

## DURING PREGNANCY:

**Staying on your Medication Assisted Treatment (MAT) is important. Continue seeing your health care provider and substance use treatment provider regularly for a healthy pregnancy and for your recovery.**

- Your OB provider may also be your treatment provider. If not, he/she will need to know about your medication use in pregnancy. This may mean additional consent forms need to be signed to share information between your OB and treatment provider.
- You and your health care and substance use treatment providers will determine a schedule that meets your needs. You will need regular (and sometimes frequent) visits with your providers during pregnancy.
- Your MAT may include office-based treatment or a residential opioid treatment program offering methadone and/or buprenorphine.
- Your provider may change your dose throughout pregnancy due to body changes during pregnancy.

### Visits for MAT may include:

- Checks for withdrawal symptoms
- Checks that you continue with any recommended counseling
- Checks that you are receiving regular and consistent OB care
- Drug screening



**Around 24-32 weeks:** Your treatment provider may ask you to meet with a pediatric health care provider regarding Neonatal Abstinence Syndrome (NAS), and the hospital staff regarding pain management during labor and delivery and your stay in the hospital.

**Around 36-40 weeks:** Make sure your OB provider knows your medication dose.

You may receive other referrals for parenting support.

## LABOR and DELIVERY:

Pain control during labor and delivery is important! Be sure you have discussed this with your OB provider and hospital staff earlier in your pregnancy. This is to make sure you have good pain control while you are in the hospital. Scheduled methadone and buprenorphine should continue during labor and delivery. However, your MAT medications will not treat the pain associated with childbirth. For mild to moderate pain, acetaminophen and NSAID medications can be used, such as Tylenol or Motrin.



There are other non-pharmacological means of pain relief as well. You can try:

- Breathing
- Mindfulness
- Imagery
- Changing positions slowly
- Massage
- Use of pillows
- Ask your nurse what options are available to you in the hospital

You can receive an epidural for pain control during labor or for C-Section delivery. If you have a C-section, you may receive medication through an IV and you may receive pain pills when you leave the hospital. It is important that your OB and other hospital staff know that you are on medication assisted treatment.

After delivery, you will continue your medication assisted treatment.