

英文

Safe medicine use for pregnant women

Safety Class for using medicine while pregnant

Pregnant women should avoid unneeded medicine, and should use either food therapy or change their lifestyle.

Class A: Clinical trials have shown it is safe for pregnant women

Class B: No clinical trials control, animal trials show safety or without adverse reaction, clinical trial control shown no problem

Class C: Animal trials showing teratogenicity, but no human trials control or lack of clinical trial information

Class D: Has teratogenicity, but can be used if “pros outweigh cons” medically

Class X: Absolutely forbidden for pregnant women

Deciding factors on influencing fetus by pregnant women using medicine

1. Medicine causing teratogenicity, whether medicine will combine with proteins, the metabolism method for medicine
2. During which period of pregnancy was the medicine used
3. The length of time of medicine use and dosage
4. How medicine was given
5. Status of bleeding in uterus of pregnant women
6. The mother's metabolic capacity, body fat amount

中文對照說明

孕婦用藥安全

懷孕用藥安全級數

孕婦應避免不必要的藥品，儘可能使用食品療法或改變生活形態。

A 級：臨床對照試驗顯示在孕婦是安全的

B 級：無臨床試驗對照，動物試驗顯示安全或有不良反應，臨床對照試驗沒問題

C 級：動物試驗顯示有致畸性，但沒有人體對照試驗或臨床試驗資料均缺乏

D 級：有致畸性，但醫療上【利大於弊】時可以使用

X 級：孕婦絕對不可使用

孕婦用藥對胎兒造成影響的決定因素

1. 藥品的致畸胎性、藥品會否與蛋白結合、藥品的代謝方式
2. 用藥時間在懷孕的哪一期
3. 用藥時間長短及劑量
4. 給藥方式
5. 孕婦子宮血流情況
6. 母體代謝能力、體脂肪多寡

Influences of Medicines on Fetus

Influence of medicine on the fetus: according to development stage of fetus, are as follows:

Preimplantation	0-2 weeks	Normally will not lead to fetus deformity
Embryonic	3-8 weeks	Critical period,organs forming stage, will lead to fetus deformity or death
Fetal period	9-16 weeks	May cause cleft lip and female fetal genital masculinization
Fetal period	16 weeks just before birth	Fetus growth completed,may cause abnormality in physical functions of fetus

Treatment of frequently seen symptoms of pregnant women

1.Nausea:

Cause: symptom frequently occurring during early stage of pregnancy will normally disappear after 12 weeks.

Treatment: Maintaining enough and stable amount of Vitamin B6 as supplement.

2.Sense of heartburn in stomach:

Cause: Rising of Abdominal and diaphragm leading to stomach being pushed upon.

Treatment: Eating less amount and more meals, avoiding soft drinks, using suitable amount of Stomach milk, stomach milk tablets.

3.Constipation:

Cause: Expanding uterus, pushing on intestines causing

藥物對胚胎的影響

依胚胎發育的情況，可分為：

著床前期	0~2週	通常不會導致胎兒畸型
胚胎期	3~8週	關鍵時期，器官形成期，會引起胎兒畸型或成死胎
胎兒期	9~16週	可能造成兔唇及女性胎兒性器男性化
胎兒期	16週~生產前	胎兒生長完成，可能造成胎兒生理機能異常

孕婦常見症狀的處理

1. 噁心

發生原因：懷孕初期常有之現象，滿 12 週一般會消失。

處理方法：維持體內必須營養素穩定，補充維他命 B6。

1.5 胃灼熱感

發生原因：腹腔及橫膈膜上升導致胃受壓迫。

處理方法：少量多餐，避免軟性飲料，適量使用胃乳、胃乳片。

3. 便秘

發生原因：子宮擴大，壓迫腸道導致腸蠕動變緩。

slowing of intestinal peristalsis.

Treatment: Taking appropriate amount of water, appropriate amount of exercises, expansive laxatives or lubrication laxatives.

4. Hemorrhoids:

Cause: Veins near the rectum, and obstruct blood flow by the enlarged uterus oppression.

Treatment: Use of hemorrhoid cream to facilitate defecation or Analgesic suppositories.

5. Cold:

Treatment: Drink more water, rest more, and do not buy over the counter medicine. Most cold and respiratory medicines are Class C.

處理方法：適當的水分、適量的運動、膨脹性瀉劑或潤滑性瀉劑。

4. 痔瘡

發生原因：直腸附近的靜脈，受擴大的子宮壓迫而阻礙血流。

處理方法：盡量使排便通暢，局部痔瘡軟膏或止痛栓劑。

5. 感冒

處理方法：多喝開水、多休息、勿自行購買成藥服用。感冒及呼

吸道藥品多數為 C 級。

Principles of Pregnant Women Using Medicine

1. Without guidance of doctor or pharmacist, pregnant women should not add or stop medication.
2. Use less medicine, especially in the first three months of pregnancy, and to discuss and do evaluation with doctor.
3. When visiting doctors, should tell doctor or pharmacist if pregnant or possibly be pregnant.
4. For those on medication, should discuss with doctor or pharmacist on whether to stop medication.

孕婦用藥的原則

1. 沒有醫師或藥師的指導，孕婦不可自行加藥或擅自停藥。
2. 少用藥，尤其是懷孕時期的頭三個月，並與醫師做討論與評估。
3. 看病就診時，如果懷孕或有可能懷孕者，都必須告訴醫師或藥師。
4. 已經在使用藥品者，需和醫師或藥師討論是否停藥。

Effect of commonly used medicine on fetus

Medicine	Effect on Fetus
Tetracyclines	Blocks development of bones, teeth changing color
Sulfa drugs	Kernicterus
Chloromycetin	Gray baby syndrome
Antithyroid preparations	Development of fetus intelligence sluggish
Too much vitamin A	Development of fetus intelligence sluggish, Increased intracranial pressure
Too much vitamin D	Development of fetus intelligence sluggish, Hyperkalemias.

Will using medicine leading to fetus deformity always lead to babies with problems?

1. Not necessarily, but children with defects ranges between 3-6%. Fetal deformity increases the risk by over 5 times.
2. If using medicine that leads to fetal deformity, must stop medicine for a period of time before getting pregnant again.
3. The antiepileptic disorder drugs, anti-thyroid drugs belong to Class D, but the diseases damage fetus far more than the drugs, so will need to continue using drugs.

常用藥品對胎兒的影響

藥品	對胎兒的影響
四環素類	阻礙骨骼生長、牙齒變色等
磺胺藥	核黃疸
氯黴素	灰嬰兒症
抗甲狀腺製劑	胎兒智力遲滯
過量維他命A	胎兒生長遲滯，顱內壓增高
過量維他命D	胎兒智力遲滯，高血鉀

使用致畸胎性藥品的媽媽一定會生出有問題的孩子？

1. 不一定，但生出有瑕疵的孩子的機率約 3-6%。畸胎的風險增加五倍以上。
2. 使用致畸胎性藥品，停藥後須等一段時間後再懷孕。
3. 抗癲癇症藥品、抗甲狀腺藥品均屬懷孕分級 D，但疾病本身對胎兒的傷害遠高於藥品，因此仍需繼續用藥。