

Vendors say pot eases morning sickness. Will baby pay a price?

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(HealthDay)—Nearly 70 percent of Colorado marijuana dispensaries



recommended pot products to manage early pregnancy-related morning sickness, new research reveals.

In a "mystery caller" approach, researchers posed as women who were eight weeks pregnant, experiencing nausea and vomiting, and seeking advice about cannabis product use.

Four hundred marijuana dispensaries were contacted, and one-third of those recommending marijuana to the callers wrongly stated cannabis use is safe in <u>pregnancy</u>.

"We expected a higher proportion to say they couldn't make a recommendation or that the caller should talk with their health care providers," said study author Dr. Torri Metz. She's a perinatologist at Denver Health.

The survey findings "were surprising and concerning to us, because there are data that would suggest cannabis can be harmful to a developing fetus," added Metz, who spoke at a news conference.

Many women, especially in the first three months of pregnancy, experience nausea and vomiting, dubbed "morning sickness." The condition usually subsides by the 14th week of pregnancy, according to the American College of Obstetricians and Gynecologists (ACOG).

But ACOG discourages ob-gyns from prescribing or suggesting marijuana use during pregnancy, the time just before pregnancy, or while breast-feeding. Prior research has suggested pot use during pregnancy could hinder the growth of the fetus or disrupt brain development.

With both medical and recreational use of marijuana becoming legal in a growing number of U.S. states, the researchers were concerned that it



would be perceived as safe by pregnant women without any evidence backing up the notion.

The Colorado marijuana dispensaries called were randomly selected. Thirty-seven percent were licensed as medical dispensaries, 28 percent as retail, and 35 percent were licensed as both.

Sixty-nine percent recommended treatment of morning sickness with cannabis products. These can include edibles, inhaled cigarettes or vaping devices, topical products and others. The vast majority of these dispensaries, 65 percent, based their recommendations for cannabis use on personal opinion.

While more than 8 out of 10 dispensaries recommended callers discuss marijuana use with a <u>health care</u> provider, only 32 percent did so without being prompted.

Metz said several nausea medications can safely be prescribed by doctors to treat nausea and vomiting during pregnancy, including vitamin B6 and doxylamine (Diclectin combines the two).

"We urge women to use those medications instead of marijuana in pregnancy," she added. "We just can't say that marijuana is safe."

Metz' advice was echoed Dr. Anthony Vintzileos, chairman of obstetrics and gynecology at NYU Winthrop Hospital in Mineola, N.Y.

Vintzileos, who wasn't involved in the new research, said he was surprised that so many Colorado cannabis dispensaries recommended marijuana for morning sickness.

"There are so many other things we can try medically as opposed to cannabis," he said. "It's not the first thing one should think about."



While cannabis use has been shown to ease nausea and vomiting related to cancer medications, Vintzileos said, that doesn't mean cannabis should automatically be considered during pregnancy.

"In pregnancy, it makes no sense at all to suggest this as a first-line treatment," he said. "There are simple measures, such as eating bland foods, eating more frequent, simple meals, and taking vitamin B6 and doxylamine. You don't jump into cannabis."

The study appears in the June print issue of the journal *Obstetrics & Gynecology*.

More information: Torri Metz, M.D., perinatologist, Denver Health, and assistant professor, OB/GYN-maternal fetal medicine, University of Colorado School of Medicine, Denver; Anthony Vintzileos, M.D., chairman, obstetrics and gynecology, NYU Winthrop Hospital, Mineola, N.Y.; June 2018, *Obstetrics & Gynecology*

The American College of Obstetricians and Gynecologists offers more on morning sickness.

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