

No5 COMMUNITY AND SECONDARY CARE PATHWAY FOR DIARRHOEA AND VOMITING IN PREGNANCY (including hyperemesis) –

01/02/2026 V5

First line - There are safety data for antiemetics such as anti (H1) histamines, phenothiazines and pyridoxine-doxylamine (Xonvea®) and they should be prescribed initially when required for NVP and HG

Ongoing history with compromise
Advise fluids
Refer to GP

If clinically stable and no concerns offer antiemetic
Antiemetics safe for community use:
1st line Promethazine
- 2nd line Cyclizine
- 3rd line Metoclopramide

GP to refer for hospital review if any fetal concerns and consider Isolation on admission (as per local infection prevention policy) following discussion with obstetric team
Advise PO fluids as tolerated

If known outbreak of infection use PPE
Follow PHE advice

Hospital Review

- Assess whether systematically unwell / dehydrated, send stool sample
- Abdominal exam: tenderness / uterine irritability
- Fetal wellbeing: Auscultate <26 weeks, CTG > 26 weeks
- Admit only if moderate or severely dehydrated (for IV fluids VBG for monitoring of potassium and monitoring of fluid balance) or mild dehydration but unable manage at home
- Ketonuria is not an indication of dehydration not to be used to assess severity– Use the HELP tool (RCOG Management and nausea in pregnancy and hyperemesis Gravidarum Green top guidelines NO 69 2024)**
- VTE risk assessment and consider the need for Low weight molecular heparin (LWMH) from the first trimester if hyperemesis

Treatment options

1st line
Combination of different drug should be used in women who do not respond to single antiemetic.

- Cyclizine
- Prochlorperazine
- Promethazine
- Chlorpromazine
- Doxylamine + pyridoxine

2nd Line

- Metoclopramide
- Ondansetron

**HELP (hyperemesis Level Prediction) Score sheet link
(<https://www.hyperemesis.org/tools/help-score/>)

Consider
Thiamine supplementation (either oral 100 mg tds or intravenous as part of vitamin B complex (Pabrinex®)) should be given to all women admitted with vomiting, or severely reduced dietary intake

References:

- RCOG Management and nausea in pregnancy and hyperemesis Gravidarum Green top guidelines NO 69 2024.
- Clinical Knowledge and Skills (CKS) NICE 2025 Deep vein thrombosis guidance.
- CKS NICE guidance - Nausea and vomiting in pregnancy 2025