

Cannabis and Pregnancy, Lactation and Fertility

Researchers are still figuring out the effects of cannabis use during pregnancy on babies, children, and youth. There is no known safe amount of cannabis use during pregnancy or breastfeeding, nor do we understand the risks associated with consuming different amounts or when it is consumed in relation to the pregnancy.

Why it is difficult to get the same answer?

Many of the studies exploring cannabis during pregnancy and lactation have been done on animals due to ethical concerns of using human subjects. Those that use humans are very limited and have difficulty providing consistent and accurate information about the amount, type and timing of cannabis consumed during pregnancy and lactation. It is also difficult to determine the effects of other things on pregnancy, lactation, and the developing baby such as exposure to alcohol, tobacco, and other factors. While research is limited and sometimes inconsistent, it is important to note that evidence currently suggests that consuming cannabis while pregnant and lactating is not risk free and expert advice is to avoid using cannabis during this time.

Fertility, Conception and Cannabis Use

There is some evidence that using cannabis may affect fertility and may make getting pregnant more difficult (GoC, 2018). Long-term use of cannabis may affect the menstrual cycle and the hormones your body produces during reproduction. Similarly, cannabis has been linked to lower sperm count, sperm's decreased ability to swim, and poorer sperm quality (GoC, 2018).

Cannabis Use and Pregnancy

Cannabinoids, specifically THC, cross the placenta and reach the developing fetus. There is concern that this leads to short and long-term health effects, preterm labour or stillbirth. It is important to understand that cannabinoids are stored in fat in our bodies and get slowly released from fat storage to the bloodstream. This release can continue for up to 30 days (Porath-Waller, 2015, Public Health Ontario, 2018). Therefore, even if you have stopped consuming cannabis, it can take up to a month for the cannabinoids to leave your system and they may still be passed to the fetus or nursing baby. Some studies have found that smoking cannabis during pregnancy may increase carbon monoxide in the blood of both the pregnant person and developing fetus. This decreases the amount of oxygen the fetus receives and may lead to negative health outcomes (National Academies of Sciences, 2017). As cannabis can decrease blood pressure, this can lead to dizziness and fainting, which can cause injury to both the pregnant person and fetus (GoC, 2018).





Cannabis Use and Breastfeeding/ Chestfeeding/Nursing/Lactating

Similar to how cannabinoids may pass to the baby in the uterus, there is a chance that cannabinoids may pass to the nursing baby through human milk. Since cannabinoids are stored in body fat, our body can store cannabinoids in human milk for up to six weeks. Therefore, pumping and dumping the milk after consuming cannabis may not be effective in preventing your baby from being exposed. Furthermore, cannabis consumption can affect the success of lactation as it affects the hormone that tells your body to make milk (prolactin). Additionally, babies who are exposed to cannabis may be drowsy and have poor suckling.

References:

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National Academies of Sciences (2017). Prenatal, Perinatal, and Neonatal Exposure to Cannabis. In *The Health Effects of Cannabis and Cannabinoids: The Current State of Evidence and Recommendations for Research*. National Academies Press (US). <https://www.ncbi.nlm.nih.gov/books/NBK425751/>

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Harm Reduction: What if I can't stop using Cannabis?

Experts recommend that anyone who is thinking about getting pregnant, currently pregnant, or lactating stop cannabis use. However, sometimes it is difficult or impossible to stop using it. Here are some things you can do to minimize the harms of cannabis while pregnant or lactating:

- If you can't stop using cannabis while pregnant or lactating, try switching to cannabis products with less THC and consuming cannabis less often (CMNRP, 2019). The amount of cannabis your fetus or baby is exposed to depends on how often you use it and the amount of THC in the product. Evidence suggests that THC has the most negative health impacts.
- Try getting your cannabis products from regulated stores. Regulated products must be labeled and meet strict quality and safety standards. They are unlikely to have additives, mold, pesticides, or fungicides (CMNRP, 2019).
- Although all forms of cannabis (smoking, vaping, edibles, topical etc.) may impact your fetus or baby, try to avoid smoking.
- If you're smoking cannabis, try doing it away from your infant to avoid second-hand smoke; wash your hands and change your clothes before contacting your baby to avoid third-hand smoke and reduce their exposure to cannabis (CMNRP, 2019).
- Avoid using cannabis with alcohol, tobacco, prescription and over the counter medication. When combined, there can be an increased risk of harmful effects to the baby as well as safety concerns due to parental intoxication (CMNRP, 2019).
- Speak to your healthcare provider about alternatives to cannabis or harm reduction to safely guide you through your conception, pregnancy and lactation journey.