(introductory music)

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MARYN: Welcome to Indie Birth's series of podcasts here on iTunes, *Taking Back Birth*. Hi, everyone. Maryn here with the topic of morning sickness or pregnancy nausea and vomiting. Now honestly, I am just past the first trimester of pregnancy. And I have been planning this podcast for a really long time meaning probably the last month or so. And it's just made me want to throw up talking about it honestly having been really nauseous throughout this pregnancy. And as much as my brain wanted to organize the material, I just couldn't bring myself to do it until about now. And probably a different sort of podcast than I would have done a month ago had I been able to. I was hoping a month ago that I would have some magical solutions to report that would help many, many women as far as nausea goes. But alas, I don't. I am just kind of through the worst of it. And my brain is able to work a little bit better now. So I got into it in the last week or so as far as researching a little bit more what this is all about and some interesting tidbits to talk about with you.

So some ideas and theories being thrown out today as we talk about this really common topic. Nausea in early pregnancy, vomiting for some, is a hallmark of being pregnant. It is, for some, a very real symptom, maybe the first symptom, they get. And unfortunately, for very few, hopefully, this lasts the entire pregnancy. Now that's definitely not as common, but it happens. So percentage of pregnancies that have some sort of what we consider normal or typical nausea or vomiting or either/or, 80%. So most pregnancies have some degree of this symptom. And as many of you know, it varies. There's what we would just call mild. And none of it is a just because when you're experiencing it nothing is seeming mild for most of us. But if you're going to read a study or read textbooks on it, definitely mild nausea to kind of the next level up which is vomiting and the next level is maybe having that happen several times a day. And then if we progress in that scale of severity, there is hyperemesis, which is a pretty serious condition so often known as HG, hyperemesis gravidarum. So really serious vomiting in pregnancy. And that can affect between 0.3 and 2% of all pregnancies.

So kind of back to the beginning, 28% will have nausea only. And then 52% will have nausea and vomiting. But still 80% of women are experiencing some version, which again is pretty significant. So maybe that's why we're talking about it today. So it seems like the symptoms peak in about the ninth week of pregnancy. And one study I came across called it—and this is in quotes—"Episodic Daytime Pregnancy Sickness". And that's a little funnier to me today than it was last month. I wouldn't have laughed last month when I was feeling nauseous all day. And, of course, we know that the

name morning sickness is really a misnomer. So whether it makes you laugh or not, some studies do appreciate and some sources do appreciate that it is very much not the morning only that we feel this way. In fact, it can be the whole day, and it can get worse as the day goes on which is how it was for me particularly the nights being the worst.

So, again, today we're just going to talk about what we would call normal or typical pregnancy nausea. Not hyperemesis. And it's funny that we do call it normal because we're going to look into lots of sources that say it is normal and why. But it's always been a big question for me. Just something I've always thought about perhaps because my first pregnancy, 13 years ago or almost 14 years ago really, I had not one minute of nausea. Not one. I felt absolutely fantastic. And as I've gotten older, as my pregnancies have gotten more—so this being technically the tenth pregnancy but with two miscarriages in there—it has gotten significantly worse and has increased from pregnancy to pregnancy.

So I just ask myself personally, does that feel normal? I mean is that normal? Why would I not experience that the first actually two times? And why would that be something that has really gotten to be an issue? So, obviously, there is not one answer, and we all have our anecdotal stories and our own experience. But I don't think I've really come to a solid conclusion even in helping other women with this issue. I don't feel like I have a concrete answer, something that makes it go away. And I don't know if it's normal or not. And, again, normal versus typical. Yeah. It might be typical in our society for whatever reason. But is it normal? Is this really how it's supposed to be? So we're going to explore some different theories about that.

