

Keeping Your Cool During Pregnancy When Fire Season Heats Up

By Kirstie Perrotta, MPH and Sonia Alvarado, MotherToBaby California

With wildfires seemingly becoming a year-round problem, pregnant women have more questions than ever before about exposure to smoke and lingering poor air quality. Understanding the possible risks from a fire during pregnancy or while breastfeeding can help people make informed decisions when the unthinkable happens. Here are some commonly asked questions we receive at MotherToBaby about wildfires.

Q. What is in the air from the fires?

A wildfire produces particulate matter (a combination of dirt, soil dust, pollens, molds, ashes, and soot), in addition to other chemicals. The particulate matter can be different sizes. Particles less than 10 micrometers in diameter pose the greatest problems, because they can get deep into your lungs, and some may even enter your bloodstream. Contents of the smoke can vary based on what is being burned. In some instances, wildfire smoke can contain heavy metals such as lead. Wildfire smoke also contains carbon monoxide.

Q. I'm pregnant. How does the particulate matter affect my pregnancy? What about the carbon monoxide?

Experts tell us that the smaller the particulate matter, the worse the effects on health, including difficulty breathing, aggravated asthma, and increased risk of heart attack and death due to respiratory and cardiovascular problems. Although we do not know enough about how exposure to particulates can impact a pregnancy, it makes sense for all individuals to take extra precautions to reduce their exposure to wildfire smoke.

Carbon monoxide is a gas that enters into the lungs and blood and displaces oxygen to both mom and baby. The greater the exposure and the longer the exposure, the higher the risk. Studies suggest that there may be a higher chance of birth defects when a woman is exposed to carbon monoxide in the first trimester, but more studies are needed. Other studies have found that exposure to wildfire smoke can increase the risk for preterm delivery and low birth weight. However, this finding may be more related to the stress a woman experiences during a fire, or a combination of factors, than the actual smoke exposure. Again, more research is needed.

Q. I have asthma and I'm pregnant. Do I have added risks?

Yes. Studies in non-pregnant women tell us that exposure to particulate matter of 10 micrometers in diameter or less can make asthma symptoms worse. Pregnancy would not protect you and it may even put you at higher risk of having an asthma attack depending on how far along you are. See our [fact sheet on asthma here](#).

Depending on your proximity to the fire zone, it may be difficult to get help if your symptoms worsen. First responders may be busy fighting the fires and evacuating residents and may not get to you as quickly as you need. Emergency rooms may be overrun. For this reason, it is very important to always have your asthma medication with you so that if the smoke exacerbates your symptoms you can start to treat yourself. You also want to be in contact with your doctor and move away from the source of the wildfires as soon as possible.

Q. I'm pregnant and work outdoors. Do I need a mask?

The U.S. Environmental Protection Agency (EPA) has recommendations about what masks to use to protect against particulate matter entering the lungs. The goal is to prevent or reduce exposure as much as possible. If you work indoors, for the most part you are protected. If you work outdoors, you may want to consider using a mask that fits correctly and has two head straps to hold it in place. It should be labeled "particulate respirator" and it should have been tested or approved by the National Institute for Occupational Safety and Health (NIOSH). Learn more [here](#). Since pregnancy can alter your lung function, pregnant women may have a harder time breathing to begin with. For that reason, it's important to check in with your healthcare provider before using a particulate respirator.

If you are concerned about your work conditions, NIOSH offers a program called The Health Hazard Evaluation Program. This program helps employees learn whether health hazards are present at their workplace and recommends ways to reduce hazards and prevent work-related illness. Learn more [here](#).

Q. I live about 50 miles from the wildfires. Do I still have to be concerned about being outdoors?

Depending on where you live and the direction of the wind, the air quality in your area may be poor due to the wildfire, even if the fire isn't that close to you. Listen to the local health and environmental officials, and avoid exercising outdoors, gardening, or performing other activities that may cause you to exert yourself and inhale more of the particulates in the air. If you have any doubts, wait until the wildfires have been extinguished and the air quality is back to normal.

Q: Can fires cause other problems for pregnant women?

