Drug use in pregnancy: Hunting witches in the 21st century By: Núria Calzada and Fernando Caudevilla (Dr. X) \*

A young pregnant woman goes for her first check with the gynecologist accompanied by her partner wearing long dreadlocks. After a series of questions to elaborate on the medical history of the woman, it is time to ask about drug use.

- Do you drink alcohol?
- No, nothing.
- Do you smoke?
- Yes, 7-8 cigarettes a day.
- Try to stop smoking or at least reduce it to less than 5 cigarettes.
- Yes, I try. But it is not easy
- Any other stuff?
- Other stuff? What do you mean?
- Marihuana

The young woman becomes surprised and denies it, although she smokes every once in a while to relax. The gynecologist had not insisted – surely had not even asked – if she had not been accompanied by his dreadlocked partner.

The young woman, at the doctor's insistence and afraid, says she smokes some puffs occasionally, without realizing that with this statement her ordeal would begin. Most healthcare providers allow for a glass or a sporadic cigarette, but when they hear the word marihuana, the situation takes another color. Assuming legal drugs like alcohol and tobacco are consumed during pregnancy does not lead to stigma, denial and blame against the mother arise when it comes to illegal drugs.

This is a real case, a woman around 30 years old that, after her confession, her worst nightmare began. What happens in such cases? According to the healthcare system (private or public) a protocol of monitoring and risky pregnancy control may be activated. Considered as such, many analyses, like urine tests, are realized to the mother in order to detect drug use. Whether the result is positive or not during pregnancy, other tests are also realized to the baby after a few months after birth. If the result is positive, i.e. if they find THC metabolites in the baby, they might keep the baby under observation for several days until the tests are negative. Additionally, other actions may be as well activated, like the monitoring of social services to the mother, ban breast-feed if the mother uses marihuana or, even in the most serious cases, removing the custody of the baby. In Spain, for example, there are not standardized protocols but currently depend on each medical center and – in many cases – depend on the healthcare provider in front of us.

According to our experience, the vast majority of <u>women using illegal drugs recreationally</u> (marihuana, ecstasy, speed, cocaine...) stop using drugs at the time they start thinking in pregnancy. In those cases of unplanned pregnancies, they stop using drugs when they know they are pregnant. The situation worsens when we speak of problematic uses of alcohol, cocaine or heroine, but lets go back to recreational uses of women who go out to party...

There is sufficient evidence that many recreational drugs may cause adverse effects to the fetus. Energy Control's philosophy involves <u>providing people with the knowledge and skills</u> for them to take their own decisions regarding the use of drugs. In the case of pregnancy and breastfeeding, **our advice is NOT TO USE DRUGS**, since that could involve the health of a third person, the son.

- Consuming alcohol during pregnancy is associated with a lower weight of the newborn and increases the risks of malformations and intellectual disabilities. The risks depend on the doses and the most serious malfunctions usually occur in children of chronic alcoholism. Nonetheless, occasional use of high doses of alcohol during pregnancy also increases such risks.
- **Tobacco** is associated with a lower birth weight, premature birth and increases the risks of spontaneous abortions.

- The use of **marihuana** during pregnancy is associated with similar risks than tobacco (taking into account it is commonly used together) and, possibly, maturation and mild cognitive deficiencies. Regarding the use of cannabis, many legends also exist like the one that it may produce child leukemia, which are false. Cannabis is a drug that attaches very well to fats, so its effects could be transmitted through breast milk.
- **Amphetamines** (speed, methamphetamine) are usually associated with facial and cardiac malformations. Due to its similar structure, MDMA may imply similar risks.
- The use of **cocaine** during pregnancy associates with decreased fetal growth and an increased risk of premature separation of the placenta, among other disorders.

It is relatively common that women **may have used drugs during the first weeks of pregnancy**, before noticing it. Generally, it is understood at that time the pre-embryo is poorly differentiated and maternal and fetal circulation has not yet been established, so probably the risk of problems or malfunctions is very low. In any case, once the pregnancy test is positive, women should only use those strictly necessary prescriptions and always under medical supervision. This does not include any legal or illegal drugs.

Fortunately, common sense prevails in <u>mothers with recreational uses of drugs</u>, and responsibility and a protective instinct for the baby emerges. Drug use is usually abandoned without difficulties and start taking a number of healthy habits in order to provide the best possible conditions for the baby's development and to enjoy the unique experience of creating life

However, it is obvious that common sense and responsibility are absent in some governments, like in the state of Tenessee where has been established – sadly and with the opposition of civil society organizations and experts – as the first American state to incarcerate women who use drugs during pregnancy with a risk of harming the baby. Just imagine putting in prison a woman for eating sushi or Brie cheese despite knowing the risk of listerosis with severe consequences for the fetus.

We are facing the witch hunting of the 21st century.

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