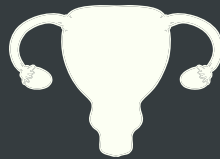


CANNABIS AND PREGNANCY DON'T MIX

- Cannabis is a commonly used drug among pregnant women [1,2].
- There are over 400 active ingredients in cannabis. The main active chemicals are delta-9-tetrahydrocannabinol (THC) and cannabidiol (CBD). Both THC and CBD are known to cross the placenta during pregnancy [3,4].
- No matter how cannabis is used (e.g., smoked, vaped, eaten) [5], the developing baby may be adversely affected by any amount of cannabis taken by pregnant or breastfeeding women.
- There is no known safe amount or time for cannabis use in pregnancy and when breastfeeding [5-7].



Long-term use of cannabis may affect the menstrual cycle and lead to a reduction in hormones involved in reproduction and fertility [8-10].



FERTILITY



IMPACT ON
FETUS & BIRTH
OUTCOMES

Smoking cannabis may increase carbon monoxide levels in the blood, which can decrease the amount of oxygen delivered to the baby [26]. Regular use of cannabis during pregnancy may be associated with increased risk for low birth weight, preterm labour, and stillbirth [7, 19-23].



BREASTFEEDING

Cannabis constituents are stored in body fat, especially in breastmilk, and can be passed down to the baby through breastmilk [28]. These chemicals are slowly released over time (up to 30 days) [29,30]. This means that “pumping and dumping” breastmilk does not eliminate the risk of exposure to cannabis. One study found that babies exposed to THC through breastmilk had slower motor development, reduced muscular tone and poor suckling [5,31].

While the use of cannabis may relieve reported symptoms of nausea during pregnancy, women should be aware of the potential risks. There are other treatments for morning sickness that are effective and safer to take during pregnancy [11-14].



MORNING
SICKNESS

Maternal cannabis use has been linked to adverse effects on children’s brain development including reduced memory function, ability to pay attention, reasoning and problem-solving skills, increased risk of depression or anxiety, hyperactive behaviour and increased risk for future substance use [2, 23-27].



LONGER-TERM
DEVELOPMENTAL
EFFECTS



SECOND-HAND
SMOKE

Cannabis smoke has many of the same chemicals as tobacco smoke, and exposure may increase the chances of the baby having development problems [6, 15-18].

Given what we now know about the short-and long-term effects of cannabis on fetuses and babies, **it is safest for women to avoid using cannabis while pregnant and while breastfeeding** [32,33]. More research is needed, which may provide more specific information about the harms associated with amounts, duration and timing of exposure. Information about cannabis and pregnancy and breastfeeding can be found at <https://www.pregnancyinfo.ca/learn-more/>.

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