Depending on weather conditions, wildfires can spread rapidly. The stress of having to make life and death choices, or the decision to leave your home and decide what items to take with very short notice, all produce tremendous stress. It is absolutely normal to feel sad, stressed, anxious, or scared. In pregnancy, depending on how long the stress is present and the level of stress, it is possible that there could be impacts on the developing baby, so anything you can do to try to reduce stress is always a good idea. Take a look at our [fact sheet on stress](#) for more information:

Q: I'm pregnant. What if I have to evacuate?

The best thing that you can do is have a plan in place ahead of time. Make a checklist of items to take with you should you need to evacuate your home. Assemble an **emergency supply kit** and store it in a location where you can easily get to it, and create a **family communication plan**.

When the time comes to evacuate, stay calm. Be sure to bring any medications that you take on a daily basis (including your prenatal vitamins). Stay well hydrated, continue to eat, and rest as much as you can. If you have to check into a shelter, tell the staff there that you are pregnant so they can make any necessary accommodations.

While making it to your prenatal check-up is probably the last thing on your mind in the midst of an evacuation, it's important that you continue to be seen by your OB/GYN or midwife. Some individuals may be displaced from their homes for an extended period of time, however, it's important to keep attending your prenatal care visits to make sure that baby is growing and developing properly.

If you're close to your due date, check to make sure your hospital or birthing center is not in the mandatory evacuation zone. If it is located close to the fires, the staff and patients there may be asked to evacuate, and you may need to deliver at a different hospital. Knowing this information before you go into labor will reduce any unnecessary stress.

Q: What other steps can I take to minimize my exposure to smoke from a fire?

Stay indoors when possible, and keep your windows and doors closed. If available, an air purifier can help with indoor air quality. If you have to drive somewhere, keep your windows rolled up and use the air conditioner to stay cool. If your car has a button that recirculates air internally, make sure it is turned on. Pregnant women who must venture outdoors may also consider wearing a mask. Although any protection is helpful, a N95 particulate respirator works best to filter out harmful particulate matter.

Q. I'm breastfeeding and I'm concerned about the wildfires in my area

Breastfeeding moms can also face challenges of their own when they have to evacuate their homes. When possible, follow the steps outlined above to reduce exposure to the wildfire smoke for both you and baby.

The benefits of breastfeeding are well known, and in most cases individuals are encouraged to continue to breastfeed their babies even when faced with an emergency like a fire. Women who are nursing should focus on staying well hydrated and continue to feed baby on demand.

For moms that choose to pump breast milk, extra batteries may be something worth packing in your emergency supply kit in case the power goes out. For babies that are formula fed, it's important to bring bottled water.

Q: Where can I learn more about fires currently happening and about air quality where I live?

The U.S. Department of Agriculture (USDA) Forest Service reports on large fires nationally. The EPA also has a [website](#) where you can check the air quality index in your local area. Pregnant women should follow instructions laid out for "sensitive individuals." Lastly, the Centers for Disease Control and Prevention (CDC) has more helpful information about wildfire exposure during pregnancy [here](#).

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at [MotherToBaby.org](https://www.MotherToBaby.org).

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Arizona is HOT, especially in the summer. I knew this when I moved to Tucson almost a decade ago. Since then, I have had two pregnancies while living in Arizona. I was lucky not to have to spend the last weeks of pregnancy and first weeks with my newborn in the summer heat.

Of course, Arizona is not the only place experiencing hot weather. 2023 was the planet's **warmest year on record**, according to the National Oceanic and Atmospheric Administration. Temperature records have already **been broken** in 2024, and extreme heat is becoming more commonplace. It is important to understand how extreme heat can affect health in the general population, and for us at MotherToBaby, how high temperatures can specifically affect people who are pregnant. For more insight on this issue, we turned to Dr. Christina Han with our partner, the Society for Maternal-Fetal Medicine.

What is extreme heat?

Extreme heat has been defined as “a period of high heat and humidity with temperatures above 90 degrees for at least two to three days.” ([Ready.gov](https://www.ready.gov)). According to Dr. Han, “extreme heat can lead to health issues for anyone, including **heat rash, sunburn, heat cramps, heat exhaustion or heat stroke**. These environmental changes also increase the rates of violence and exposure to pollution. Some groups of people are more likely to be affected by extreme heat, including people who are pregnant.”

