Dr. Bowlby’s 10 rules to remember...

1. The well being of the fetus depends on the well being of the mother.
2. Pregnancy is a normal but altered physiological state.
3. Organ development is often complete before the first MD appointment.
4. Pregnancy may worsen or improve medical illnesses.
5. Obstetric outcomes may be affected by conditions or treatment of the mother’s medical illness.
6. Pregnant women are at risk for usual illnesses as well as those unique to pregnancy.
7. The stress of pregnancy may indicate long term risks to the mother.
8. Pregnant women do not like medications and doctors do not like prescribing them.
9. Physicians must make decisions with limited data.
10. Internists and Obstetricians need to work together.
Dr. Bowlby’s rules to remember...

**Pregnancy is a normal but altered physiological state.**
- Blood volume and cardiac output rise, SVR drops, increased heart rate, lower BP, GFR increases 50%

**Organ development is often complete before the first MD appointment.**
- All of organ development has occurred by 6-8 weeks, when most women find out they are pregnant.
- 50% of pregnancy are unplanned in the US

**Pregnant women are at risk for usual illnesses as well as those unique to pregnancy.**
- Pregnant women are immuno-suppressed (in order to prevent rejection of fetus)
- It is safe to give your pregnant patients annual flu shots!
- No data for Tamiflu safety; use if severely ill or hospitalized for influenza.
- Tdap protects the newborn; need to give with every pregnancy.
- Encourage smoking cessation!
- Don’t encourage weight loss in pregnant patients.

**The stress of pregnancy may indicate long term risks to the mother.**
- 50% of women with gestational diabetes go on to developed DMII.
- Elevated Hgb A1c at conception has high risk of congenital anomalies.
- Pre-eclampsia is associated with higher risk for ASCVD.
- Pregnant women are at 5-7x more likely to develop blood clots (PE/DVT)
- Pregnant women with pulmonary hypertension have 50% risk of mortality.

Pregnant women do not like medications and doctors do not like prescribing them.

**safe:**
- Tylenol
- Prenatal vitamins
- Influenza vaccinations
- Zofran
- Warfarin =< 5mg daily
- DM: Metformin

**HTN:**
- Thiazide diuretics
- Methyldopa
- CCB (2nd line)

**Constipation:**
- Metamucil or Fibercon
- Senokot/ducolax

**contraindicated:**
- ACE inhibitors
- Propranolol
- NSAIDs
- Fioricet
- Imitrex
- Anti-epileptics
- Depakote
- Keppra

Think of the woman as not pregnant, think of your diagnostic or treatment plan, then make adjustments for pregnancy.

The well being of the fetus depends on the well being of the mother.

Internists and Obstetricians need to work together. Consult the Duke OMG (Obstetric Medicine Group) with questions.