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Pregnant & Using Heroin

If you are pregnant and using heroin, you need to be under a doctor's care. If you are already seeing a doctor for prenatal treatment, be honest and tell your doctor that you are using heroin. Your case needs special medical attention.

To be perfectly clear: If you are using heroin, so is your baby.

Heroin slows the growth of your child both during and after pregnancy. If you do not get medical care, it is four times more likely that your baby will die during your pregnancy or shortly after being born. The baby will simply be too small to survive.

Babies of heroin addicts weigh about one-fourth less than average infants, and many are born prematurely. Even a year after birth, most babies of mothers who used heroin while pregnant are smaller than average, and have smaller heads. And if you fail to get treatment for your addiction, there's a good chance that your baby will experience heroin withdrawal, which can cause them to suffer for months.

If you are pregnant and using heroin, you need to get help now. This is not something that you can take care of on your own.

If you try to go "cold turkey" and quit drugs too quickly, you can cause the death of your baby. Scientists believe this occurs because the baby suddenly becomes hyperactive, then oxygen-deprived. For this reason, doctors usually withdraw mothers from heroin after the baby is born, or very gradually during pregnancy, sometimes by using a replacement drug like methadone.

Your heroin use puts you at risk for some serious health conditions. For example, you have a 50 percent chance of developing heart disease, anemia, diabetes, pneumonia, and hepatitis during your pregnancy. These are much higher odds than the average mother faces.

How does Heroin Abuse affect Pregnant Women?

As is the case with every person who uses heroin, pregnant women who expose themselves and their children to this drug run the risk of developing a wide range of health complications.

The greatest risk of heroin use is death. Accidental overdose can cause the death of the mother, can result in spontaneous abortion of the fetus, and can lead to infant death shortly after birth. But even if no fatalities occur, the results of heroin use during pregnancy can still be devastating:

Like everything a pregnant woman ingests, heroin can cross the placenta – meaning that their babies can develop a dependence on the drug before they are even born. According to the American Pregnancy Association, heroin use during pregnancy can lead to the following conditions in the baby:

- Premature birth and/or low birth weight
- Hypoglycemia (low blood sugar)
- Bleeding in the brain

- Impaired ability to breathe

Compared with the host of other risks, “low birth weight” may sound like a relatively innocuous effect - but being born at less than 5 lbs., 8 oz., has been associated with myriad health problems, including heart failure, intestinal damage, and blindness. The March of Dimes reports that several studies have linked low birth weight with an increased likelihood of developing certain health problems (including hypertension, heart disease, and type 2 diabetes) in adulthood.

Women who use heroin while pregnant are also more likely than sober women to experience poor nutrition and inadequate prenatal care – both of which put mother and child at a decided disadvantage. Effects including impaired immune function, delayed cognitive development, behavior disorders, and stillbirth have all been associated with substandard nutrition, while neglecting proper prenatal care can allow relatively manageable conditions to progress into more substantial threats to both mother and child.

Experts are continuing to develop safer and more effective means of treating heroin addiction in pregnant women. The National Institute on Drug Abuse (NIDA) reports that, when combined with prenatal care and a comprehensive drug treatment program, methadone maintenance can be beneficial – though the baby will likely need to be treated for withdrawal symptoms. Non-pharmacological detoxification procedures are also available, though NIDA notes that these processes may increase the risk of relapse.

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Or call 877-983-8227 to speak with a specialist to find a facility.

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