



Aspirin in Pregnancy

Advice for Pregnant Women who have been advised to take Aspirin in Pregnancy

Why should I take Aspirin?

Aspirin has been shown to reduce the risk of developing pre-eclampsia in women who are at increased risk of having this condition.

Aspirin is not licenced for use in pregnancy. Aspirin is not normally taken in pregnancy and its use during pregnancy is what we call 'un-licenced'. This means that the manufacturers have not gained a licence to use it in this way. However, experts in maternity have looked at the benefits of taking aspirin when certain risk factors are present and recommend that it is taken in some pregnancies. For more information about any of the issues raised in this leaflet, please talk to the midwives or Doctors caring for you.

Pregnancy and High Blood Pressure

High blood pressure which develops during pregnancy and goes away after your baby is born is known as "**Gestational hypertension**". If you already had high blood pressure before becoming pregnant this may become worse during your pregnancy.

Pre-eclampsia occurs if you develop high blood pressure as well as increased protein levels in your urine and/or abnormal blood tests. It may make you feel unwell with headaches, changes in your vision, pain in your upper abdomen or excessive swelling. It can also affect the growth and wellbeing of your baby.

Pre-eclampsia symptoms will normally get better in the first few weeks after your baby is born.

Pre-eclampsia and your baby

Pre-eclampsia is caused by the placenta. The placenta feeds your baby and helps them grow. If the placenta isn't working properly, this could mean that your baby will be smaller and may need to be delivered early.



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Babies born early may have more problems after birth and may need to stay in hospital for some time. Rarely, problems with the placenta can lead to a baby being stillborn or dying in the first month of life. Research carried by Tommy's (2020) indicate that 12% of stillbirths were caused by placenta factors, including placental abruption and pre-eclampsia. Taking Aspirin may help to reduce the risk of these problems occurring.

How do I know if I am at higher risk?

At your booking visit, you will have been asked a number of questions by your midwife or doctor. From this information, it will have been identified whether you are at risk. You will have been recommended to take Aspirin if it was decided that you are at higher risk of developing pre-eclampsia.

You are more likely to develop pre-eclampsia if you have:

More than one of the following moderate risk factors:	<ul style="list-style-type: none">• This is your first pregnancy• You are aged 40 or older• Your last pregnancy was more than 10 years ago• Your Body Mass Index (BMI) is 35 or more• You have a family history of pre-eclampsia• You are expecting more than one baby in this pregnancy
One of the following high risk factors:	<ul style="list-style-type: none">• You had high blood pressure before you became pregnancy (chronic hypertension)• You had high blood pressure or pre-eclampsia during a previous pregnancy• You have chronic kidney disease, diabetes or an inflammatory disease, e.g. Systemic Lupus Erythematosus (Lupus)• You have altered levels in your blood of the biochemical markers which are part of the Nuchal Combined screening test

How do I take Aspirin?

Take 150mg (2 x 75mg tablets) once a day from when you are 12 weeks pregnant until your baby is born. It is best to take this in the evening, as it will be absorbed better. You can take it either with or without food.

What are the side effects of Aspirin?

Rarely, Aspirin can cause bleeding from the stomach lining. However, taking this dose of Aspirin during pregnancy has not been shown to



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increase the chances of having a miscarriage, vaginal bleeding during pregnancy or after delivery (anteperium or postpartum haemorrhage), or to cause bleeding behind the placenta (placental abruption). (BNF 2020)

Is Aspirin safe for my baby?

There is no evidence to suggest that Aspirin will cause any harm to your baby, either in the short or long term. Aspirin will in fact help to reduce the risk of harm to your baby, by reducing the risk of pre-eclampsia complications such as premature (early) labour, low birth weight and stillbirth (NICE 2019).

Is there anything else I can do to lower the risk?

Just as when you are not pregnant, it is very important to maintain a healthy lifestyle. Try to avoid putting on too much weight during your pregnancy, by making sure you eat a healthy diet, limit the amount of salt you eat and take regular exercise. Eating healthily and staying active while you are pregnant will reduce the likelihood of developing high blood pressure.

As there isn't enough evidence to show that they are effective, the following are not recommended as a means of preventing high blood pressure during pregnancy: magnesium, antioxidants (Vitamins C and E), fish or algal oils, or garlic.

It is important to take folic acid while you are trying to conceive and until you are 12 weeks pregnant, but it has not been shown to reduce the risk of developing high blood pressure.

Symptoms and signs of pre-eclampsia to look out for

Tell your doctor or midwife straight away if you have any of the following symptoms, particularly if they don't get better with normal painkillers (such as Paracetamol) or your usual treatment (such as an antacid for indigestion or raising your legs for swollen feet):

- severe headache
- problems with your eyesight, including blurred vision or flashing before your eyes
- severe pain just below your ribs or indigestion type pain
- vomiting
- sudden swelling of your face, hands or feet

Frequently asked questions

What if I can't take Aspirin?

If you are unable to take Aspirin then discuss this with your doctor or midwife.



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Does Aspirin interact with any other medications?

Aspirin can interact with other medications. It is important to let your midwife or doctor know of any other medications you are taking, including over the counter or herbal remedies.

What should I do if I miss a tablet?

If you forget to take a tablet, just take one when you remember.

What should I do if I think I am going into labour?

If you think you may be in labour, you can stop taking your Aspirin but it won't do any harm if you keep taking it until your labour is confirmed. It will not increase your risk of bleeding during labour.

Where can I find more information?

If you are concerned about taking Aspirin, you can contact your community midwife or your General Practitioner (GP).

If you have any symptoms of pre-eclampsia please contact your midwife or staff at Great Western Hospital on the number on the front of your notes.

References:

British National Formulary (2020) BNF: Volume 79. BNF

National Institute for Care and Health Excellence (2019) Hypertension in Pregnancy: Diagnosis and management. NICE Guideline NG133

Tommy's (2020) Statistics about Stillbirth. Accessed online at: <https://www.tommys.org/our-organisation/charity-research/pregnancy-statistics/stillbirth>

This information sheet is available to order in other languages and formats. If you would like a copy, please contact us on 01793 604031 or email gwh.pals@nhs.net

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