Let's see. If you Google—and I always do because I want to see what's out there—if you Google pregnancy nausea or studies around pregnancy nausea or isn't normal, mostly what comes up is a whole lot of, I think, very unhelpful information. Sort of your typical Baby Centerish pages on just nothing really. I mean morning sickness. Oh, it's so hard. And you should try eating some crackers and drinking some ginger tea. Just like no information out there other than that sort of in the mainstream. If you dig a little bit deeper as far as the studies go, then you definitely can find lots of information that talks about the protective benefits of nausea and vomiting in pregnancy. Many of them that I wrote down for today come from a pretty recent study, and that was in 2014. So I felt pretty up to date actually with that. I wasn't aware of some of them.

So let's see here. Along the lines of it being protective is the idea that perhaps restricting our nutrient intact during this early part of pregnancy is actually protective because it may be a critical period or it is—it is factually a critical period of embryonic development. And so one theory is that the production of HCG can get at the right—the most optimal level to protect the placenta and optimize what they call nutrient partitioning between maternal and fetal tissues. So that's a theory. I can't say I know

more about the science behind that than that. But that's a theory is just actually reducing our intake is protective in some way. So that's kind of cool to think about. And like I said, definitely cooler for me now than it was last month. So if you're feeling really sick rick now I don't know if this is going to make you feel any better. Maybe it will.

So let's see. Some other protective benefits. Morning sickness. This is what most people know. Reduces the rate of early pregnancy loss, so women that have no morning sickness at all, allegedly, may have as high as a 3 time miscarriage rate. 3 times as high miscarriage rate when there isn't any morning sickness present. Heart problems in the baby seem to be reduced when morning sickness is present. Women 35 or older reap the most benefits of the protective effect. I don't know. Perhaps because women like us are also allegedly at a higher risk of things going wrong. I don't know. Fewer preterm births for those with morning sickness. Morning sickness may produce babies with a higher IQ. And that you could Google. You could read it and see what you think. It's not quite as simple as that once you read the information, but it's cool to think about. It may also reduce birth defect rate by 30 to 80%, which is a huge range.

So basically, it's all saying the same thing, right? That they think—or at least some of these studies think that it is protective and morning sickness is actually a good sign. And it means that you have a healthy pregnancy with a normal, healthy baby. So again that may make some of us feel better even though there are no guarantees. It may reduce rate of breast cancer later in life. That was a new one to me. And I could read up more on that. So, again, all these reasons seem to be due to the hormone flood and what I mentioned earlier which is perhaps the restrictive effect of nutrients which seems kind of counterintuitive to me. But I'm definitely not a scientist.

So morning sickness seems to only occur in humans. Not quite sure how they figured that one out. Not all mammals. And funny enough, not in all healthy pregnancies. Well, I had my little anecdotal story about that. So, again, a study is just a study. And with all studies, I think it just gives us ideas. It's not true for everybody. There's no such thing as 100%. But it seems like most healthy pregnancies will have some degree of morning sickness. But, of course, it doesn't mean that if you don't have it you have some kind of unhealthy pregnancy or there's anything wrong. That doesn't mean that at all. It's just most women.

So another interesting fact—and you can research this one all day is that morning sickness doesn't appear in every ethnic group, every country, every cultural group of people in the world. it definitely doesn't. So there was a study way back in 1984—that's quite a while ago. And it was a cross cultural study on the influence of diet and morning sickness. And they concluded that morning sickness is not a universal symptom associated with pregnancy but a condition which is influenced by diet. So

they found, of course, many societies—and I think eight in particular that reported no morning sickness at all. And in these societies, maize or corn was the staple in seven of the eight societies and in none of the societies with morning sickness. And they go on to say that perhaps it's the niacin, which is a B vitamin, that's prevalent in maize. And that's a theory we'll talk about is just the B vitamin theory.

