

# PREGNANCY AND TRAVEL

## Patient Information Fact Sheet

While many women do travel when pregnant and most have no real problems, it is important to understand that the likelihood of needing medical attention is greater during pregnancy. For this reason, women should hesitate before traveling to any area where medical services will be of dubious quality or where language or cultural difficulties may make diagnosis and treatment more difficult.

### ›General Precautions

There are a number of general points to make about pregnancy and travel. Routine tests in early pregnancy are important to ensure that the pregnancy is progressing normally. It is best not to miss out on these tests and if necessary you should consider postponing your trip.

Miscarriage is the most common problem in early pregnancy. It usually occurs within the first 3 months. The main concerns for the traveler are the immediate complications of miscarriage, including occasional life-threatening hemorrhage or serious infection. If inadequate medical care is available this could prove dangerous. Bear in mind that if labor is very premature then the survival of the child may depend upon the availability of specialist intensive care facilities.

Before you travel, it would be wise to find out as much as possible about medical services at your destination. Also, be sure to check that your insurance policy will cover you for the complications of pregnancy and, if the pregnancy ended prematurely, that the newborn child is covered by the policy. It is likely that you will need to arrange additional coverage for these eventualities.

### ›Preventive Care

In general, killed or inactivated vaccines can be given during pregnancy if required. Live vaccines should generally be avoided but if the risk of the disease outweighs the theoretical possibility of complications then your doctor may feel that it is wiser to have the vaccine. This is an issue you need to discuss. If a yellow fever certificate is required for entry into a particular country but your doctor feels that there is little or no risk of contracting this disease, then an exemption certificate may be provided. You should try to minimize the risk of infection via contaminated food and water.

Malaria is a much more serious disease in pregnant women and may threaten not only the life of the mother but also that of the unborn child. For this reason, pregnant women are generally advised to avoid traveling to malarious areas. If you are traveling to a malarious area and you are pregnant, it is essential that you take antimalarial chemoprophylaxis. **Chloroquine** (Aralen) is considered to be quite safe in pregnancy. **Mefloquine** (Lariam) can be used in the second and third trimesters of pregnancy. It is also very important to minimize the risk of mosquito bites.

### ›Air Travel

Travel by air should generally have no adverse effect on healthy women with a normal pregnancy. However, you should check with the airline that they will accept you for travel when you are pregnant. Airlines usually allow travel up to 36 weeks, but after the 28th week a doctor's letter may be required stating that the pregnancy is normal, the expected delivery date and that the doctor has given you permission to fly. There is a slightly higher risk of deep vein thrombosis in pregnancy so it is important to remember to get up and walk around the plane at regular intervals.

### ›Further Information

Centers for Disease Control and Prevention: [www.cdc.gov/travel](http://www.cdc.gov/travel)

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