



The Pregnant Traveller

Is it safe to travel during pregnancy?

Pregnant women have a higher risk of severe complications from infections. Some of these infections can also cause birth defects in your developing baby. If you are pregnant and want to travel, you should speak with your health care provider to discuss your travel plans and medical needs.

If you have certain pregnancy-related or medical conditions, you may be advised not to travel. There may also be certain regions where pregnant women may be advised not to travel to. For example, you or your close contacts may want to postpone travelling to areas where diseases or viruses such as Malaria or the Zika virus are common.

The safest time to travel is during 18 to 24 weeks of pregnancy. Most complications during pregnancy occur during the first and third trimesters.

How can I prepare before I travel?

Before you travel, you can:

- Speak with your health care provider at least 6 weeks before your trip to discuss your travel plans, recreational activities, medical needs, and what you should pack in your travel health kit.
- Contact your local travel clinic to determine any risks of travelling to your destination(s) and to ensure that you have the right vaccinations.
- Find out what kind of medical care will be available at your travel destination.
- Make sure you have adequate travel insurance in the event you require medical care or deliver your baby early. Many policies do not automatically cover pregnancy-related conditions or hospital care for premature infants.
- Pack comfortable, loose fitting clothes, including long sleeve shirts, pants, closed-toe walking shoes, sunglasses, hat, sunscreen and insect repellent.
- If your medication requires needles and syringes, it may be a good idea to carry a note from a physician to authorize the possession of these materials.

- For areas with high risk of HIV infection or improper sterilization techniques, take a kit with sterile disposable syringes and needles.
- If taking oral medication or insulin, pack enough supplies for the entire trip and keep them in your carry-on luggage. Carry all prescriptions with you.
- Wear a medical alert bracelet if you have allergies, chronic disease, or other health concerns.
- In case of an emergency, have an evacuation plan to a local medical facility with a safe blood supply.

What immunizations should I have before I travel?

If your immunization status is incomplete or unknown, be sure you have protection against Tetanus, Diphtheria, Pertussis, and Polio. You may also need the following vaccines:

- Hepatitis A
- Hepatitis B
- Influenza
- Rabies
- Japanese Encephalitis
- Meningococcal

Contact your health care provider or local travel clinic for information on the risk of infection while travelling, versus the risk of immunization while being pregnant. It is best to postpone immunization until after the first 3 months of pregnancy.

You should not have the following vaccines during pregnancy:

- Measles, Mumps, Rubella (MMR) vaccine
- Oral typhoid
- Bacille Calmette-Guérin (BCG) vaccine
- Chickenpox vaccine
- Yellow Fever vaccine

Can I travel by air?

Air travel is normally safe for most pregnant women. However, there is a higher risk for pregnant women to develop a blood clot in the leg, also called deep vein

thrombosis (DVT). To help avoid DVTs, make sure to walk up and down the aisle and stretch your legs while seated to increase circulation. For flights longer than 4 hours, get up and walk every 30 minutes, as allowed. For more information about what you can do to decrease your risk of DVTs, speak to your health care provider.

Air travel is not recommended in the last month of pregnancy and for the first 6 days after delivery. You will need a doctor's or a midwife's written note and medical history in order to travel by air once you are 36 weeks pregnant. If you are having twins, you may not be permitted to fly once you are 32 weeks. Check with your airline for their travel requirements for pregnant women before booking your flight.

If you think you might experience motion sickness, talk to your health care provider about medications that might help.

How can I protect myself against malaria?

Malaria is a disease caused by mosquito bites and tiny parasites that get into the bloodstream. The effects of malaria are more severe among pregnant women and developing babies, including a risk of miscarriage, stillbirth, and death for mother and infant.

Pregnant women cannot take certain anti-malaria medications and should avoid travel to areas where anti-malaria medications are required. If you must travel, visit your health care provider, or a travel clinic to find out if there is a safe anti-malaria medication. You should also be more careful to avoid mosquito bites. For more information about Malaria and how to protect yourself from mosquito bites, see [HealthLinkBC File #41f Malaria Prevention](#).

How can I protect myself against the Zika virus?

Zika virus causes an infection that can be passed from a pregnant woman to her developing baby during pregnancy. Zika infection can trigger Guillain-Barré syndrome, a condition where the immune system attacks the peripheral nerves. It can also cause congenital brain abnormalities, including microcephaly (abnormally small head size). Microcephaly is associated with developmental delays, epilepsy, and hearing and visual impairment. The Zika virus is carried by a type of mosquito found in South America, Latin America, and the Caribbean. It can also be passed from person to person during sexual contact.

For more information on Zika virus, including how to protect yourself and your family, see our Zika Virus health feature: www.healthlinkbc.ca/health-feature/zika-virus

How can I prevent or treat traveller's diarrhea?

Traveller's diarrhea can be more severe in pregnancy. It can also pose a risk to your baby, especially if the diarrhea is caused by a more serious infection such as toxoplasmosis, listeriosis or hepatitis E.

Over-the-counter medications used to treat diarrhea should not be used in the last 6 weeks of pregnancy. In addition, Sulpha drugs, Ciprofloxacin, and Pepto Bismol® (bismuth subsalicylate) which are sometimes used for traveller's diarrhea, are not recommended for pregnant women. Speak to your health care provider about what medications you are able to take.

To help prevent traveller's diarrhea, you need to follow good personal hygiene practices and be careful about what you eat and drink. For tips on how to stay healthy while travelling, see [HealthLinkBC File #41e Traveller's Diarrhea](#).

When do I need to seek medical care while travelling or when I return home?

You should seek medical attention right away if you experience any of the following:

- Vaginal bleeding (passing clots or tissue)
- Belly pain or cramps
- Contractions
- Your water breaks
- Excessive (a lot of) leg swelling, pain or cramping
- Vomiting, diarrhea or dehydration that lasts a long time
- Fever
- Severe headache, visual problems, or pink eye
- Skin rash
- Joint and muscle pain

For More Information

For more information about travel health, see the following HealthLinkBC Files:

- [HealthLinkBC File #41a Health Advice for Travellers](#)
- [HealthLinkBC File #41c Travel Immunizations for Adults](#)
- [HealthLinkBC File #41d Travelling with Children](#)