Navigating Constipation During Pregnancy: A Comprehensive Guide

Dealing with constipation can be challenging, and the struggle intensifies during pregnancy. The struggle is real, and I know it firsthand! I have struggled with constipation ever since I was a teenager. But once I started college, the stress of my day-to-day life intensified my symptoms which led me to suffer from chronic constipation. Once I found out I was pregnant, I knew it was only a matter of time until I experienced the discomfort, pain, and bloating all over again. But I knew that, while this might be disheartening, I was not alone. Up to 38% of pregnant individuals experience constipation in the first trimester (***Trottier et al., 2012***).

This common issue has even earned its own ICD-10 code (used for medical billing), emphasizing the need for attention and solutions. Let's explore the reasons behind pregnancy-related constipation and discover effective ways to manage and alleviate it. Our Constipation Resource Hub is a great way to access all the information that MotherToBaby experts have for you related to this topic, but let's go over some specifics first!

Understanding the Causes of Constipation in Pregnancy:

Constipation during pregnancy can be attributed to various factors, including an unbalanced diet, insufficient fiber intake, inadequate hydration, and a lack of physical activity. Hormonal changes, particularly an increase in progesterone, also play a significant role. Additionally, medications used to combat nausea and vomiting in pregnancy (NVP) and supplements like iron and calcium may contribute to constipation.

Navigating Treatment Options during Pregnancy:

While constipation is common during pregnancy, suffering needlessly is not acceptable. Explore different treatment options, but keep in mind that there is no one-size-fits-all approach. Understanding the complexities of your individual situation is crucial.

Nutrition Adjustments:

- Incorporate 4-5 cups of fresh fruits and vegetables daily.
  - Aim for 25-30 grams of fiber daily.
  - Stay hydrated by drinking plenty of water.
  - Engage in 150 minutes of moderate exercise per week (consult your healthcare provider before starting any new exercise routine during pregnancy).

Medication Considerations:

- Laxatives can be an option, they are medications used to soften stool or stimulate the bowel, but it's essential to be informed. Explore our fact sheet on laxatives here https://mothertobaby.org/fact-sheets/laxatives/. Here's a brief run-down of some of these options:

- Bulk-forming laxatives (fiber supplements) like psyllium
    - Osmotic laxatives
    - Stool softener laxatives
    - Stimulants, and lubricants

Prescription medications

- Prucalopride (Motegrity®) for the treatment of functional constipation, also known as chronic idiopathic constipation. Read our fact sheet here.

Managing Underlying Conditions that May Make Constipation during Pregnancy Worse:

Some individuals may face constipation due to underlying conditions such as Irritable Bowel Syndrome (IBS-C) or **Functional Constipation** (FC). Consult your healthcare provider for a proper diagnosis and follow their recommendations. Explore our informative fact sheet on Functional Constipation here. https://mothertobaby.org/fact-sheets/functional-constipation/ .

Stress can exacerbate constipation, especially for those with IBS-C. Be kind to yourself and explore stress management techniques. Learn more about stress during pregnancy in our fact sheet here https://mothertobaby.org/fact-sheets/stress-pregnancy/ .

For those with **Gestational Diabetes** or a predisposition to Type 2 Diabetes Mellitus, regulating blood glucose levels

is crucial. Explore our blog on diabetes during pregnancy here https://mothertobaby.org/baby-blog/diabetes-and-pregnancy-the-not-so-sweet-story/ .

In conclusion, constipation during pregnancy is a shared experience, but it shouldn't be endured without seeking relief. I certainly looked for options that helped me during my pregnancy, just like I did, so can you! Open a conversation with your healthcare provider to explore solutions. By making dietary adjustments, staying active, and managing stress, you can navigate constipation more comfortably during this transformative time. For personalized information about medications or conditions, or to volunteer for the **study on constipation** (https://mothertobaby.org/ongoing-study/constipation/) in pregnancy, reach out to our experts at MotherToBaby—they're here to answer your questions and provide support throughout your pregnancy journey.