What is hyperthermia?

Hyperthermia is a rise in body temperature that happens when the body absorbs more heat than it releases. One of the most common causes of hyperthermia is heat stroke. Fever, extreme exercise, or use of hot tubs or saunas can also increase the chance of hyperthermia.

Being pregnant during extreme heat can increase the chance of developing heat stroke, heat exhaustion, or other heat-related illness. In extreme heat, the body has to work harder to keep cool for two. When the body is unable to cool itself properly, there can be an increased chance of hyperthermia.

What are the concerns with extreme heat and pregnancy?

Studies have reported a small increased chance for neural tube defects (NTDs) in babies of people who had high fevers lasting 24 hours or longer before the 6th week of pregnancy. A few studies have reported a small increased chance for other birth defects when fever or hyperthermia happen in early pregnancy, especially if the fever is untreated. Other studies have not found a higher chance for birth defects when a person experiences hyperthermia early in pregnancy.

People who are pregnant also need to drink more water to avoid dehydration. Chronic dehydration can affect pregnancy outcomes. **One study** suggests that chronic dehydration can affect newborn weight, length, and head and chest circumference. Some studies have reported associations between high temperatures during pregnancy and a higher chance of preterm birth, low birth weight, and stillbirth.

What are some signs of heat-related illness?

Heat stroke: Body temperature of 103°F or higher; hot, red, dry, or damp skin; headache; confusion, dizziness; nausea; passing out.

Heat exhaustion: Heavy sweating; cold, pale, and clammy skin; nausea/vomiting; dizziness, headache, muscle cramps; tiredness/weakness; passing out.

Heat-related illnesses can sometimes be an emergency. Anyone who thinks they are having a medical emergency should seek care right away. For more information on when to seek medical help, visit the Centers for Disease Control and Prevention (CDC) page here: <https://www.cdc.gov/niosh/topics/heatstress/heatrelillness.html>.

Dr. Han also shared some general tips for dealing with extreme heat during pregnancy:

- Stay cool as much as possible, both indoors and outdoors

- Avoid peak sun hours if you must be outside
- Avoid or minimize strenuous activities
- Wear appropriate clothing such as hats and loose lightweight clothing
- Avoid alcohol and limit caffeine
- Wear sunscreen
- Use caution when engaging in strenuous activities; be sure to take breaks, drink water, and get plenty of rest.
- Check the local news for heat warnings and health/safety tips

Find more information from CDC on preventing heat-related illness here:
<https://www.cdc.gov/extreme-heat/prevention/index.html>.

Dr. Han's final tip: Don't forget to talk with your provider! "Your healthcare provider can help you find resources and ways to protect yourself and your family. Managing exposure to extreme heat is important for everyone's health, including those who are pregnant."

MotherToBaby specialists are also **available** to talk with you about exposures before or during pregnancy. Best of luck staying cool out there!

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Keeping Your Cool During Pregnancy When Fire Season Heats Up

By Beth Conover, APRN, Beth Kiernan, MPH, and Al Romeo, RN, PhD - MotherToBaby Teratogen Information Specialists

From images of buildings destroyed by high wind to families stranded on roof tops by flooding (and the rising death toll), to say that hurricanes can be devastating would be an understatement. At MotherToBaby, we receive questions from moms and moms-to-be in storm-affected areas regarding the potential exposures they may be experiencing as powerful forces of nature wreak havoc on their homes and communities. We just wanted to let you know – **MotherToBaby is here for you, your unborn child and your baby.** We can answer your questions about the known facts surrounding these potential natural disaster-related exposures during your pregnancy or while breastfeeding. You can call us toll-free (866-626-6847), text us (855-999-3525), chat with us online or send us an email via [MotherToBaby.org](https://mothertobaby.org). Here are some common questions we're getting and answers to help provide you with as much information as possible during this difficult time:

I'm pregnant and worried about possible things associated with a hurricane that might harm my baby.

