

PATIENT EDUCATION



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Travel During Pregnancy

For most women, traveling during pregnancy is safe. As long as you and your fetus are healthy, you can travel safely until you are 36 weeks pregnant. If you are planning a trip, check with your **obstetrician–gynecologist (ob-gyn)** or other health care professional about safety measures to take during travel.

This pamphlet explains

- *the best time to travel during your pregnancy*
- *how to prepare before you go*
- *different ways to travel*
- *international travel*
- *how to find medical care when traveling*

The Best Time to Travel

The best time to travel is probably the middle of your pregnancy—between week 14 and week 28. Most common pregnancy problems happen in the first and third trimesters. During midpregnancy, your energy has returned, morning sickness usually is gone, and it is still easy to get around. Paying attention to the way you feel is the best guide for your activities.

Before You Go

If you are planning a trip, see your ob-gyn or other health care professional to talk about your travel plans. They can advise you about whether it is safe for you to travel. With some complications, including **preclampsia**, **prelabor rupture of membranes**, and

preterm labor, travel is not recommended. With others, such as a **multiple pregnancy**, you may need to think about whether traveling is worth the potential risk.

Once you get the OK to travel, have a prenatal check-up before you leave. At this visit, your ob-gyn or other member of your health care team may discuss the following issues with you:

- **Your due date**—Your ob-gyn or other health care professional will confirm your due date. If something goes wrong while you are away, your caregivers will need to know how far along you are, as well as any other important health information about your pregnancy. Ask for a copy of any important information about your pregnancy to take with you.

- Medications—It is a good idea to bring medications with you that you may need, such as over-the-counter pain relievers, hemorrhoid ointment, a first aid kit, prenatal vitamins, and any prescribed medications. Make sure you tell your ob-gyn about all of the medications you will take with you.
- Immunizations—You already may have reviewed your immunizations at an earlier prenatal care visit, but your ob-gyn may double-check that you are up to date with all of your vaccines. Depending on where you are going an additional vaccine may be needed.
- Special precautions—For example, if you are traveling to an area where the water is not safe to drink, you need to know how to make it safe to drink or how to avoid it altogether (see “Food Precautions”). If you are going to a country with mosquito-borne illnesses, you need to prevent mosquito bites (see “Zika Virus”). The “Resources” box lists organizations that keep track of this information for travelers by country.
- When to seek emergency care—Go to a hospital or call emergency medical services right away if you have any of the following:
 - Vaginal bleeding
 - Pelvic or abdominal pain or contractions
 - Rupture of the membranes (your “water breaks”)
 - Signs and symptoms of preeclampsia (headache that will not go away, seeing spots or other changes in eyesight, swelling of the face or hands)
 - Severe vomiting or diarrhea
 - Signs of *deep vein thrombosis (DVT)* (see box “Deep Vein Thrombosis: Know the Facts”)

Getting There

When choosing your mode of travel, think about how long it will take to get to your destination. The fastest way often is the best.

Make your travel plans easy to change. Pregnancy problems can come up even before you leave home. Consider buying travel insurance to cover tickets and deposits that cannot be refunded.

By Car

During a car trip, make each day’s drive as brief as possible. Be sure to wear your seat belt every time you ride in a motor vehicle, even if the car has an air bag. Plan to make frequent stops. Use these stops to move around and stretch your legs.

By Airplane

If you have a medical condition that could be made worse by flying or require emergency medical care, you should avoid flying during your pregnancy. But for healthy pregnant women, occasional air travel is almost always safe.

Deep Vein Thrombosis: Know the Facts

Deep vein thrombosis (DVT) is a condition in which a blood clot forms in the veins in the legs or other areas of the body. It can lead to a dangerous condition in which a blood clot travels to the lungs. Sitting or not moving for long periods of time, such as during long-distance travel—whether by car, bus, plane, or train—can increase the risk of DVT. Pregnancy is an additional risk factor for DVT and further increases the risk.