So it's all interesting, isn't it? It's just one of those things that after all these decades and research still we haven't been able to put our finger on. We don't know for sure. And we don't even agree. Is it a good thing? Is it a bad thing? Let's see. There was another study in this one is definitely more recent. Not the eighties. Paul Sherman, who is a Cornell professor of neurobiology and behavior, had a study. And let me see if I can sum it up here. So they tested—and this is kind of his words here, "Tested theories and predictions about the nature of parent offspring conflict in human pregnancy. We showed that nausea and vomiting in pregnancy is beneficial by expelling such foods as meat and strong tasting vegetables that historically and still may contain harmful toxins and microorganisms that could potentially sicken the woman and damage her fetus just when its organs are developing and are most vulnerable to chemicals." So he views diseases from an evolutionary perspective, and that's his perspective on morning sickness is that it's an evolutionary adaptation we've made. And, again, it's to protect our babies.

Now I'm no scientist. I'm definitely not a Cornell professor of neurobiology. But just having experienced it myself, I don't know because I've been drawn to meat and proteins during times of nausea. And I get the strong tasting part as far as food aversions. I think our bodies can alert us to what may be harmful. But there's many plants as well that are potentially toxic especially raw. And that kind of goes against that theory because it's not a meat theory. And that's one of the only—and this is pretty anecdotal. I don't feel like I've seen research on this. One of the only theories I've heard just kind of in my little world—maybe just here in Sedona—where there are lots of vegans and raw vegans that they'll swear that morning sickness or nausea has to do with our diets. And it's those meat eaters amongst us such as myself that feel nauseous and that they wouldn't feel that way on their vegan diets because—sort of along the lines of what this guy is saying. But it doesn't completely add up because, of course, a plant based diet could be toxic if you're looking at the evolutionary perspective.

So I don't know. My brain doesn't completely latch on to that. But it's a cool theory. So let's see. He goes on to say the reasons he has come up with this. And this is also cool. Because the nausea and vomiting decline after 18 weeks of pregnancy generally and, at that point, the fetus is really less vulnerable to the effects of chemical disruptions. So, again, he's citing the same timing really which is it's protective. Women with the most severe morning sickness have lower rates of spontaneous

abortion. Yes. We said that. Historically, meat and strong tasting vegetables were likely to contain parasites, pathogens, and plant toxins. And these foods tend to reliably trigger morning sickness symptoms across cultures. Again, maybe debatable. I don't know.

Alcohol and cigarette smoke, which can also harm the fetus while organs are forming, also trigger the nausea. So yeah. I mean maybe across the board those things are repulsive to pregnant women, maybe they're not. I know, for me, that coffee never seems like a great idea when I'm pregnant. Sometimes my brain wants it, but my body doesn't. So I understand being repulsed by something that maybe you used to do that isn't perhaps the best habit. So alcohol, cigarette smoke probably not that appealing.

So, again, his study builds on a paper published in 2000 in a biology review. And they studied the outcomes of thousands of pregnancies. And they came to a similar conclusion that the study I cited from the eighties did was that there were traditional societies that don't have morning sickness. And they say their diets are based on bland, plant based foods. So I'd be up for learning more about that for sure. I've have adopted a plant based diet many times in my life and actually through one of my pregnancies. But for the last couple at least, it doesn't appeal to me. It's not something I intuitively feel is right for me. So I haven't been able to test that theory. However, it would be cool if there were vegetarians and vegans in this culture that somehow we could see what effect morning sickness has on them or not. And then, of course, if you could look at other pregnancy outcomes related because definitely different diets can have different pros and cons.

So here's total against everything I've said so far which is that nausea and vomiting can be protective. There was one study I came across that said that moderate—and, again, what does moderate mean. They have their definition. But we'd have to be on the same page about that. Moderate nausea and vomiting may be associated with neural tube defects. So spina bifida. That kind of thing. I felt like this bit of information was kind of opening up a can of worms. And again, what is the definition of moderate? Surely, I think we all agree that with someone that's unable to keep any food down for a longer period of time there could be more severe effects. If we're talking about restricting nutrient intake in the beginning of pregnancy, if that's protective, what if it's not protective past a certain point, right? We don't really know. So if it's not and women—certain women aren't able to eat at all and they're really sick, they're not getting good nutrition. They're not getting adequate nutrients. And folic acid, folate, I mean every kind of vitamin and mineral would likely be deficient. So neural tube defects can result we know—or we think we know—from those sorts of deficiencies.

