



# CANNABIS (MARIJUANA, WEED, DOPE)

## About cannabis

Cannabis is a depressant, which slows the messages going to and from the brain to the body. Cannabis can also cause mild hallucinogenic effects. The active chemical in cannabis is THC (Delta-9 tetrahydrocannabinol).

The most common form of cannabis used in Australia is marijuana. Long term use of cannabis has been linked to anxiety and depression. Heavy cannabis use can affect your memory and how clearly you think. It may also increase the risk of paranoia, hallucinations and psychosis.

## Effects on pregnancy

Using cannabis during pregnancy may harm your baby but there is no link between cannabis and birth 'abnormalities'. The effects on pregnancy are not clear but around one third of the cannabis in the adult system passes into the baby through the placenta. There are possible links between cannabis and poorer growth of the baby, learning disabilities and memory problems in later life. The more cannabis you smoke in pregnancy the more your baby will be affected.

Using tobacco with cannabis can further affect your baby's health. Tobacco use can reduce the amount of oxygen and nutrition your baby gets through the placenta, which affects baby's growth and their development during pregnancy. Again, the more tobacco or cigarettes you smoke, the more your baby will be affected.

Smoking during pregnancy is linked with an increased risk of SIDS (Sudden Infant Death Syndrome) asthma and breathing conditions in children. Children exposed to smoking in pregnancy are more at risk of behavioural problems such as Attention Deficit Disorder or Hyperactivity.

## Counselling in pregnancy

Pregnancy can motivate you to cut down or stop using cannabis in the long term. This is a good time to see a drug and alcohol counsellor who can help you with ways to do that. A counsellor can support you in the following ways:

- » explore personal issues and make positive changes
- » learn new ways to manage stress

- » recognise situations and triggers, which may increase your cannabis use
- » develop strategies to reduce or stop using cannabis and other drugs
- » referrals to support services
- » information to reduce the harm to yourself and your pregnancy
- » information about being a parent.

## Pregnancy care

You may find it hard to talk about your cannabis use with health professionals. Getting information and advice in early pregnancy and attending your pregnancy care appointments will improve your chances of having a healthy baby.

If there is concern about your baby's growth and wellbeing your doctor or midwife will organise regular ultrasounds and monitoring.

Stopping, or at least reducing your cannabis use in pregnancy is important. You may experience physical and psychological withdrawal symptoms when you do this but drug and alcohol services can support you to withdraw safely. You may need medication to help with withdrawal symptoms. Or, your health professional may be able to arrange a 'detoxification' or 'detox' at a hospital with pregnancy support.

You may need dietary supplements such as iron and calcium throughout your pregnancy. All women should take folate before conceiving and for at least the first three months of their pregnancy.

Nausea, vomiting and constipation are common during pregnancy. Your midwife or doctor can refer you to a dietitian. Eating well during pregnancy and while you are breastfeeding is important for the health of you and your baby.

## Breastfeeding

Breastfeeding is the best way to feed your baby. It is also good for your health. To safely breastfeed your baby, it is recommended that you are supported by a health professional to reduce or stop your cannabis use.

If you are using cannabis it will pass freely into breast milk and can be up to eight times the levels found in your blood. The THC in cannabis collects in fat stores in the body and can remain there and in your baby's body for several weeks or months. For this reason, breastfeeding whilst using cannabis is not recommended by some medical authorities. Cannabis can also interfere with the quality and quantity of breast milk.

Talk with a doctor or midwife about your particular circumstances.

## Your baby's development and parenting

Cannabis use during pregnancy is associated with learning and behavioural difficulties in some pre-school and school age children.

Sometimes disagreements over drug use can cause family arguments and affect personal relationships, which in turn can impact on children. Furthermore, long term use of cannabis has been linked to depression and lack of motivation and this may also affect your parenting.

## Your baby's care after the birth

A doctor will check your baby after the birth.

Some babies will have signs of withdrawal such as irritability, unsettled behaviour and feeding difficulties. Withdrawal from cannabis can take a week or two to develop in newborns so they are not likely to show symptoms in hospital.

A doctor will need to see your baby at one month, or earlier if they are not gaining weight or they are irritable or you have other concerns.

Using cannabis can affect your ability to parent. It can also affect the emotional development of your baby as you may be less aware of his/her needs.

## Sudden Infant Death Syndrome (SIDS) and sleeping accidents

Research has identified several ways to care for your baby that will reduce the risk of sudden and unexpected infant death, including Sudden Infant Death Syndrome (SIDS) and fatal sleeping accidents.

If you are smoking, using drugs, alcohol or medicines that make you feel drowsy, sleeping with your baby is dangerous. Anything that makes you sleep deeply will make it hard for you to respond properly to your baby's needs. You may also be less aware of where your baby is in your bed and any dangerous positions your baby may be in. These things greatly increase the risk of your baby dying suddenly.

It is important that a baby is in a smoke free environment at all times, sleeps in their own cot (never on the couch), lies on their back without their face or head covered with their feet touching the bottom of the cot, which makes wriggling under the blankets less likely.

For more information, speak with your midwife or doctor or contact SIDS and Kids by phone 1300 308 307 for the cost of a local call – or visit the SIDS and Kids website [www.sidsandkids.org](http://www.sidsandkids.org)

## For more information

### On the Women's website

[www.thewomens.org.au/wm-pregnancy-drugs-alcohol](http://www.thewomens.org.au/wm-pregnancy-drugs-alcohol)

### Women's Alcohol and Drug Service

Royal Women's Hospital. 8.30am–5.30pm Monday to Friday  
Tel: (03) 8345 3931 | Email: [wads@thewomens.org.au](mailto:wads@thewomens.org.au)

### DirectLine

DirectLine is part of Turning Point's state-wide telephone service network, providing 24-hour, seven day counselling, information and referral to alcohol and drug treatment and support services throughout Victoria. DirectLine is a free, anonymous and confidential service. | Tel: 1800 888 236

### Quit

Visit this website to help you quit or help you find out more about how smoking harms you.  
Tel: 137848 | [www.quit.org.au](http://www.quit.org.au)

### SIDS and Kids

Tel: 1300 308 307 | [www.sidsandkids.org](http://www.sidsandkids.org)

### The National Cannabis Prevention and Information Centre (NCPIC)

Provides the latest research and cannabis information.  
Tel: 1800 30 40 50 | [www.ncpic.org.au](http://www.ncpic.org.au)