If you are planning a long trip, take the following steps to reduce your risk of DVT:

- Drink lots of fluids.
- Wear loose-fitting clothing.
- Walk and stretch at regular intervals (for example, when traveling by car, make frequent stops to get out and stretch your legs).

You also can wear special stockings that compress the legs below the knee that may help prevent blood clots from forming. However, you should talk to your ob-gyn before trying these stockings because some people should not wear them (for example, those with diabetes or circulation problems).

When booking your flight, keep your due date in mind. Complete your flight before you reach 36 weeks of pregnancy. Some domestic airlines restrict travel completely or require a medical certificate during the last month of pregnancy. If you are planning an international flight, the cutoff point often is earlier, sometimes as early as 28 weeks. Always check your airline’s policies when planning your trip.

Plane travel exposes you to noise, vibration, and *cosmic radiation*. If you fly occasionally during pregnancy, these issues are unlikely to cause any problems. Even if you take one of the longest flights available, the amount of radiation you will be exposed to will be no more than 15% of the recommended limit. But for pregnant women whose jobs require them to fly often (such as pilots, flight attendants, or air marshals), radiation levels may be a concern. If you are a frequent flyer, check with your ob-gyn or other health care professional about whether you should limit your flight time during your pregnancy.

When traveling by plane, you can take the following steps to help make your trip as safe and comfortable as possible:

- If you can, book an aisle seat so that it is easy to get up and stretch your legs during a long flight. Plan to do this every 2 hours or so.
- Avoid gas-producing foods and carbonated drinks before your flight. Gas expands in the low air pressure present in airplane cabins and can cause discomfort.

How to Wear a Safety Belt During Pregnancy



Wear your safety belt every time you travel in a motor vehicle. Always wear both the lap and shoulder belt. Buckle the lap belt low on your hip bones, below your belly, and place the shoulder belt off to the side of your belly and across the center of your chest (between your breasts).

- Wear your seatbelt at all times. Turbulence can occur without warning during air travel. The seatbelt should be belted low on the hipbones, below your belly.
- If you are prone to nausea, your ob-gyn or health care professional may be able to prescribe anti-nausea medication.

By Ship

Taking a cruise can be fun, but many travelers on cruise ships have the unpleasant symptoms of seasickness (also called motion sickness). Seasickness is a balance problem. It occurs when conflicting signals about your position from the body, eyes, and inner ear (which controls your sense of balance) are sent to the brain. Seasickness causes nausea and dizziness and sometimes weakness, headache, and vomiting.

If you have never taken a cruise, planning your first one while you are pregnant may not be a good idea. But if seasickness usually is not a problem for you, traveling by sea during pregnancy may not upset your stomach. Make sure a doctor or nurse is onboard the ship and that your scheduled stops are places with modern medical facilities in case there is an emergency. Before you leave, ask your ob-gyn about which medications are safe for you to take to calm seasickness. For many people, seasickness goes away after a few days as the body adjusts to the boat's motion.

Another concern for cruise ship passengers is norovirus infection. Noroviruses are a group of viruses that can cause severe nausea and vomiting for 1–2

days. They are very contagious and can spread rapidly throughout cruise ships. People can become infected by eating food, drinking liquids, or touching surfaces that are contaminated with the virus.

There is no vaccine or drug that prevents norovirus infection, but you can help protect yourself by frequently washing your hands and washing any fruits and vegetables before you eat them. If you are pregnant and get this infection (or any other illness that causes diarrhea and vomiting), seek medical care. Dehydration can lead to certain pregnancy problems. You may need to receive intravenous (IV) fluids.

Before you book a cruise, you can check whether your ship has passed a health and safety inspection conducted by the Centers for Disease Control and Prevention (CDC). The CDC performs periodic inspections of cruise ships to prevent widespread virus outbreaks. You can read these reports on the CDC website (see "Resources").

Traveling Outside the United States

If you are planning a trip outside of the United States, your ob-gyn or other health care professional can help you decide if it is safe for you and advise you about what steps to take before your trip. The CDC also is a good resource for travel alerts, safety tips, and up-to-date vaccination facts for many countries (see "Resources").