So I'm not discounting it. I mean I'm not discounting any of this. I'm not a scientist. I'm just kind of offering what I've seen out there. And you can take what you want from it.

But I think both of these theories are sort of on opposite ends of the spectrum. And obviously, neither of them are true 100% of the time because, like I said, there's plenty of pregnancies that are completely healthy and a woman doesn't experience any of these things. So what? Does she not have a protective mechanism? And then, obviously, the opposite. If 80% of women are experiencing nausea and vomiting, is it really tied to neural tube defects when that's a pretty low percentage? And if it was, what could we do to work with that? So lots of overlapping issues. Definitely don't have an answer for you. Just providing info.

But I think it's an important topic. Even as midwives or even as a woman planning a birth and a pregnancy where you want to be able to rely on natural methods and eat well, this is a really big issues for many of us. And for me, it's never kept me from eating. But it doesn't feel like I'm eating terribly well the first couple of weeks at least. So I could see how that would be disconcerting if it went on too long. And it could have some sort of an effect. And with the fact that most doctors and medical practitioners, even midwives, are often so quick to recommend drugs—and, again, I'm not discounting that many women are unable to function with this nausea and vomiting. But pointing to these drugs as a solution may not be the best thing for everyone. We know that there are serious effects with drugs like Zofran. To tell you the truth, I don't know the ins and outs of all the drugs that are prescribed or recommended. It's just not my area. But I would, of course, encourage natural methods and just kind of getting through it as best we can because it is such a crucial time of development. There isn't a more crucial time in our development than the first trimester. It's just that's the truth. We go from being tiny cell beings to complicated systems and organs.

So to me, it's just not something I've ever thought I would venture into that world for. And that world I mean pharmaceuticals. But we're all different. So, again, just to kind of share—offer some personal story here. My nausea in pregnancy has really gotten worse each time. So my first pregnancy, like I said, I had absolutely none. And now that I think about it, I really don't think I had any with my second at all either. That was a vegetarian pregnancy. So who knows if that was coincidence or not? But it started with the third pregnancy where it was just kind of this dull nausea all the time. And with the third pregnancy, it really wasn't that bad. It was just something I noticed as being different, and it was specifically in the hours after dinner. But in the fourth pregnancy, it was a little bit worse. Fifth, I honestly don't remember, but it was probably a little bit worse.

Definitely in the sixth. And the seventh was definitely worse. And this time, eighth, started earlier. And by that, I mean at five weeks of pregnancy and was not reserved for the after dinner hours has—was from the moment I woke up all the way even in the middle of the night. I'd get up to go to the bathroom or get a drink of water and just absolutely be disgusted with how I felt. So that does not feel normal, like I said. I don't

really understand that although there are some theories as far as that goes that maybe I'll get into. And yeah. I have been forced, I think, to look a little deeper this time, and I haven't really gotten anywhere. Like I said, I don't have a concrete answer for anybody. But I've just kind of put up with it all these pregnancies. And it's the kind of thing that even as a midwife when women would, of course, complain about or report, it's more just, "Yes. I understand." And we always can review the common theories, and we can talk about those. But the common theories—and I guess I can just say them. Like blood sugar, that's a big one you'll read or hormones. And it is hormones, right? We've just talked about that. But as far as being able to solve that problem, I think it seems unlikely.

If it's blood sugar, if it was truly blood sugar for so many of us, wouldn't be a problem because we'd just eat, and we would feel better. But I don't know where that theory came from. I'm sure it applies to somebody. But I've never seen anybody, honestly, that had it that easy when they're feeling nauseous. I've hardly ever met anybody that found anything at all that made it go away. It's more a matter of making it through. And I've always joked that you can try a million things for most of us. And all of a sudden, you get to about 13 weeks. And you're feeling better, and you don't really know why except time has passed. So I've appreciated looking deeper this time and kind of doing this research. But along those lines of it being textbook, blood sugar or hormones, I've never felt like that was the problem for me. I know what a blood sugar low feels like in my body. And that's never what it felt like. It's always felt really toxic to me. Kind of like the digestion is just slow. It feels more like a digestion thing. And I've tried everything. I've tried magnesium. I've tried all kinds of digestive supplements. I've tried eating different things, eating at different times. I've tried apple cider vinegar. I've tried probiotics. And I'll probably talk more about those things. But it hasn't really improved.