Being pregnant can be a stressful time, without having the additional concerns of a natural disaster like a hurricane! However, remember that many pregnant women have been in similar situations and had normal pregnancy outcomes and healthy babies. There are some common sense things you can do to keep you and your baby safe:

- Continue to eat nutritious food...even if it is from a can.
- Drink safe fluids...bottled or boiled water, for example.
- Rest whenever you can and get the proper amount of sleep.
- Don't overdo heavy lifting.

MotherToBaby has a fact sheet on pregnancy during natural disasters:
<https://mothertobaby.org/fact-sheets/natural-disasters/>

I am worried that there might be industrial chemicals released into the air and water after a hurricane. Will this present a risk to my pregnancy?

Local industry may be affected by heavy rain, wind, tornadoes, and flooding from a hurricane. Various chemicals (carbon monoxide, ammonia, chlorine, hydrochloric acid, sulfuric acid) can be released into the air or flood waters from damage to those industrial sites. Local authorities will often notify the public about any chemical spills and explain what the public should do to avoid or reduce exposures (staying indoors, for example). If you think the smell is natural gas, go to a safe area away from the smell and call 911 or the local gas company.

You may want to start taking notes on paper or making some mental notes in case you have questions about how those chemicals might affect your pregnancy or your breastfed baby. Contact your health provider or MotherToBaby and be prepared to answer these questions:

- The names of the chemicals
- New or increased symptoms (vomiting, headache, dizziness, etc.)
- How you came into contact with the chemicals (breathing, touching, in your mouth or eyes, etc.)
- How long you were in contact with the chemicals

Fortunately, exposures like these are often small enough that they don't present a risk to the pregnancy. For example,

just smelling something may not result in a significant amount being passed to the baby. However, each chemical is different, so be sure to ask about any of your concerns.

I'm worried about whether my drinking water is safe...can I get an infection from it that could harm my pregnancy?

Infections are common after a natural disaster. These can include bacterial infections and parasites from dirty water. Many of these infections are important to treat, and you should contact your obstetrical health provider (Midwife or OB) if you think you have an infection. MotherToBaby has fact sheets on common infections and many medications used to treat them: <https://mothertobaby.org/fact-sheets-parent/>

All this water is resulting in a lot of mosquitoes! Not only are they unpleasant but can't they spread infections that may harm my pregnancy? Is insect repellent safe to use in pregnancy?

You are correct that mosquitos can sometimes carry serious infections such as Zika and West Nile disease. MotherToBaby has fact sheets on these diseases and many others: <https://mothertobaby.org/fact-sheets/zika-virus-pregnancy/> and <https://mothertobaby.org/fact-sheets/west-nile-virus-infection-pregnancy/>.

There are also some things you can do to lower your chances of being bitten by a mosquito:

- Stay indoors with proper screens during peak times of mosquito activity (usually overnight from dusk through dawn)
- Wear long sleeved shirts and pants when outdoors
- Consider using insect repellent containing an effective ingredient such as DEET or picaridin. Apply the repellent sparingly to exposed skin and outer clothing, and wash it off when you are back inside and no longer need it. MotherToBaby has a fact sheet on insect repellents at <https://mothertobaby.org/fact-sheets/insect-repellents/>

I'm just so stressed out by the whole situation! Our home is destroyed and we are staying in a shelter. I've heard from my grandmother that stress can harm the baby. Is this true?

Pregnant women often worry that stress can affect the pregnancy and cause miscarriage, premature delivery or low birth weight. Fortunately, most experts agree that moderate levels of stress are unlikely to harm the pregnancy. It's still best to keep as calm as possible, and try to quit worrying about worrying! It's normal to feel irritable and out of control, and to be tearful and worried. Stress can make existing medical conditions worse, so it's important that you take care of yourself even as you are taking care of family members:

- Pay attention to your blood sugar levels and blood pressure.
- Do things to relax. Get some exercise, even if it's just a short walk.
- Take deep breaths and think positive thoughts about your baby.

If you feel depressed, talk to someone such as your partner, a relative or friend, or a health care provider. If you have been taking medicine for mental health issues, keep taking it unless your doctor tells you to stop. It's OK to ask for help. Treating depression and anxiety helps your baby. Check out this fact sheet for more information: <https://mothertobaby.org/fact-sheets/stress-pregnancy/>

The good news is that my home is still standing. The bad news is that the hurricane has caused a real mess in my home! What types of cleaning agents are safe to use while I am pregnant?

