

New study explores why women use marijuana during pregnancy

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Marijuana use during pregnancy has doubled in the last decade to become the illicit substance most commonly used by pregnant women. A new study from the University of Pittsburgh explores the attitudes of marijuana-using mothers-to-be.

The study, published this month in the journal *Drug and Alcohol Dependence*, found that pregnant marijuana users considered their habit to be relatively harmless, but they did have some reservations about potential effects on the developing fetus. Fear of legal action kept them from discussing these concerns with their [health care providers](#).

"What these women articulated is that they didn't view marijuana as a drug," said senior author Dr. Judy Chang, associate professor of obstetrics, gynecology and reproductive sciences. "They perceived it to be very natural, almost herbal, of the earth, and as a result of being more natural, they viewed it as safer – even safer than prescribed medication, which they viewed as chemicals."

Most women using marijuana during [pregnancy](#) were already users before they got pregnant. They reported to the researchers that it made them happier and more pleasant, or that it helped to manage chronic pain or depression. During pregnancy, they said, marijuana helped with nausea and appetite.

Despite the attitude that marijuana is relatively innocuous, Chang found that pregnant marijuana users were still concerned about how it might be affecting their unborn babies.

She said there is no definitive evidence about the safety of marijuana use during pregnancy, but four big studies following babies born in the 1980s and '90s all suggested the fetus may suffer lasting neurocognitive effects.

Today's pregnant marijuana users may be putting their children at even greater risk than the literature suggests, Chang said, because the strains of marijuana are more potent than in the past, and users are smoking both larger amounts and more frequently.

Yet many of the women enrolled in Chang's study were cautious about broaching the topic of marijuana use with their health care providers because of the very real risk that they might be reported to child protective services.

Health care workers are legally required to report suspected prenatal drug use in 24 states and the District of Columbia. Most of these states characterize in utero exposure to illicit substances as a form of child abuse.

So pregnant marijuana users turn to the internet, where information is mixed and often biased.

Chang said a possible solution is for health care providers to include a candid discussion about [marijuana use](#) during a woman's initial "orientation

to pregnancy" appointment. Providers can address concerns and offer information about how to minimize risk during pregnancy, all without the woman necessarily having to disclose her substance use.

"You need to recognize that [marijuana](#) is a complicated issue where there are multiple different perceptions and beliefs, so we should be obligated to have a more nuanced conversation without assumptions about the other person's perceptions," Chang said. "We should really be asking, 'How do I help you make the healthiest decisions for you and your baby?'"

More information: Judy C. Chang et al. Beliefs and attitudes regarding prenatal marijuana use: Perspectives of pregnant women who report use, *Drug and Alcohol Dependence* (2019). DOI: [10.1016/j.drugalcdep.2018.11.028](https://doi.org/10.1016/j.drugalcdep.2018.11.028)

Provided by University of Pittsburgh

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