And I never throw up. I've never thrown up in 14 years of being pregnant. Never. But again, that dull nausea. You can't discount that. If you've experienced it, you know it's kind of awful. And it can kind of occupy your mind and your body in such a way that it's hard to get through the day. It is. So the issue of gut health, I think, is important. And I'm definitely going to touch on that. I think, if anything, that's something that's been my issue in life really. I think it applies to morning sickness, to nausea. And really gut health is being linked to everything nowadays including brain health. We know that the baby's gut health at birth may determine lifelong health. We know that. And personally, I didn't start off with the greatest gut health. I was in the NICU for several weeks on antibiotics because I was a preterm baby. So we all have things like that probably in our history that make sense with why we're struggling with certain things as we are adults.

So a lot of the nausea and vomiting in pregnancy theories besides being protective also point to the fact that the gut isn't working properly and can't absorb. So, again, these

are so many issues kind of layered on top of each other because when the gut can't absorb then B vitamin deficiency, which is cited as a solution to morning sickness, or magnesium supplementation as a solution to morning sickness makes sense in the way that if the gut isn't absorbing of course you're deficient in things. And those could be two of them. So, again, is the answer to get more B vitamins? Maybe. But if your gut isn't working properly, then that's not really going to help.

So I have a great friend here that's an acupuncturist. We've been friends for years. We both really appreciate each other and our work. And she's helped me so much personally and with the women I work with. So her interpretation of nausea in pregnancy especially in my case with increasing pregnancies and being older is that the chi is depleted. And chi is your life force energy. It's central to Chinese medicine. And childbirth depletes that according to them. So when it gets really weak—and this is my interpretation of what she said. Hopefully, I've got it right for anybody who knows their Chinese medicine. Your kidneys can get week. And this isn't kidneys in the sense of the way we think of them in western medicine. Kidneys as an organ system in Chinese is slightly different.

But when the kidneys are weak, then the digestion slows. And basically, I think it's the spleen that start producing more moisture. I don't know. All of these things need to be in balance. And what I did get from it is that the deficiencies actually cause the nausea and poor digestion. And really, that makes perfect sense for the deficiency. That's exactly what that deficiency is. So from her Chinese medicine perspective, it's less about blood sugar or hormones. It's more about balancing these body systems, making the kidney system strong to even this out. And I've done that too through acupuncture and Chinese herbs.

So, again, back to gut health, which I don't think is entirely different than the Chinese perspective really. We're just talking about it in a different way. I think that the gut health is really important. And it goes on to be a huge issue in pregnancy for so many women. And I would love to see if there is ever that kind of link. If morning sickness is linked to gut health, then what about the stuff that happens later on? Group B strep and yeast and other gut imbalances that we think are so common in pregnant women. Maybe that's—maybe we're getting the idea about that or the clue about that earlier on in someone's pregnancy. So gut health is a huge issue. I'm not going to go into too much detail. I think it's just a really interesting thing.

One thing I came across as far as gut health and morning sickness may be new to you, may be old to you—I had heard about it, to be honest with you, a couple of years ago. This theory. But I don't know. It didn't really catch my attention and probably because I wasn't suffering from morning sickness. I sort of didn't care, but I did this time around. So the study was about the bacteria, H. pylori, that lives in our gut and pregnancy. And

I thought this was really interesting. 90% of women with morning sickness had this bacteria present. So that's really interesting. So what do you do? It's not an infection. But it may be an imbalance. So you could kind of assume that perhaps you have that gut imbalance, if you're having morning sickness. You could even get yourself tested although it seems just based on anecdotal things I've read that the testing isn't the absolute best just because it can kind of come and go. I have never tested myself for that.

