



Using inhalants during pregnancy and breastfeeding

About inhalants

Inhalants, or volatile solvents, are household, industrial or medical products. Inhaling the vapours from these products can make you feel intoxicated or 'high'. Inhalants are depressants (downers) which slows the messages going to and from the brain to the body. The effect can be immediate and may last for several hours depending on the substance, the amount used and the method of inhalation. Some of the most common inhalants are chrome-based paint ('chroming') aerosol spray cans, glue, gas from lighters or barbecues (butane), petrol, paint, paint thinner and felt-tipped pens.

Effects on pregnancy

Inhalants contain many toxic substances which are harmful to both you and your baby. It is believed that nearly all inhalants cross the placenta and enter the baby's blood stream. For this reason, it is important you stop using inhalants during pregnancy.

Research into this area is limited but some of the known effects on the baby are:

- premature labour and birth
- poor growth during pregnancy
- low birth weight
- poor growth in childhood
- reduced oxygen, which can affect brain development. This has the potential to impact on a child's life-long learning ability.

Counselling in pregnancy

Pregnancy can be a good motivator to stop using inhalants. Drug and alcohol counselling can help you understand the reasons why you are using inhalants and help you to stop during pregnancy. A counsellor can also link you to appropriate support services such as outpatient or residential drug and alcohol services.

Pregnancy care

You may find it hard to talk to health professionals about your use of inhalants but it's very important to do so early in the pregnancy. Getting information and advice in early pregnancy can help you have a healthy pregnancy and baby.

If there is concern about your baby's growth and wellbeing, your doctor or midwife will organise an ultrasound and for the baby to be monitored.

When pregnant it is common to have some nausea, vomiting and constipation, if you are worried though, talk to your midwife or doctor about what you can do.

A healthy diet is always important but even more so when you are pregnant and breastfeeding. If you are concerned about your diet, ask to see a dietitian who will work with you to make improvements if you need to. Even with good eating habits you may still need supplements such as iron, calcium and other vitamins. All women are encouraged to take folate before getting pregnant and for at least the first three months of their pregnancy.

Always get advice from your doctor, midwife or dietician before taking supplements.

Breastfeeding

The effects of inhalants during breastfeeding have not been fully researched. Whilst major quantities of inhalants probably do not pass through to your breast milk, breastfeeding whilst affected by inhalants is not safe and not recommended.

Your baby's care after the birth

After the birth a doctor will check your baby.

Babies who have been exposed to inhalants in pregnancy can show signs of withdrawal such as excessive and high-pitched crying, sleeplessness, tremors, poor feeding and 'floppiness' of the muscles. This is called Neonatal Abstinence Syndrome (NAS). Babies may also have a characteristic smell following birth, which is caused by the inhalants coming out through the breath of the baby (from the lungs).

Most babies will show some signs of withdrawal and will need to stay in hospital for at least five days for observation. These can vary from mild withdrawal symptoms, which can be managed by supportive care such as cuddling, a quiet environment and using pacifiers, to more marked symptoms, which require medication and will need specialised care in a Newborn Intensive and Special Care unit.

Using inhalants while you are caring for your baby may affect your ability to parent and may put your baby at risk of accidents.

Ask for information about NAS before your baby is born or discuss NAS with your doctor or midwife. This will help you to understand how your baby will be assessed for NAS and how you can help your baby.

Sudden Unexpected Death in Infancy

Sudden Unexpected Death in Infancy (SUDI; includes SIDS) is a sleep related death in the first year of life.

If you smoke, use drugs, alcohol or medicines that make you feel drowsy, sleeping with your baby is very dangerous. Anything that makes you sleep deeply will make it hard for you to respond properly to your baby's needs and ensure their safety.

Safe Sleeping Guidelines

The six ways to sleep your baby safely and reduce the risk of Sudden Unexpected Death in Infancy (SUDI) are:

1. Sleep baby on their back
2. Keep head and face uncovered
3. Keep baby smoke free before and after birth
4. Safe sleeping environment night and day. No soft surfaces or bulky bedding
5. Sleep baby in safe cot in parents' room
6. Breastfeed baby.

For more information, speak with your midwife or doctor or visit the Red Nose website.
rednose.com.au/section/safe-sleeping

For more information

Women's Alcohol and Drug Service

Royal Women's Hospital
8.30am–5.30pm Monday to Friday
(03) 8345 3931
wads@thewomens.org.au

On the Women's website

Pregnancy, drugs & alcohol information
thewomens.org.au/wm-pregnancy-drugs-alcohol

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.
1800 888 236

Quit

Visit this website to help you quit smoking or help you find out more about how smoking harms you.
137 848 | quit.org.au

Red Nose

1300 308 307 | rednose.com.au

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