?

Vermont Help link

Telephone: 802-656-LINK

Website: [Vermont Helplink for Alcohol & drug support center \(vthelplink.org\)](http://vthelplink.org)



❖ Where can I get more information?

Vermont Department of Health Let's Talk Cannabis- Cannabis, Pregnancy and Breastfeeding

[Cannabis, Pregnancy and Breastfeeding | Vermont Department of Health \(healthvermont.gov\)](http://healthvermont.gov)



Vermont Department of Health One More Conversation: Cannabis Fact Sheet
[adap_1MC_CannabisFactSheet.pdf \(healthvermont.gov\)](http://healthvermont.gov)





Hepatitis C in Pregnancy

❖ What is hepatitis C?

Hepatitis C is a virus that attacks the liver. In the United States, there are more than 4 million people who have ever had hepatitis C virus infection.

❖ How does a newborn get hepatitis C?

About 4 in 100 pregnant people who are infected with hepatitis C virus will pass it to their baby during delivery. The risk is related to how much of the virus a person has (viral load) and whether they also are infected with HIV.

❖ When are babies tested for hepatitis C?

If a pregnant person has hepatitis C, their baby will have a blood test at 12-18 months of age to determine whether the infection was passed to the baby.

❖ Can I breast feed if I have hepatitis C?

Yes, it is safe to breast-feed, but if your nipples are bleeding you should express your milk and discard it until they are healed.

❖ Can my baby go to daycare?

Yes, your baby can go to daycare. You do not need to tell the daycare providers or other caregivers that your baby has been exposed to hepatitis C.

❖ Can my baby give hepatitis C to someone else?

This is very unlikely. Kissing, hugging, sneezing, coughing, sharing food or water, or casual contact do not pass along hepatitis C. Children infected with hepatitis C should not be excluded from school, play, or any other childhood activity based on their infection status.

❖ What if my baby does test positive for hepatitis C?

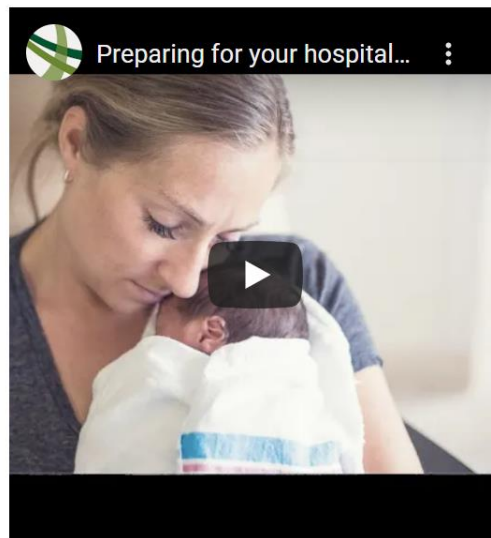
Your baby will be referred to a specialist so that they can monitor them as they grow. Many babies will clear their hepatitis C infection, and treatment is available after age 3 if it does not clear on its own.

During Pregnancy

Preparing for Your Time in the Hospital

- ❖ While your baby is in the hospital, you will care for your infant as much as possible. It is helpful to have a support person with you to help care for your baby in your room (partner, other family member, or friend).
- ❖ Bring enough clothes and personal items with you to last for 4 days or more.
- ❖ Plan to have someone watch your other children and/or pets while you are away.
- ❖ Sometimes it is hard to talk to your family about why your baby might need to stay in the hospital. If this is true for you, discuss it with your pregnancy provider.

This video may provide answers to some of your questions:



Additional information is also available on our website:

[Improving Care for Opioid-exposed Newborns \(ICON\) | College of Medicine | University of Vermont \(uvm.edu\)](https://www.uvm.edu/ICON)





Breastfeeding Questions

❖ Can I breastfeed?

YES! Individuals being treated for opioid dependency/addiction with methadone or buprenorphine can breastfeed. In fact, they are encouraged to do so!

❖ Why breastfeed?

For most newborns, breast milk is the only food needed for the first six months of life. There are many health benefits for both the birthing parent and baby.

❖ For infants:

- Fewer ear infections, lung infections, and gastrointestinal infections
- Decreased risk of sudden infant death syndrome (SIDS)
- Reduced chance of developing obesity, diabetes, and asthma

❖ For birthing parents:

- Bonding time with your baby
- Less post-partum bleeding
- Decreased risk of diabetes, high blood pressure, and certain types of cancer
- Lowered risk of post-partum depression

❖ Will my baby be harmed by methadone or buprenorphine that is passed through my breast milk?

No, the amount of methadone or buprenorphine passed through breast milk is very small and causes no harm to your baby.

❖ In what situations should I NOT breastfeed my infant?

People infected with human immunodeficiency virus (HIV) should not breastfeed. Individuals who are using cocaine, heroin, or non-prescribed substances should also not breastfeed.

❖ Can I breastfeed if I am infected with hepatitis C virus?

YES! Individuals who are infected with hepatitis C virus may breast feed. But if your nipples are cracked or bleeding you should use a breast pump to express breast milk from that affected breast and discard the milk until your nipples have healed. If only one breast is cracked and bleeding, you may still breast feed from the other breast.

During Pregnancy

Breastfeeding Resources

"My baby needed methadone treatment for withdrawal symptoms. Breastfeeding was one of the most important decisions I made regarding his health and treatment plan."



Websites and videos:

FIRSTDROPLETS

Videos to support the successful initiation of breastfeeding.

[Droplet \(firstdroplets.com\)](https://firstdroplets.com/) <https://firstdroplets.com/>



STANFORD HOSPITAL NEWBORN NURSERY

Videos on latch, hand expression, maximizing pumping

[Breastfeeding | Newborn Nursery | Stanford Medicine](https://med.stanford.edu/newborns/professional-education/breastfeeding.html)

<https://med.stanford.edu/newborns/professional-education/breastfeeding.html>



KELLYMOM

Information about many aspects of breastfeeding and parenting.

Many online articles and videos. A great place to get your questions answered.

[KellyMom.com Breastfeeding and Parenting](https://kellymom.com/) <https://kellymom.com/>



BIOLOGICAL NURTURING

Laid Back breastfeeding video

[Biological Nurturing Scenario on Vimeo](#)



THERAPEUTIC BREAST MASSAGE & HAND EXPRESSION VIDEO

Therapeutic breast massage is a light massage technique that mothers can use to help relieve breast swelling and engorgement.

[The Basics of Breast Massage and Hand Expression on Vimeo](#)



GLOBAL HEALTH MEDIA PROJECT

Short videos on breastfeeding positioning and latch.

[English Language Videos - Global Health Media Project](https://globalhealthmedia.org/language/english/?_sft_topic=breastfeeding)

https://globalhealthmedia.org/language/english/?_sft_topic=breastfeeding



INFANT RISK CENTER

Information on medications, substances, and supplements while breastfeeding.

[InfantRisk Center](https://www.infantrisk.com)

<https://www.infantrisk.com>