But I did follow the H. pylori protocol for a little bit kind of when this morning sickness was getting worse around 9 weeks or so. And I did feel slightly better even if it was just because it gave me something to focus on. I don't know. But the things that I started to do that seemed to help were support of the gut and liver. And funny enough, I definitely was and still am craving things that support the liver. So sour things. That may be the pickle juice theory in pregnancy. I know, for me, lemon juice in water—I'll just pour straight apple cider vinegar into my water. I really like sour things. Kombucha, which is slightly sour, but that's another great thing for gut health. So a lot of the things I was already craving were things that, ultimately, might be helpful.

Coconut oil is another thing, of course, that's great for gut health. And I didn't have an aversion to that, as weird as that may sound. I was enjoying coconut oil. So supporting your gut with those ideas in mind. There are many, many, many other ideas. Can be helpful. Certainly can't hurt. That's the way I saw it. And if that's a H. pylori protocol, so be it. It's mainly just a gut health protocol. Probiotics as well. Let's see. What else does that—does it talk about? Turmeric and ginger. Funny enough, I had sort of gotten addicted to this kombucha with turmeric and ginger. So, again, I was just intuitively doing a lot of the things that may have been beneficial. I started to up the amounts meaning just paying more attention to those things and doing more of them. And I did feel better. I really, honestly did.

So you can look up H. pylori and pregnancy nausea. Look at some protocols that are there as well. There is another one I read that you take colloidal silver. I think it's a teaspoon three times a day on an empty stomach to kind of kill some of the H. pylori while you're trying to build up the more positive balance of bacteria. I did do that as well. I just found it really hard to have an empty stomach three times a day frankly. But I was willing to try anything. And it was kind of fun to try something out that didn't feel harmful and that actually felt beneficial. So, again, no magic answers here. I think gut health is always a thing that we could try to work on for most of us. And it just is going to benefit our whole entire pregnancy. So if we can do it, that's great.

So other solutions to morning sickness. That almost just seems so trite to even have a list after this because I don't have anything that works fantastically well. Maybe you do. I don't know. Of course, people get acupuncture. The nausea bands are meant to

press on the acupuncture points for nausea. Let's see. Ginger tea. All kinds of tummy soothing tea, which I also tried and have. Sour candies. I've heard everything. And if you Google it on the Internet or ask specific women, it reminds me a lot of the way there are lots of theories about how to get someone to go into labor. It's a little like that. I mean when you're ready, you're ready. But there are women that'll still swear by eggplant parmesan or whatever it is. And it's always going to work for somebody. But basically, it's a matter of time. And I think time is really the essence of morning sickness as miserable as it is. Believe me, I know.

One thing to mention, I think for sure, is that pharmaceuticals definitely have their risks and benefits. Something that probably needs to be studied more here like in the western world is using cannabis and whether it's hemp or marijuana. There is definitely studies going on, I'm sure, with that being used to relieve pregnancy nausea. And anecdotally, I know a handful of women at least who have opted for that and felt great relief. I did try CBD oil, which is hemp oil with a really small or maybe it's none—maybe a really tiny amount of THC. It is able to be gotten just anywhere you live through the mail from a reputable company, and it's organic and non GMO. Of course, it has a million other health benefits. And that has helped me as well although I'll say with any of this, again, there is no magic thing. There hasn't been for me. And I think I also have to be honest that some of these things that feel like they're working also have coincided with the morning sickness getting less anyway.

So I wish I had, again, a magic solution for anybody that is looking for one. I think investing the theories can be fun. Perhaps one day we'll have some more solid information. And I welcome your resources and information as well. So thanks so much for listening today. Be sure to check out the indiebirth.com website and our Indie Birth Conference coming up in January 2016 here in Sedona. Thanks. And have a great day.

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