



Smoking and pregnancy

Congratulations on your pregnancy!

All future parents hope that their baby will be strong and healthy. When a baby is on the way, it gives you the perfect opportunity to re-examine your habits and consider a more healthy lifestyle with the health and wellbeing of your baby in mind. In addition, a healthy lifestyle contributes to a mother's wellbeing during her pregnancy.

Many parents-to-be deliberate over the effects of smoking during pregnancy and the benefits of quitting smoking. Much speculation and many questions often arise.

Why stop smoking?

Benefits for the baby

Before birth

The unborn baby receives more oxygen

It is more likely that the baby's birth weight will be within the normal range and it will be healthier The risk of premature birth is lower*

During birth

The baby is better prepared for being born. The blood flow to the baby will be better, and it will receive more oxygen

After birth

It is more likely that mother and baby will leave the maternity ward at the same time The baby's lungs will work more normally

The baby is less likely to come down with colds, coughs and ear infections

The baby is less likely to develop allergies, asthma or other breathing problems

The risk of SIDS (crib/cot death) is lower

The baby will be healthier and more peaceful in general, meaning that her/his parents will get better sleep and better rest

Benefits for expectant mothers/parents

The pregnancy is less likely to be complicated** Sense of satisfaction and well-being on account of what the parents are doing for their own health and the health of their child More likely that breastfeeding will go well More likely to live a longer and healthier life Respiration problems (coughs, shortness of breath and a raspy chest) lessen and disappear Breathing will become easier and stamina will increase Sense of taste and smell will improve Good role model for the child

What do expectant mothers find positive about stopping smoking?

Many describe what a great sense of relief accompanies stopping smoking. They want to improve their health, both for themselves and for their children, and to be good role models. They want to rid themselves of the smoke smell and save money, and they envision a brighter future for themselves. They feel more positive emotionally and worry less. Stopping smoking has a positive effect on one's general condition during pregnancy and one's connection with the unborn baby.

Guilt?

Guilt over smoking during pregnancy often leads mothers to begin smoking in secret. This is often accompanied by indisposition and a sense of isolation for which quitting is the only cure.







Keep in mind that...

Nausea and vomiting in the early stages of pregnancy often deaden one's desire to smoke – an ideal opportunity to quit altogether.

Even though a mother may have continued smoking through the first few months of her pregnancy, stopping smoking is always greatly beneficial.

Every last cigarette that a mother does not smoke improves her unborn baby's health and conditions for growth.

It's an investment for one's health to stop smoking right away.

* Babies whose mothers smoke during pregnancy are, on average, lighter, shorter and with smaller heads at birth than babies whose mothers don't. This slowing-down of growth also has an effect on the development of the brain and other organs, which are smaller than they would otherwise be. It is believed that smoking during pregnancy is the cause of up to 15% of premature births and 20-30% of all low birth weight births.

** The principal complications caused by smoking during pregnancy are abruptio placentae (causes bleeding), placenta praevia (the placenta closes off the cervix), the water breaking too early and premature birth.

Worries and doubts

Am I maybe not able to quit?

Doesn't it have a negative effect on the baby if I just get stressed out over not being allowed to smoke?

I've been told that the baby will get withdrawal symptoms

It's not unnatural that thoughts such as these run through your mind, but they simply cause you unnecessary worries. The mother has the ability to quit smoking, and the baby always feels better as soon as the mother stops smoking. The blood flow through the placenta to the baby increases, meaning the baby gets more oxygen and more nourishment. Smoking is worse for the baby than withdrawal symptoms or stress.

My friend smoked a pack a day and her baby was healthy when it was born

The risks that accompany smoking during pregnancy are well known. Expectant mothers should always think over and assess the risk they are taking by smoking during pregnancy and the benefits of not smoking. Should an expectant mother wish to provide her baby with the best conditions possible, she shouldn't smoke.

Will I put on a lot of weight if I stop smoking?

Icelandic research has shown that obesity is no less of a problem for pregnant women who smoke than those who don't. To encourage proper weight gain during pregnancy after stopping smoking, it's important to exercise regularly and eat a diverse range of healthy foods, including a good variety of fruits and vegetables. If you become concerned about weight gain, it's possible to book an appointment with a nutrition advisor at Prenatal Care (mæðravernd).

I've often tried to quit before, but I've never been successful

Many people must try to quit more than once before they are successful. If you've tried to quit before without success, it means that you are more experienced. It's important to learn from experience. What was positive about guitting? What proved difficult?

What can you change to help stopping smoking?

Look at the positive instead of the negative.

Think of what a good effect quitting will have for you and your child. Don't hesitate to seek assistance.

Support from partners and family helps

It is a joint project for expectant parents to quit smoking during pregnancy.

Both parents need to show commitment to the new little life that is growing and stop smoking to contribute to the baby's heath and future.

Experience shows that pregnant women are more successful in quitting if they get support in doing so.







