**Patient Information Menu**

(For use in Patient Information / After Visit Summary; providers can use any or all of content based on individual patient context)

**OPIOID USE IN WOMEN OF CHILDBEARING AGE**

Some medicines (like Percocet, Vicodin, Oxycodone, codeine, morphine, fentanyl, Tramadol, methadone, buprenorphine), and heroin are opioids.

“Opioid use” can mean:

- Taking opioid pain medicines as directed by a health care provider;
- Taking buprenorphine (e.g., Suboxone®, Subutex®) or methadone for opioid addiction;
- Taking opioid pain medicines in a way other than prescribed:
  - Taking more medicine than you should;
  - Taking someone else’s medicines;
  - Taking opioids that have been purchased or stolen;
- Using heroin.

If you are a woman between 15 and 44 years old, **AND** you are taking opioids **OR** you are thinking of taking opioids for pain,

**YOU SHOULD KNOW:**

- It is best not to take opioids if you are planning to become pregnant. Opioids may affect your baby’s development, even before you know you are pregnant.

- If you have to take opioids and are using them as directed, it is generally safe to keep using them during pregnancy.
  - If you stop taking opioids suddenly, you may go through withdrawal. If you go through withdrawal, your baby could go through withdrawal and it could cause problems with your pregnancy.
  - If a pregnant woman takes opioids, her baby gets opioids from her. After the baby is born, the baby can have withdrawal symptoms. This is called **Neonatal Abstinence Syndrome (NAS)**. NAS can be treated. It may take extra care and more time in the hospital. Some babies get treated in the neonatal intensive care unit (NICU).
  - If a pregnant woman takes prescribed opioids for pain or addiction, research does **NOT** show that her children will have long-term problems.

- There are **other risks** to think about.
• You can become **physically dependent**. This means your body needs the opioid to feel “normal.” If your body does not get the opioid, you go through withdrawal. If you go through withdrawal, you may sometimes:
  o Feel anxious or on edge;
  o Have trouble sleeping;
  o Have a runny nose, teary eyes, diarrhea, and flu-like symptoms.

• You can develop **tolerance** to opioids. This happens when your body becomes less sensitive to opioids and you need more to feel the effects. Taking higher doses of opioids can cause **overdose or death**.

• You may develop **addiction**. A person with addiction can have very strong cravings. The person may not be able to control the cravings. The cravings can cause a person to use more than directed, use to get “high” or use to cope with stress, anxiety, or depression. Cravings can cause a person to use the drug even when it causes harm to themselves or others. Health care providers may call addiction “Opioid Use Disorder” or OUD. Addiction, or OUD, can be treated. Recovery is possible.

• Opioids can have **side effects**. They can cause sleepiness. Sleepiness can make some activities dangerous (like driving). It is very risky to take opioids with alcohol. It is also risky to take opioids with medicines for anxiety or stress, muscle relaxing, or sleep. If you are unsure of the safety of using a medicine or drug with an opioid, talk to your health care provider.

Taking too much of an opioid can cause **overdose or death**. The risk of having an overdose is higher with high doses of opioids. Using opioids with other medicines, drugs, or alcohol can increase the risk of overdose. Sometimes other very strong opioids are added to street drugs. These combinations can kill. Anybody who takes opioids on a regular basis (prescribed or non-medical source) should have a naloxone (Narcan®) kit for overdose prevention. Talk to your health care provider about naloxone or look on the searchable directory for naloxone ([https://www.dhs.wisconsin.gov/opioids/naloxone-pharmacies.htm](https://www.dhs.wisconsin.gov/opioids/naloxone-pharmacies.htm)).

**WHAT CAN YOU DO?**

• Talk with your health care provider about other ways to treat your pain. You may not need an opioid.

• Talk with your health care provider about risks and benefits of opioids. Opioids may be the best treatment for you. If they are, talk about the lowest helpful dose and for the shortest time possible.

• If you are sexually active, talk with your health care provider about your plans to become pregnant. If you do not want to become pregnant, use reliable birth control.

• If you become pregnant, or plan to become pregnant, talk with your health care provider as early as possible. That will give more time to make a plan that keeps you and your baby as healthy as possible.
• Make sure all your health care providers know you are taking opioids and who is prescribing them.

• Take your medicines as directed. Do not share them with others. Keep them safely secured at home (for example, in a lockbox). Get rid of any unused pills at a drug collection site (https://www.dhs.wisconsin.gov/opioids/prevention.htm).

• Talk with your health care provider about a prescription for naloxone (Narcan®). Naloxone is used to reverse an opioid overdose for people who take opioids.

• If you are:
  o Taking your opioid medicine differently than how they were prescribed
  o Or, you are taking someone else’s opioid medicines
  o Or, you are using illegal opioids (like heroin),
  
  **It is important for your health care provider to know.**

  If you have pain, your health care provider can help you find the safest and most effective way to treat your pain.

  If you struggle with addiction, dependence, or withdrawal, your health care provider can support you and help you find treatment.

*Under Wisconsin law, health care providers may report any pregnant woman who reports drug use, or is found to be using drugs.

**WHERE TO GO FOR MORE INFORMATION:**

Wisconsin Association of Perinatal Care, Perinatal Substance Use and Abuse Resources: http://www.perinatalweb.org/major-initiatives/perinatal-substance-use-and-abuse/the-challenges


Wisconsin Maternal and Child Health Hotline: 1-800-642-7837

CDC Treating For Two Initiative: https://www.cdc.gov/pregnancy/meds/treatingfortwo/index.html


Substance Use and Abuse Treatment Locator: https://www.dhs.wisconsin.gov/opioids/find-treatment.htm

Unused medication collection sites: https://www.dhs.wisconsin.gov/opioids/prevention.htm

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