Check your health insurance policy to see if you are covered internationally. If not, you may be able to buy special health care insurance for international travelers.

Zika Virus

Zika virus was recently identified in Central, North, and South America, but now there are cases of Zika virus infection throughout the world. The virus is spread to humans in several ways:

- Through a bite by an infected mosquito
- From a pregnant woman to her fetus during pregnancy or around the time of birth
- During sex

Zika virus infection generally causes no symptoms or mild symptoms, including fever; rash; joint pain; and red, itchy eyes. Babies born to women infected with Zika virus are at risk of serious birth defects, including *microcephaly* and other brain abnormalities, and pregnancy loss. Microcephaly can lead to lifelong problems, such as seizures, feeding problems, hearing loss, vision problems, and learning difficulties.

Currently, there is no treatment for Zika virus infection and no vaccine to prevent it. If you are pregnant, take the following steps to reduce your chances of becoming infected:

- Avoid travel to places where Zika virus is spreading.
- Follow strict steps to avoid mosquito bites:
 - Wear long-sleeved shirts and long pants.

- Treat clothing and gear with permethrin or buy permethrin-treated items.
- Get rid of all sources of standing water that can be breeding grounds for mosquitoes.
- Stay in air-conditioned and screened-in areas as much as possible.
- Use EPA-registered bug spray with DEET, picaridin, IR3535, oil of lemon eucalyptus, or para-menthane-diol. Used as directed, these sprays are safe for pregnant and breastfeeding women.
- If your sex partner lives in or travels to areas where Zika virus is spreading, you should use a condom every time you have sex or avoid sex while you are pregnant.

If you are pregnant and have traveled to an area where Zika is present, see your ob-gyn or other health care professional, especially if you have any of the symptoms of Zika virus infection during your trip or within 2 weeks of your return. You can get tested to see if you are infected with Zika or have evidence of a previous infection. Depending on your test results, close follow-up care may be needed.

Malaria

Malaria is another serious disease carried by mosquitoes that presents a major risk to your pregnancy. While you are pregnant, you should not travel to areas where there is risk of malaria, including Africa, Central and South America, and Asia. The CDC has a list of malaria information by country on their “Traveler’s Health” website (see “Resources”). If travel to these areas cannot be avoided, your ob-gyn or other health care professional can prescribe an antimalarial drug for you, such as chloroquine or mefloquine. Pregnant women should not take the antimalarial drugs atovaquone and proguanil, doxycycline, or primaquine.

Food Precautions

Travel to developing countries comes with the risk of contaminated food and water. People who live in these areas are used to the *microorganisms* in their food and drinking water, but travelers are not. Travelers can become sick if they eat raw or undercooked food or drink local water. This short-term illness, called “traveler’s diarrhea,” may be a minor problem for someone who is not pregnant, but it is a greater concern for pregnant women. Serious illnesses, such as *hepatitis A* and *listeriosis*, also can be spread by contaminated food and water. These diseases can cause severe complications for a pregnant woman and her fetus. There is a vaccine for hepatitis A that is safe for pregnant women.

If you do get diarrhea, drink plenty of fluids to combat dehydration. Before taking a diarrhea treatment, check with your ob-gyn or other health care professional to make sure it is safe. The best way to prevent illness is to avoid unsafe food and water. Make sure to follow these tips:

Resources

American College of Obstetricians and Gynecologists

Find an Ob-Gyn

http://www.acog.org/About_ACOG/Find_an_Ob-Gyn

Searchable directory of ob-gyns.

American Medical Association

DoctorFinder

<https://apps.ama-assn.org/doctorfinder/home.jsp>

Searchable directory of physicians within the United States.

Centers for Disease Control and Prevention (CDC)

Traveler’s Health

wwwnc.cdc.gov/travel

Trusted medical advice for travelers in both national and international destinations, including food and water precautions, disease outbreak information, and vaccine recommendations.

