



## **Pregnant women on the move**

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*People are travelling more and more, and it follows that many women are on the move during their pregnancy. We provide advice about travel, vaccinations and the sorts of exercise you can do.*

You don't need to cancel all travel plans or your exercise routine for the next 9 months just because you've discovered you are pregnant. As long as you follow some simple guide-lines and your doctor says it's safe, you can travel to many destinations and continue to do certain forms of exercise until close to your due date.

### **Car Travel**

When pregnant, you will need extra breaks for toilet trips and to stretch your legs. This is very important during long journeys. Towards the end of pregnancy, the bump is going to be very near to the steering wheel and it may be better, when possible, to get somebody else to do the driving.

You should never travel in a car without a seat belt. The lap belt should lie under your bump and the shoulder belt should fit snugly over the top of your bump and between your breasts. You should avoid having the belt over the bump as a sudden jolt could cause injury to the pregnancy. If the belt cuts across your neck, try repositioning your seat so it fits better.

Airbags are safe during pregnancy as long as you buckle your seatbelt correctly and move your seat well back from the dashboard or steering wheel.

## **Air Travel**

With cheap air travel, people are flying much more frequently to exotic locations. A number of factors need to be considered before undertaking air travel if you are pregnant:

- How important is your journey?
- Is it short or long haul (the longer the journey, the greater the risk)?
- Are there adequate medical facilities at your destination should things go wrong?
- Are there infectious diseases that require a vaccination at your destination?
- Does the country have reciprocal health agreements with the UK?

Insurance companies will often ask if you have seen a doctor within 2 months of the proposed travel date. If you are pregnant, this is highly likely and it may be sensible to get a pre-travel health statement from your doctor.

If you are well and have had no problems, most airlines will carry you up to the 36<sup>th</sup> week, i.e. 1 month before your due date.

In the first 3 months, you are more at risk of miscarriage. When deciding on your destination, this risk and the medical facilities available there should be kept in mind. Sickness may be exacerbated by air travel. From 3 to 6 months (12 to 18 weeks), risks are low and this is probably the best time to travel. From 28 weeks onwards, there is more risk of premature labour and the extra burden of carrying a pregnancy increases other risks such as deep vein thrombosis (DVT).

## **Deep Vein Thrombosis (DVT)**

This can be reduced by using graduated compression stockings, moving around the cabin at least once every hour and keeping well hydrated. The air humidity is kept at 8% in the cabin so you should drink plenty. It is sensible to get an aisle seat whenever possible.

If you have had a thrombosis in the past, you should be treated with an injectable anti-clotting agent (heparin) before the flight.

### **Vaccinations**

Not all vaccines have been declared safe in pregnancy. The Royal College of Obstetricians and Gynaecologists (RCOG) considers that the following may be used if you are visiting a high-risk area:

- Hepatitis A
- Hepatitis B
- Polio (injected)
- Typhoid (injected)
- Tetanus
- Diphtheria
- Measles
- Japanese encephalitis
- Rabies

The following live vaccines are **not** suitable if you are pregnant:

- MMR
- Yellow Fever
- Polio (oral)
- Typhoid (Oral)

### **Malaria**

You should avoid areas where malaria is common. Pregnant women are more susceptible to the disease. If you have to go, then chloroquine is considered to be the safest drug but, in some areas, resistance has developed. In these circumstances, the World Health Organisation (WHO) recommends that proguanil is added in the first 12 weeks and mefloquine after this time. Extra folic acid is needed with proguanil. Be sensible and wear long-sleeved tops and trousers after dark, use insect repellents and make sure you sleep under a mosquito net.

## **Medicines**

If travel sickness is a problem, then cyclizine or promethazine are safe, but always seek advice from your doctor first. Diarrhoea can be a problem. Cophenotrope (Lomotil) is safe but loperamide (Imodium) should be avoided. Rehydration salts such as Dioralyte are not dangerous.

## **Sport and exercise while pregnant**

There is no reason why a number of sports cannot be continued during pregnancy. As a general rule, all contact sports should be avoided, especially after 12 weeks, as should sport that is physically extreme.

Here are a few popular sports with recommendations:

**Aerobics and Pilates** – Low impact aerobics are best. Stretching exercises and pelvic floor exercises are particularly beneficial.

**Cycling** – This is certainly safe early on, but as pregnancy progresses, balance may become more of a problem.

**Horse Riding** – There is a risk of falling especially as balance may be impaired. Falling from a height could lead to severe consequences in late pregnancy.

**Rowing** – This is fine if you are experienced but taking up rowing (or using a rowing machine) during pregnancy may lead to lower back problems.

**Scuba diving** – The foetus may be more susceptible to the 'bends' than the mother, therefore diving is not recommended.

**Skiing** – This is safe in the first 12 weeks below altitudes of 2,500 metres. Later, as the bump gets bigger, the dangers of impact become greater.

**Swimming** – This is excellent throughout pregnancy.

**Tennis** – Avoid over-strenuous matches. Best to stick to doubles!

**Walking** – A brisk 30-minute walk every 2 to 3 days is excellent exercise during pregnancy.

Finally, here are a few general tips about recreational exercise from the RCOG. Recreational exercise refers here to any kind of energetic or aerobic exercise, such as swimming or running and/ or strength conditioning exercise.

- During pregnancy, aerobic and strength conditioning exercises are considered to be safe and beneficial.
- The aim of recreational exercise during pregnancy is to stay fit, rather than to reach peak fitness.
- You should avoid contact sports where there is a risk of being hit in the abdomen, such as kickboxing, judo or squash.
- If you experience any unusual symptoms, then you should stop exercising. You should contact your healthcare professional immediately.
- If you have a medical condition, you should first talk with your healthcare professional before doing recreational exercise.
- Pelvic floor exercises during pregnancy and immediately after birth may reduce the risk of urinary and faecal incontinence in the future.
- For most women, it is safe to exercise as soon after the birth as they feel ready.
- Moderate recreational exercise does not affect the amount of milk you produce or its quality.



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