First of all, remember that you don't need to take on everything...you are pregnant after all! Let others do the heavy lifting or handle possibly toxic cleaning chemicals. However, most household cleaning agents are pretty low risk. To help protect yourself and your baby, wear gloves when using cleaning agents and try to keep fresh air moving through your work area (consider a fan and open the windows).

What about mold? Hurricanes involve rain and can cause flooding...and all this water in my house has caused mold in my walls. Will this hurt me or my pregnancy?

After the rain has stopped and flood waters go down, mold may start to grow in damaged homes, cars and businesses. Whether you are young or older, pregnant or not pregnant, mold exposure can make you sick. However, there is no proof that exposure to mold increases risks for birth defects or pregnancy complications. Companies can help with the cleanup, but you can do some on your own if you take the right precautions. MotherToBaby has a fact sheet on mold: <https://mothertobaby.org/fact-sheets/mold-pregnancy/>

Here's how to learn about cleaning mold in your home: <https://www.epa.gov/mold/mold-cleanup-your-home>

If you must live or work in a place where mold is being removed, try to open windows so that your exposure is less to airborne mold spores. If you can sleep somewhere else at night and just return to clean up for a short period each day, that may be best for you.

What if I am breastfeeding my baby? Do I need to worry about exposures or should I use formula?

Breastfeeding is good for you and your baby! It is even more important when there are concerns that the water used to make formula may be contaminated. Be sure to keep yourself well hydrated, and use common sense about your exposures. MotherToBaby has a fact sheet on breastfeeding in a natural disaster: <https://mothertobaby.org/fact-sheets/breastfeeding-natural-disaster/>

Here is another website to check out:

Centers for Disease Control and Prevention:

<https://www.cdc.gov/reproductivehealth/emergency/safety-messages.htm>

More about MotherToBaby

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Keeping Your Cool During Pregnancy When Fire Season Heats Up

By Mark B. Roth, MotherToBaby New York

As a teratogen information specialist, I receive questions about all sorts of chemicals or substances someone can be exposed to. We often get questions about the bazillions of cleaning products out there. Bleach, powdered cleaners and spray cleaners, degreasers, oven cleaners, disinfectants - there are so many different cleaning products and looking at the ingredients list (if there even is one) can be overwhelming. All those unpronounceable words! Sodium hypochlorite, declamine oxide, sodium hydroxide, sulfonate, dipropylene glycol butoxy ether, etc., etc. etc.!!!

If you are reading this, it's probably because you want to decrease the chance of any problems for the baby while you are pregnant or breastfeeding. You might be looking for information about which cleaning products are okay to use or to be around while you are pregnant or nursing. I have been told so often by my callers how difficult it is to find reliable information. And that is true, even for the experts. There are a few challenges we all have to contend with.

One of the biggest challenges is that many chemicals simply have not been studied in pregnant women. Some ingredients found in cleaning products have been studied in pregnant animals, mainly mice and rats. When such substances are given to animals, the amount (or the dose) they are given is much higher than what a human would be exposed to. And, often it is given in a way that isn't even close to how a human would usually be exposed. For example, chemicals are often force fed to the animal, even if it is an ingredient typically used in a skin cream. So, basically even if there is research, it's often not helpful or especially meaningful. How can you know what's okay to use?

There's an important and very old principle in studying whether a substance is harmful to a person, and that is "the dose makes the poison." Basically, this means that the risk with any exposure, including cleaning products, depends on how much gets into your blood. How do chemical or substances reach the blood? They can be injected directly into the bloodstream, swallowed, inhaled (breathed in), or possibly absorbed through the skin. Unless you are drinking your household cleaner, the actual exposure to your developing baby is likely to be quite low! Generally, inhalation won't allow for much absorption of these kinds of compounds into your blood. When they do get into your blood from inhaling them, they typically don't reach the developing baby or get into your breastmilk in any meaningful quantity.

