TRAVEL DURING PREGNANCY

We are frequently asked by our pregnant patients about the do's and don't's of travel. Many have received erroneous information from well meaning friends and relatives and put off vacations and even routine travel unnecessarily. The best time to travel is between 14-28 weeks since by 14 weeks most morning sickness has passed and after 28 weeks it is harder to sit for a long period of time. A general rule is to listen to what your body is telling you. If travelling by land try to remember not to travel for greater than five or six hours without at least getting out to stretch. There is certainly a risk of developing blood clots in the legs if there is not attention to circulation. Pregnant or not seat belts are the law and a good one at that. Both the lap and shoulder belts should be worn and the lap belt should be below the belly. The shoulder belt should be between the breasts. DO NOT TURN OFF THE AIRBAG. Minor injury in an accident caused by the air bag will usually be far less than the risks to the woman and the baby from a front end collision. Train and bus travel are fine but hold handrails when moving about as the ride can be bumpy. Airline travel is allowed and most airlines do not have restrictions until 36 weeks. Even flight attendants are now allowed to work while pregnant. It would still be wise to consult with your obstetrician before flying as certain complications and conditions of pregnancy would preclude flying or being more than an hour away from the hospital such as a history of premature delivery, low lying placenta, previous bleeding, twins, high blood pressure, etc. I have personally attended to ill people on planes (no deliveries, yet) and I can assure you that the medical supplies on aircraft are meager and not conducive to a safe delivery. Frequently it can be an hour or more to re route, get permission for landing. Many private planes are not pressurized so high altitude should be avoided. Commercial aircraft are all pressurized and the oxygen level is higher than the air outside. Metal detectors at check in are safe but the jury is still out on scanners and I would opt for the pat down at this time. Again, stretch legs frequently and if possible try to arrange for seats for easy mobility when possible. Travel by ship is safe (medically) and many passengers pregnant or not are prone to sea sickness. Ginger tablets and pressure bands work well. The sick bay on a cruise ship is like a floating hospital and is usually staffed by a doctor and nurse. I would impose the same restrictions to patients going on a cruise vacation as I mentioned above. Most obstetricians would advise against foreign travel unless absolutely necessary given the diverse facilities around the world. Americans used to the finest and best of hospitals would be somewhat shocked at what they would find in other locales. The Center for Disease Control has world travel facts. Some countries require vaccinations before travel. Malaria is still pandemic, caused by a bite of a certain mosquito and has even been reported in the Caribbean. It causes anemia that can result in miscarriage, small babies, stillbirth and other problems. Cholera causes severe diarrhea and dehydration. Some vaccines are safe while pregnant, others, not. Consult with your doctor. Other countries also have germs that can make you sick while the locals are generally immune. Aside from cholera even traveler's diarrhea can cause severe dehydration in a pregnant woman that can be dangerous to mother and baby. A few rules (to be adhered to by non pregnant

travelers also): drink only bottled water or canned and bottled juices. Be sure that dairy products are pasteurized; don't put ice in drinks; avoid food from street vendors and only eat fruits and vegetables that have been cooked or peeled; avoid raw or undercooked meat or fish. More people are traveling and doing so in more far away lands and for greater lengths of time. Take the time to discuss with your doctor your plans. He can help you plan safety but please do not disregard the advice to not travel if that is what your doctor feels. It would be far better to put off the trip rather than deliver in a hospital or clinic where no one speaks English and have to go through the potential of incredible red tape just to get home.