

## Reluctance to prescribe medication risks the health of pregnant women, finds study

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An unwillingness among health care professionals to prescribe and dispense otherwise recommended medications is putting the health and



lives of pregnant women at risk, finds a new study involving a UCL researcher.

The research, published in *BMJ Open* and involving researchers at UCL, the Center for Reproductive Research & Communication at BPAS, Cardiff University, and Pregnancy Sickness Support, highlights the experiences of <u>women</u> whose pharmacists had refused to dispense prescriptions made by their GP.

The study analyzed survey responses from 7,090 women and interviews with 34 women who were pregnant or had been pregnant in the last five years, and found that women were made to feel "guilty" or like "the worst mother" for seeking medication to treat serious conditions.

Several participants even resorted to self-prescribing and discontinued their advised treatments without medical consultation—due to fears about fetal harm. This resulted in either hospitalization or exacerbation of symptoms.

Now researchers are calling for <u>health</u> care professionals to "work harder to ensure pregnant women are able to access the right medicines for themselves and their baby."

Co-author Professor Irene Petersen (UCL Institute of Epidemiology & Health) said, "The findings in this study match what we have seen when we have studied pregnant women's electronic health records. Many medications are discontinued leaving many pregnant women without the treatment that they need."

There are few medications that should ideally not be used by pregnant women due to their teratogenicity (i.e,. the ability of a drug to cause fetal abnormalities or deformities). These include thalidomide, sodium valproate and isotretinoin.



However, most other medications are safe and used during <u>pregnancy</u>, and there are several national prescribing guidelines for treatment during pregnancy.

Prescribers need to balance maternal benefit with potential fetal harm when prescribing in pregnancy. But women's individual circumstances were not always considered, and they were not fully engaged in decision making.

Even when medication was provided, women were warned repeatedly by health care professionals that taking the medication could result in serious harm to their babies—resulting in a reluctance to use the prescribed medication and feelings of shame and guilt.

Researchers believe that this possibly reflects the tendency of health professionals to overestimate the teratogenic potential of drugs.

Clare Murphy, Chief Executive of the British Pregnancy Advisory Service (BPAS), said, "The vast majority of pregnant women in the U.K. will need to use <u>medication</u> for a short-term or chronic condition, and safe and effective prescribing is an essential component of antenatal care. Yet it is clear from our research that women's health and well-being is being harmed by an overly precautionary approach.

"We need to challenge the prevailing cultural climate in which pregnant women's own needs are often seen as secondary to those of her fetus because, as our research shows, this can have serious consequences for women."

In the U.K., prescribing for pregnant women is also undertaken by a number of different health professionals, including GPs, midwives and obstetricians, leading to fragmented prescribing and conflicting opinions.



Julia Sanders, Professor of Clinical Midwifery at Cardiff University, said, "During the study we heard from many <u>pregnant women</u> who could not access the medications they needed. This particularly related to medicines for severe sickness, pregnancy pain and mental health conditions.

"Some women were blocked from getting recommended medicines because doctors would not prescribe them or pharmacists refused to dispense them. Other women were prescribed medicines, but a lack of information meant they did not have the confidence to take them.

"This study shows all professional groups need to work harder to ensure women are able to access safe effective medicines throughout pregnancy."

**More information:** Julia Sanders et al, Women's experiences of overthe-counter and prescription medication during pregnancy in the UK: findings from survey free-text responses and narrative interviews, *BMJ Open* (2023). DOI: 10.1136/bmjopen-2022-067987. bmjopen.bmj.com/content/13/3/e067987

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