Now, these products can have some pretty offensive odors, even with the addition of artificial fragrance like 'lemon fresh', 'summer rain', and 'spring flowers'. (And there can be such a thing as too much - sometimes when I go into a bathroom where air freshener has been sprayed, I say to myself "I would rather just smell the poop!") But back to our subject... If a product has an irritating smell, you may think it's very irritating for the baby, too. But, your sense of smell is not a good measure of the amount of a chemical that the baby is actually being exposed to. In fact, many women develop a heightened sensitivity to smells during pregnancy. This motivates you to get yourself to a more comfortable environment and reduce exposure. But it also can make you feel uneasy when you can't seem to get away from the smell. Your nose doesn't always know! If you start feeling dizzy, light headed, confused, or have breathing difficulties while around the cleaning product, these symptoms could mean you had a higher level of exposure. Even with these symptoms, there are no confirmed risks to pregnancy or breastfeeding with exposure to many of the compounds in common cleaning products.

I mentioned the possible absorption of substances through the skin (topical or dermal exposure). When it comes to absorption of cleaning products, your skin is a surprisingly good barrier and prevents many substances from getting into your blood. If skin has been soaking for a while, or there's a scrape or open cut, that may allow a little more absorption. Just like with inhalation, these compounds are not likely to reach the developing baby or breastmilk in any meaningful quantity. However, skin irritation can occur and it's not a bad idea to wear gloves when working with some cleaning products, especially if it's going to be for extended periods of time. It's important for you to maintain your comfort.

We all know that accidents happen, and that is true of accidents with household cleaners, too. You can reduce the chance of these accidents by not drinking or eating while working with cleaning products. Be sure to thoroughly rinse any utensils or dishes that come into contact with the cleaners. Using gloves or safety glasses can help protect your skin and eyes in case of accidental spills. And, of course, opening a window or turning on an exhaust fan (if you have one) can help reduce the lingering smell.

I mentioned a list of pretty confusing cleaning ingredients at the beginning of this blog and I am quite certain that most of you would fall asleep by the end of this post if I talked about every single one of them. But there are a few common ingredients that are worth reviewing.

Bleach is a common cleaner that most of us have used at one point or another. The active ingredient is sodium hypochlorite, a form of chlorine. Chlorine and chlorinated disinfectants have not been shown to increase the risk of birth defects.

Benzalkonium chloride is another disinfectant that is found in many cleaning products. It is also an ingredient in throat lozenges, diaper rash creams, cosmetics, and vaginal spermicides. Although there are no studies specifically looking at the risks of benzalkonium chloride use in human pregnancy, there also are no reports indicating an increased risk. Again, given how common this ingredient is, having no reports is reassuring.

Finally, there are also many cleaners which contain **ammonia**. Typical use of cleaners containing ammonia is also not expected to increase risks to the baby. Because it has a very strong smell, most people can't stand being around high levels of ammonia without getting pretty sick. Like many cleaners, as mentioned above, a strong odor doesn't necessarily mean a risk to the baby even if you have symptoms like a strong burning sensation in your nose or throat, skin irritation, or you get dizzy. But, if you lose consciousness, that could be a concern as it limits the amount of oxygen reaching the baby. It's good to pay attention to your comfort level.

There are so many different products and ingredients. There's not room enough to discuss them all here. But if you have any questions about a cleaning product or an ingredient in a product, don't hesitate to contact an expert at MotherToBaby!



Mark Roth, BA, is a teratogen information specialist and co-director for the Pregnancy Risk Network, MotherToBaby New York. He has been with the program since 2006. He is a former member of the OTIS Board of Directors and serves as Research Coordinator for MotherToBaby New York. Mark has provided teratology lectures at Arcadia University's Genetic Counseling Training Program and educates medical providers and the public about teratology through lectures, participation in state and national conferences, and one on one conversations. He enjoys pronouncing generic names of drugs.

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By Rogelio Perez D'Gregorio, MD, MS, MotherToBaby UR Medicine

Not many people know this, New York is the only state that requires that every pregnant woman have her risk of lead exposure assessed at the first prenatal visit. As a doctor seeing pregnant patients regularly, this is unbelievable to me! Highlighting this topic is particularly appropriate during October as this month we'll celebrate National Lead Poisoning Prevention Week. This awareness week was created because lead exposure can have such serious consequences, for pregnant women and particularly for developing children.