We want to enroll all individuals who took Motegrity® at any point in their current pregnancy or while breastfeeding. If you, or someone you know has been exposed to this medication, please report use to our team.

Disclaimer: MotherToBaby Fact Sheets are meant for general information purposes and should not replace the advice of your health care provider. MotherToBaby is a service of the non-profit Organization of Teratology Information Specialists (OTIS). Copyright by OTIS, January 25, 2024.

Navigating Constipation During Pregnancy: A Comprehensive Guide

Participating in the largest, long-term study of early brain and child development in the United States

I recently came across a patient named Jamie when she asked some interesting questions about a new study she had heard about on child development. Jamie is pregnant with her second baby and got a flyer from the Healthy Brain and Child Development study (HBCD). The HBCD is a national study being carried out at 27 sites in different parts of the

country, with two sites at MotherToBaby locations including Emory University and UC San Diego. At first, she was undecided if she wanted to volunteer. It is a large-scale, long-term project with the goal to better understand how child development is affected by exposure to social and environmental experiences and conditions. She would be one of the 7,000 mother/infant pairs contributing their time and effort to this project.

Here were some questions that she was thinking about before deciding to join the research project. With so many research sites across the nation, you may be asking yourself these questions, too:

What is the HBCD goal and where is this study?

Most of the HBCD sites are at universities and hospitals that have a history of working with pregnant women and their babies. The study was developed by the National Institutes on Health, part of the US public health service. The goal is to understand children's brain development. HBCD aims to recruit 7000 pregnant women. Researchers will follow them, as well as their babies, over the first 10 years of life. They'll keep track to gather more information on how prebirth and after birth events affect the development of children's brain, more specifically, their cognitive and emotional functioning. The information that is collected (data) and will be stored at NIH. The data is made available to scientists who will use this information to improve our understanding of children's growth and adjustment. All information will be "deidentified". That means, to protect confidentiality, there will be NO information that could identify individual mothers or children in the stored data.

Who can participate?

HBCD will include pregnant women across the United States from both rural and metropolitan areas. Recruitment takes place during pregnancy with the first visit in the second trimester. HBCD enrolls women, 18 years and older, from different ethnic and racial groups based on the population of the sites where recruitment is taking place. They are able to include Spanish speakers by having staff who are bilingual. The study is interested in mother's health and exposures during pregnancy, as well as the caregiving environment that can predict how well children grow. As a result, they are looking for all kinds of women to participate, from the general population as well as those who use alcohol, tobacco, stimulants and opioids.

What will participation involve?

Parents will answer a series of questions through surveys and interviews. Mothers and babies will also provide urine and blood samples. In addition, HBCD is monitoring babies' sleep in the newborn period and taking "pictures" of children's brains as they develop using MRI and electroencephalograms (EEG) periodically over time. As they get older, babies' development and behavior will be tested to monitor how they are progressing.

There are several study visits in the first year after the baby arrives and then once a year until they are 10 years old. Families will be reimbursed for their time and travel expenses.

Jamie went to the HBCD website to answer some of her questions (Home – UCSD – Healthy Brain and Child Development (hbcdstudy.org)) and she also got in touch with the Project Coordinator at our HBCD site to ask more about the schedule and the MRI. She was satisfied with the answers and decided that she would like to make a

contribution to children's futures by participating in HBCD. She has already completed her first visit and is looking forward to seeing us again when her son in born. Jamie shared with us that she wants to be part of HBCD because she understands how important understanding brain development and behavior is for both children and their families.

MotherToBaby experts know how important research is and supports the efforts of the HBCD study. You can learn more about MotherToBaby's own studies to consider as well here.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

Disclaimer: MotherToBaby Fact Sheets are meant for general information purposes and should not replace the advice of your health care provider. MotherToBaby is a service of the non-profit Organization of Teratology Information Specialists (OTIS). Copyright by OTIS, January 25, 2024.