

Traveling Internationally While Pregnant

Pregnant women require special attention when planning and preparing for international travel. Before making any travel decisions, women who are pregnant should consult their health-care provider. It is important to weigh the benefits and risks based on the destination and discuss the recommended preventive and treatment measures.

Air Travel

Commercial air travel poses no special risks to a healthy pregnant woman or her fetus. Each airline has policies regarding pregnancy and flying; it is always safest to check with the airline when booking reservations. Travel within the United States is usually permitted until week 36 of gestation depending on the airline. Some airlines limit international travel earlier in pregnancy and some require documentation of gestational age. Air travel should be discussed with a health-care provider anytime a woman is nearing the end of her pregnancy.

Follow the tips listed below to prepare you for commercial air travel.

- Newer security machines use backscatter x-ray scanners, which emit low levels of radiation; most experts agree that the risk of radiation exposure from these scanners is extremely low.
- Travel with at least one companion
- Wear loose clothing and comfortable shoes
- Always use seatbelts while seated
- Carry documentation stating the expected day of delivery, contact information for your obstetric provider and your blood type
- In order to prevent deep vein thrombosis, frequent stretching, walking and isometric leg exercises are recommended along with wearing graduated compression stockings.
- Drink plenty of fluids during flights

Food and Waterborne Illness

- **Adhere strictly to food and water precautions in developing countries.** The consequences may be more severe than diarrhea and may have serious complications (i.e. toxoplasmosis, listeriosis).
- **Boil suspect drinking water** to avoid long-term use of iodine-containing purification systems.
- **Oral rehydration** is necessary therapy for travelers' diarrhea.
- **Products with bismuth subsalicylate compounds (Pepto Bismol®) should not be used during pregnancy.**

Significant risks for pregnant travelers:

Motor vehicle accidents

- Safety belts should be worn whenever possible
- Shoulder belts should be worn between the breasts with the lap belt low across the upper thighs.
- Consult a physician even for mild trauma

Hepatitis E

- Hepatitis E is not vaccine preventable and is especially dangerous to pregnant women
- Avoid drinking un-boiled or non-chlorinated water and beverages that contain un-boiled water or ice
- Only eat food that is thoroughly cooked, including seafood, meat and meat products

Scuba diving

- Avoid scuba diving during pregnancy because of the risk of decompression syndrome in the fetus

Pregnancy and Malaria

Pregnant women should avoid travel to malaria-endemic areas if possible. Women who choose to go to malaria-endemic areas can reduce their risk of acquiring malaria by taking appropriate antimalarial medications and following insect precautions.

- Malaria transmission occurs primarily between dusk and dawn
- Contact with mosquitoes can be reduced by remaining in well-screened areas, using mosquito bed nets (preferably insecticide-treated nets), using a flying-insect spray in living and sleeping areas during evening and nighttime hours and wearing clothes that cover most of the body
- Use an effective mosquito repellent containing DEET, an ingredient in many commercially available insect repellents. DEET formulations as high as 50% are recommended for both adults and children older than 2 months. Apply DEET to exposed parts of the skin when mosquitoes are likely to be present.
- **Malaria must be treated as a medical emergency in any pregnant traveler.** Malaria is characterized by fever and influenza-like symptoms, including chills, headache, myalgia and malaise. Symptoms can develop as early as 7 days (usually at least 14 days) after initial exposure in a malaria-endemic area and as late as several months or more after departure. Travelers, especially pregnant travelers, who have symptoms of malaria should seek medical evaluation as soon as possible.

Immunizations

Travel Health Kit for Pregnant Women

In addition to the items listed in the general international travel health kit, pregnant women should include the following additions:

- All prescription medications
- Hemorrhoid cream
- Antiemetic drugs
- Antacids
- Prenatal vitamins
- Medication for vaginitis or yeast infection
- Support hose

Pregnant travelers should consider packing a blood pressure monitor if travel may limit access to a health center with blood pressure monitoring available.

For a woman in the third trimester of pregnancy, it is advisable to identify a medical facility in her destination that could manage complications of pregnancy, her delivery, a caesarean section, and neonatal problems.

Pregnant travelers may visit areas of the world where diseases still occur that have been eliminated by routine vaccination in the U.S. Immunizations against the diseases listed below may be recommended before travel.

- Diphtheria
- Hepatitis A*
- Hepatitis B
- Influenza
- Japanese encephalitis*
- Meningococcal disease*
- Pertussis
- Pneumococcal disease*
- Polio
- Tetanus
- Typhoid
- Yellow fever*

* Vaccines to protect against these diseases have limited or unavailable safety and/or efficacy data in pregnant women.

Because pregnant women cannot be vaccinated against measles, mumps, rubella and varicella, unvaccinated women should delay travel until after delivery.

For more information on international travel health, visit www.cdc.gov/travel.

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