What is lead?

Lead is a heavy metal found in many different places, like dust, air, soil, water, food and inside our homes. For generations, lead has been used in many products, like paint. People didn't even realize it was there and that it could be harmful. It was also used in gasoline, and continue to be used in batteries, electronics, pipes, solder, ceramics, glass, toys and jewelry among many other things. In 1978, lead was removed from the manufacture of household paints. But even today the remodeling of homes with old lead paint that had been applied years before continues to be a common source of lead exposure, especially when the paint is peeling or chipping off of the walls.

What is lead poisoning?

Lead poisoning may result in one symptom or many vague symptoms that sometimes are overlooked by health care

providers. They can sneak up on an exposed person and he/she may not even realize he/she's sick. Symptoms of lead poisoning can include abdominal pain, constipation, diarrhea, aggressiveness, anxiousness, hyperactivity, shortened attention span, muscle pain, weakness, weight loss, learning disabilities, convulsions, and (with significant lead exposure) even death. Someone with lead poisoning might also develop anemia (low blood iron).

It can be devastating for developing babies and kids.

In pregnancy, lead can cross the placenta and reach the baby; so if a pregnant woman is lead-exposed, so is her baby. In addition, young children tend to put everything in their mouths, so their risk for possible exposure is high. Low doses of lead can do lasting damage to infants and young children, as well as babies developing in mom's womb. Potential effects include:

- Lower IQ
- Distractibility and hyperactivity
- Hearing loss
- Anemia
- Growth and behavioral problems
- Kidney and brain damage
- Bone weakness/osteoporosis

So what can you do to reduce your and your child's exposure to lead?

- All pregnant women should consider being tested for lead exposure. It is a simple and inexpensive test that can be included with the blood tests being done at your first prenatal visit. If your obstetric health-care provider does not suggest testing, ask your provider to order a blood lead test.
- Have your child tested for lead starting before age 1, with regular testing occurring until age 6. Children under 6 are especially at risk, and the long-term effects of lead in a child can be severe!
- Keep your house clean. Dust contaminated with lead that is accessible to young children can cause an increased blood lead level. Help young children wash their hands with soap and water frequently and discourage them from putting their fingers in their mouths. Use a wet mop to dust, clean windowsills regularly and wash toys frequently.
- Lead in soil does not break down with time; it remains there forever. Don't allow children to play in areas of bare soil.
- Don't burn painted wood, as it may contain lead.
- If you work with lead, shower and change your clothes before going home.
- Don't remove lead paint yourself; it's a job best left to the professionals.
- Run the cold water in your kitchen faucet at a high rate for at least 30 seconds before drinking it, using it for mixing infant formula or for cooking, especially if it hasn't been used in several hours.
- Don't store food or drink in lead crystal glassware or old pottery.
- Beware of herbal products that are not certified because a range of heavy metals have been found in uncertified herbal products.
- Make sure children have adequate amounts of calcium, iron and Vitamin C in their diets. If their diets are low in these minerals or vitamins, they can potentially absorb more lead if they ingest it.

As much as I am discouraged to see the lack of testing required nationwide for lead exposure, I am still filled with hope. My hope is that awareness, like this blog, will prevent one more child from being exposed to lead. Spread the word, share this info and remember, lead poisoning is entirely preventable! #kNowLEAD this month and every month!



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About MotherToBaby

MotherToBaby is a service of the Organization of Teratology Information Specialists (OTIS), suggested resources by many agencies including the Centers for Disease Control and Prevention (CDC). If you have questions about exposures during pregnancy and breastfeeding, please call MotherToBaby toll-FREE at 866-626-6847 or try out MotherToBaby's new **text information service by texting questions to (855) 999-3525. You can also visit **MotherToBaby.org** to browse a library of fact sheets about dozens of viruses, medications, vaccines, alcohol, diseases, or other exposures during pregnancy and breastfeeding or connect with all of our resources by downloading the new MotherToBaby free app, available on **Android** and **iOS** markets.**

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