Nicotine replacement therapy during pregnancy

Nicotine replacement therapy (using nicotine gum or patches) is a possible option for expectant mothers who find it difficult to quit smoking, but it is important to seek the advice of a midwife or doctor beforehand.

Preparation for breastfeeding

Breastfeeding goes better for mothers who don't smoke. Smoking decreases the amount of prolactin manufactured by the body, a hormone necessary for producing breast milk. Mothers who smoke thus produce less milk than those who don't and therefore often breastfeed for a shorter period of time.

Second-hand smoke

Unborn babies are not only affected by tobacco smoke if their mothers smoke – they are also affected by any tobacco smoke their mothers inhale from the environment. The tobacco smoke also makes its way to the baby in the womb. It is important that expectant mothers avoid smoky environments and that others show her the courtesy to refrain from smoking in her presence.

Who should I go to for advice, information and assistance?

Support for stopping smoking during pregnancy, Prenatal Care Centre: 585 1400 The Smoke-Free Line, over-the-phone assistance for those who want to quit smoking: 800 6030 The Public Health Institute of Iceland: 5 800 900 The Icelandic Cancer Society: 540 1900 Health care clinics across the country

Websites in Icelandic with information on support in quitting smoking:

www.lydheilsustod.is www.8006030.is www.reyklaus.is www.ljosmodir.is

Websites in English with information on support in quitting smoking:

www.givingupsmoking.co.uk www.smokefreefamilies.org

Step by step towards the goal... a healthier mother, a healthier child

Here is a step-by-step plan for stopping smoking that you may wish to follow. It may also be necessary to enlist the support of a midwife or doctor or call the Icelandic Smoke-Free Line (tel. 800-6030). The booklet "Giving up for Life" ("Hættu fyrir lífið"), which can be found at all health care clinics in Iceland, can be of use when you are taking these steps.

Step 1 Write down the following:

- When you smoke
- Why you smoke
- Strategies (i.e., what you can do instead of smoking)
- Make a plan

Step 2

- Write down your reasons for wanting to stop smoking (at least one reason for yourself and at least one for your baby)

- Calculate how much you save by stop smoking and envision what you can use the money for

Step 3

- Set yourself goals and write down on a piece of paper how you intend to reach them
- Remind yourself why you want to stop smoking
- Read over your goals regularly in order to remind yourself of them







Step 4

- Choose a day to stop, and decide on a day that you like best Stick to that day
- Ask smokers to show you the consideration to not smoke in your presence

Step 5

- Prepare yourself well

- Do something for yourself and the baby you are expecting (relaxing, swimming, walking/hiking, baking, going to the movies, buying yourself something you want ...)

- Try to recognise what circumstances and thoughts pose a threat to your plan to stop smoking. If one of your smoking triggers is present, it's good to remove whatever it is or find a way to deal with it

- Don't give up even if you do slip up and smoke one cigarette

Step 6 – Stop smoking

- Congratulations with stopping smoking
- Remind yourself why you want to stop smoking
- How do you think that your unborn baby feels now?
- Take good care of yourself and create a safe environment for yourself conducive to your well-being.
- If you feel stressed and annoyed, this is a sign that your body is adjusting to the lack of nicotine.
- Have fruit or water at hand when the urge to smoke strikes
- Exercise daily
- Use your energy in a positive manner. Is everything ready for the baby?
- You're giving yourself and your baby the promise of a good future. That's what this is all about.

Substances in tobacco smoke

There are over 4000 substances found in cigarettes, many of them cancer-causing.

These can all easily make their way to a foetus through the placenta.

Carbon monoxide: Poisonous gas that forms when a cigarette is lit.

Carbon monoxide reduces the flow of oxygen to the baby in the womb, which can slow down the baby's growth.

Nicotine: Powerful, quick-acting, addictive substance. One of the most addictive substances known. Nicotine contracts the blood vessels in the placenta and decreases the amount of oxygen carried to the baby.

Acetone: Generally used as a solvent, for example for removing nail polish.

Formaldehyde: Toxic when absorbed through the skin, inhaled or ingested. Used to preserve bodily remains.

Benzene: Used as a solvent and in chemical manufacturing. A cancer-causing agent and toxic when inhaled, ingested and absorbed through the skin.

Benzo(a)pyrene: A cancer-causing agent that can also cause genetic damage, reduce fertility and harm the unborn baby.

Enjoy your pregnancy

Eat good and nutritious food.

Exercise regularly, and choose the form of exercise you like best.

Find ways of relaxing that suit you and that you can fit into your daily life, such as reading, music, meditation, aerobics, walking/hiking or baths.

Do something special for yourself or your child - something you find enjoyable.

Remind yourself how well you feel and how much safer the baby you are carrying is without being exposed to tobacco, alcohol or other drugs.

Make use of Prenatal Care services (mæðravernd).

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