

**Consultant Editor**

Corina Casey-Hardman

**Editor**Alexandra Uytenbogaardt  
[bjm@markallengroup.com](mailto:bjm@markallengroup.com)**Commercial Manager**Julia Rogers  
[julia.rogers@markallengroup.com](mailto:julia.rogers@markallengroup.com)**Group Classified Manager**Daniel Doherty  
[daniel.doherty@markallengroup.com](mailto:daniel.doherty@markallengroup.com)**Circulation Director**

Sally Boettcher

**Production Assistant**

Jamie Hodgskin

**Associate Publisher**

Mike Shallcross

**Publishing Director**

Chloe Benson

**Managing Director**

Anthony Kerr

**Chief Executive Officer**

Ben Allen

**UK PERSONAL SUBSCRIPTION RATES**

Quarterly Direct Debit	£43
Annual Direct Debit	£170
Annual Credit Card	£179
2yr Annual Credit Card	£304
3yr Annual Credit Card	£430
Student Quarterly Direct Debit	£24

Subscribe online at: [www.magsubscriptions.com](http://www.magsubscriptions.com)

For further information please contact the subscriptions department on 0800 137201 or +44 (0)1722 716997 when calling from outside of the UK.

Contact [institutions@markallengroup.com](mailto:institutions@markallengroup.com) for institutional pricing

A MARK ALLEN GROUP COMPANY

[www.markallengroup.com](http://www.markallengroup.com)The *British Journal of Midwifery* is published by MA Healthcare Ltd, St Jude's Church, Dulwich Road, London SE24 0PB, UK  
Tel: +44 (0)20 7738 5454Website: [www.britishjournalofmidwifery.com](http://www.britishjournalofmidwifery.com)**MAG ONLINE LIBRARY**© MA Healthcare Ltd, 2020. All rights reserved. No part of the *British Journal of Midwifery* may be reproduced, stored in a retrieval system, or transmitted in any form or by any means electronic, mechanical, photocopying, recording, or otherwise without prior written permission of the Publishing Director.The views expressed do not necessarily represent those of the editor or the *British Journal of Midwifery*. Advertisements in the journal do not imply endorsement of the products or services advertised. The journal accepts advertising from all companies operating ethically and in accordance with UK law and regulations. Editorial content in the journal is entirely separate from advertising and, unless clearly stated, commercial companies have no influence over the content of articles.Please read our privacy policy, by visiting <http://privacypolicy.markallengroup.com>. This will explain how we process, use & safeguard your data.ISSN 0969 – 4900  
Printed by Pensord Press Ltd, Blackwood, NP12 2YA

Cover picture: Adobe Stock/Agnus



The paper used within this publication has been sourced from Chain-of-Custody certified manufacturers, operating within international environmental standards, to ensure sustainable sourcing of the raw materials, sustainable production and to minimise our carbon footprint.

# Pregnancy sickness: new findings

There has been a debate around whether the sickness women feel during the early stages of pregnancy is purely psychological rather than biological. However, the University of Warwick recently published a study called 'The onset of nausea and vomiting of pregnancy: a prospective cohort study' which suggests that there are biological factors that cause pregnancy sickness.

Pregnant women often experience some form of nausea in the first trimester, with symptoms subsiding usually between 12–14 weeks of pregnancy (Gadsby et al, 2021). The breakthrough in this study is that researchers have suggested that nausea and vomiting occur within a specific time frame following ovulation. 'The precise course of pregnancy sickness is unknown but this research shows that it occurs at a specific developmental stage in a specific timeslot,' says Professor Roger Gadsby, head author of the study. 'For researchers, it narrows our focus in terms of where we look for the cause. If we know that symptoms occur in a very narrow window 8–10 days after ovulation, researchers can concentrate their efforts on that particular stage of development to find the cause of the condition, both anatomically and biochemically.'

This finding can further assist pregnant women when it comes to treating nausea and vomiting. 'In the past, women suffering from nausea and vomiting in pregnancy have had their symptoms trivialised and overlooked because it was thought there was a psychological basis for the symptoms,' Gadsby says. 'This research further reinforces that nothing could be further from the truth, that this is a biological problem related to the development of the early fetus.'

Data was collected from 256 pregnant women's daily logs on their symptoms



**Alexandra Uytenbogaardt**  
Editor

which detailed the beginning of their pregnancy sickness, comparing when it first started to that of the date of their last menstrual cycle and date of ovulation. By taking the measurement of symptoms of nausea from the date of ovulation as opposed to the last date of their menstrual period, it has revealed that symptoms of pregnancy sickness occur much earlier than what was originally thought. This suggests that the cause of the pregnancy sickness is related to a particular stage of development of the fetus.

What's even more interesting is that the researchers also found that the phrase 'morning sickness' has a negative connotation when referring to pregnancy sickness, nausea and vomiting because of pregnancy. Hence, they have suggested the phrases 'pregnancy sickness' and 'nausea and sickness in pregnancy' be used instead as it is a less trivial way of describing the condition. **BJM**

Gadsby R, Ivanova D, Trevelyan E, Hutton JL, Johnson S. The onset of nausea and vomiting of pregnancy: a prospective cohort study. *BMC Pregnancy and Childbirth*. 2021. 21(10). <https://doi.org/10.1186/s12884-020-03478-7>