

Pregnant women taking risks with asthma medication

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(Medical Xpress) -- Pregnant women are exposing themselves and their unborn babies to unnecessary risk by stopping their asthma medication without consulting their doctor.

Research, published in <u>The Journal of Asthma</u>, by Monash University scientists found women were poorly supported in managing asthma during pregnancy, with many incorrectly believing medication would interfere with their pregnancy.

Lead investigator, Angelina Lim, of the Monash University Centre for Medicine Use and Safety (CMUS), said that while the dangers of stopping asthma treatment were well established, the group's recently



published systematic review in the *Annals of Pharmacotherapy*, found there was no clear evidence of medications at regular doses causing adverse effects during pregnancy.

"We have found many women are decreasing or stopping their <u>asthma</u> <u>medication</u>, jeopardizing asthma control at a time when it can fluctuate due to pregnancy," Ms. Lim said.

"This can lead to negative outcomes for both mother and child, including restricting oxygen flow, which can lead to poor foetal development."

As part of their research, Ms. Lim and colleagues from CMUS, The Alfred Hospital and La Trobe University, interviewed asthmatic women at various stages of their pregnancy. They found many believed asthma was a low priority during pregnancy, and that most did not properly understand the dangers associated with stopping their treatment.

The research follows on from earlier work by Ms Lim, published in *BMC Family Practice*, which found GPs had a lack of confidence and knowledge about managing asthma during pregnancy.

"As many as one in eight <u>pregnant women</u> have asthma, and this research is telling us we need to improve management during pregnancy by finding new strategies to improve education and awareness," Ms. Lim said.

"Women are not being properly monitored or managed during pregnancy because doctors do not rate asthma as a high priority, or they are hesitant to increase medication doses when appropriate in fear of adverse affects."

Ms. Lim and her colleagues are now developing strategies to improve <u>asthma</u> management during <u>pregnancy</u> and if successful, these findings



could justify funding for more resources and support services for these women.

Provided by Monash University

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