Vessel Sanitation Program

www.cdc.gov/nceh/vsp/

Site that lists sanitation inspection scores for national and international cruise ship lines.

Zika Virus: For Pregnant Women

www.cdc.gov/zika/pregnancy/

ACOG Zika Virus Resource Summary

www.acog.org/zika

Frequently updated sites with the latest news about Zika virus and pregnancy, how to protect yourself, and travel information.

The International Association for Medical Assistance to Travelers

www.iamat.org

Nonprofit organization that provides medical information for international travelers. Membership is free and allows you to access detailed information about your destination, including where to find medical care.

- The safest water to drink is tap water that has been boiled for 1 minute. Bottled water is safer than unboiled tap water, but because there are no standards for bottled water, there is no guarantee that it is free of germs that can cause illness. Carbonated beverages and drinks made with boiled water are safe to drink.
- Do not put ice made from unboiled water in your drinks. Do not drink out of glasses that may have been washed in unboiled water.
- Brush your teeth with bottled water.
- Avoid fresh fruits and vegetables unless they have been cooked or you have peeled them yourself.

- Do not eat raw or undercooked meat or fish.
- Do not consume milk or foods made with milk that have not been *pasteurized*.

Medical Care

Even if you are in perfect health before going on a trip, you never know when an emergency will come up. If you are traveling in the United States, locate the nearest hospital or medical clinic in the place you are visiting. You may want to check whether they accept your insurance. You can search for a doctor on the American Medical Association's website (see "Resources"). The American College of Obstetricians and Gynecologists' website can help you locate an obstetrician. You also can ask your local ob-gyn or other health care professional if they can recommend a doctor or health care facility in the area where you are traveling.

If you are traveling internationally, you can search the International Association for Medical Assistance to Travelers' worldwide directory of doctors (see "Resources"). Keep in mind that the doctors in the country you are visiting may not speak English, so bring a dictionary of their language with you if necessary. Another tip is to register with an American embassy or consulate after you arrive at your destination. These agencies may be helpful if you need to leave the country because of an emergency.

Finally...

There is no reason to put off taking trips during your pregnancy if you do not have any complications. Discuss your travel plans with your ob-gyn or other health care professional. Find out about special precautions you need to take depending on your destination. Once you are there, stay alert to your body's signals, and seek medical care if you have serious signs or symptoms.

Glossary

Cosmic Radiation: High-energy rays from space that can reach the earth.

Deep Vein Thrombosis (DVT): A condition in which a blood clot forms in veins in the leg or other areas of the body.

Hepatitis A: An infection caused by a virus that can be spread by contaminated food or water.

Listeriosis: A type of illness you can get from bacteria found in unpasteurized milk, hot dogs, luncheon meats, and smoked seafood.

Microcephaly: A birth defect in which a baby's head and brain are smaller than normal. Babies with microcephaly may have seizures, developmental delays, mental disability, vision and hearing problems, and problems with balance and movement.

Microorganisms: Life forms that are invisible to the naked eye and can only be seen with a microscope. Bacteria are an example.

Multiple Pregnancy: A pregnancy where there are two or more fetuses.

Obstetrician–Gynecologist (Ob-Gyn): A doctor with special training and education in women's health.

Pasteurized: When certain foods, such as milk, have been heated to a specific temperature for a set period of time to kill harmful bacteria, such as the bacteria that cause listeriosis.

Preeclampsia: A disorder that can occur during pregnancy or after childbirth in which there is high blood pressure and other signs of organ injury. These signs include an abnormal amount of protein in the urine, a low number of platelets, abnormal kidney or liver function, pain over the upper abdomen, fluid in the lungs, or a severe headache or changes in vision.

Prelabor Rupture of Membranes: Rupture of the amniotic membranes that happens before labor begins. Also called premature rupture of membranes.

Preterm: Less than 37 weeks of pregnancy.

This information was designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. Please check for updates at www.acog.org to ensure accuracy.

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American College of Obstetricians and Gynecologists
409 12th Street, SW
PO Box 96920
Washington, DC 20090-6920