



## Briefing for the Public Petitions Committee

**Petition Number:** [PE1454](#)

**Main Petitioner:** Natalie Robb

**Subject:** Hyperemesis specialist nurses in Scottish hospitals

Calls on the Parliament to urge the Scottish Government to consider placing hyperemesis specialist nurses in hospitals throughout Scotland to provide medical and emotional support to the thousands of pregnant women suffering from this condition.

### Background

This Petition highlights concerns with the lack of specialist support available in Scotland for women who experience hyperemesis during pregnancy. Hyperemesis Gravidarum (HG) is an uncommon, but severe, form of nausea and vomiting that can occur during pregnancy (NVP). It affects around 1 in 200 women. Symptoms of HG include:

- prolonged and severe nausea and vomiting, dehydration, [ketosis](#) – a serious condition that is caused by a raised number of toxic (poisonous), acidic chemicals (ketones) in the blood
- body weight loss
- low blood pressure (hypotension) when standing up

The symptoms of HG can be so severe that it is impossible to keep any fluids down. Excessive vomiting can cause dehydration and weight loss. If symptoms of nausea and vomiting are so severe that the sufferer is unable to tolerate fluids, the NHS Inform website suggest that they seek urgent medical advice as soon as possible. The dehydration that is caused by HG increases the risk of experiencing deep vein thrombosis (DVT) - a blood clot in one of the deep veins in the body.<sup>1</sup> There is more information on this condition available via [this website](#).

There has been a range of studies conducted that focus on HG. One source that has drawn some of the main findings together is the [review of research](#) on NVP and HG that has been produced by the Pregnancy Sickness Support charity. The website offers a summary of information (from 2007) on incidence

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<sup>1</sup> The information provided here is drawn from the [NHS Inform](#) website.

rates, hospital (re)admissions and length of stay in hospital, as well as on recovery from HG.<sup>2</sup>

Clinical Knowledge Summaries (CKS) are produced by NHS evidence<sup>3</sup>. Those that focus on [nausea and vomiting during pregnancy](#) make reference to complications resulting from hyperemesis. For example, research has found maternal complications including weight loss, dehydration, acidosis, abnormal liver function and vitamin deficiencies. For the fetus, there is no evidence that mild or moderate nausea and vomiting have any effect on pregnancy outcomes. Indeed, there is some evidence that nausea and vomiting may be predictors of successful pregnancy outcomes. In particular, a lower rate of miscarriage has been documented among women with NVP. Among women with hyperemesis, there is a higher incidence of low birth-weight babies where women have had low pregnancy weight gain. Fetal death is very rare and is limited to extreme cases of hyperemesis.

The UK charity, [Pregnancy Sickness Support](#) is pursuing activity to improve care, treatment and support for women suffering from NVP and HG throughout the UK. The charity is developing a national support network for sufferers as well as raising awareness among the public, media and health care professionals about NVP and HG. This support network has a presence in [Scotland](#), offering advice and support, including - where information is available - recommendations for 'HG friendly' GPs, consultants and midwives as well as where to get an appropriate referral. The charity is also involved in on-going research into the cause and treatment of NVP and HG and the psychological impact for sufferers and their families.

## Clinical Guidelines

In England and Wales, there are NHS Trusts that have produced clinical guidelines that are available online. The focus of these guidelines differ between Trusts. For example, there are those that focus on a range of gynaecology services, but include reference to HG. This is the approach used in [North West Wales NHS Trust Emergency Gynaecology Unit Guidelines](#). Others focus specifically on NVP and HG. For example, Royal Cornwall Hospitals NHS Trust has produced [Clinical Guidelines](#) for treating in-patients with hyperemesis gravidarum, as well as [Clinical Guidelines](#) for treating day patients with HG.

In Scotland, NHS Forth Valley has produced guidelines on [day treatment](#) of women with moderate HG and [inpatient](#) treatment of women with HG. It is not clear from publicly available information how many health boards in Scotland have produced clinical guidelines either on NVP or HG. There also are no

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<sup>2</sup> From the information available on this website, it looks as though this review was conducted during or not long after 2007. As such, the information is not likely to be comprehensive and cost information is now very out of date.

<sup>3</sup> NHS Evidence is a service that enables access to authoritative clinical and non-clinical evidence and best practice through a web-based portal. It is managed by the National Institute for Health and Clinical Excellence (NICE).

publicly available national level guidelines in Scotland that offer information and advice on treatment and support for women suffering from HG.

## **Scottish Government Action**

In 2011, the Scottish Government published [\*A Refreshed Framework for Maternity Care in Scotland\*](#). It's focus is on ensuring that Scotland offers high quality maternity care to women, their partners and their babies before and after birth. The refreshed framework is said to strengthen the contribution that NHS maternity care makes to improving maternal and infant health, as well as reducing the unacceptable inequalities in maternal and infant health outcomes. The Framework recognises the importance of providing an early pregnancy assessment service to women who experience complications in early pregnancy. Importantly, a commitment is made in this document that all health professionals across the NHS are aware of this service and able to directly refer to it. This service involves ensuring that women who experience complications in early pregnancy are cared for in a dedicated area distinct from the general gynaecology or obstetric ward.

The Framework does not make direct reference to any specific condition or support services. However, it does state that there should be specific services provided to women with complications in early pregnancy, which would include hyperemesis gravidarum. Furthermore, the Framework states that all Health Boards should assess a woman's needs holistically and manage their care in a timely manner.

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**14 January 2013**

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