

Substance Use and Recovery in Pregnancy and Early Parenting

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<u>Buprenorphine:</u> Medication approved for treating opioid addiction. It's considered one of the most effective medications for opioid addiction in pregnancy.

<u>Doula:</u> Non-medical providers who give physical and emotional support during pregnancy and birthing. They can help pregnant people feel better supported during pregnancy.

<u>Family Medicine Practitioner:</u> A doctor or nurse who provides support to families.

<u>Healthcare Providers:</u> A healthcare provider could be a doctor, nurse practitioner, or nurse midwife. This term can also refer to other kinds of healthcare workers.

<u>Medicaid</u>: Medicaid is health insurance paid by state and federal funding. Some states have different names for Medicaid, such as Oregon Health Plan, or Medi-Cal.

<u>Nurse Midwife:</u> A nurse who also provides care during pregnancy and soon after the baby is born

<u>OB/GYN:</u> A type of doctor who provides care during pregnancy and soon after the baby is born.

Prenatal Care:

<u>Peer Support Specialist:</u> People who are in recovery from substance use disorders. They provide resources and support to help you in your recovery. They often have shared experience with parenting while in recovery.

<u>Substances:</u> Substances refers to alcohol and/or drugs. Substance use becomes an issue when it starts to have harmful effects on someone's life. This could mean difficulties at home, school, or work.



<u>Opioid addiction:</u> Medications approved for treating opioid addiction include methadone, buprenorphine, and naltrexone. Both methadone and buprenorphine are considered the safest and most effective medications for opioid addiction in pregnancy. Doctors have been prescribing methadone for over 50 years and buprenorphine for over 20 years to treat pregnant people. A lot less is known about naltrexone, but what is known is reassuring.

<u>Alcohol addiction:</u> We know less about medications for alcohol addiction in pregnancy than we do about medications for opioid addiction. Both acamprosate and naltrexone appear safe. They are safer than untreated alcohol addiction in pregnancy.

<u>Nicotine addiction:</u> Nicotine replacement therapy products can be very helpful for easing withdrawal symptoms when lowering or stopping nicotine use. These products include patches, chewing gum, lozenges, inhalers, and nasal sprays. You can discuss nicotine replacement therapy with your healthcare provider. Tips for a Healthy Pregnancy when you have an addiction



People feel all different emotions when they learn that they are pregnant. It is common to feel happy, excited, nervous, upset, worried, or even nothing at all. It is also common have multiple feelings. Some people decide they do not want to continue the pregnancy. Others decide they will continue the pregnancy but placed their child for adoption.

Some people are not sure which steps to take next. This is the case for all pregnant people, including people using <u>substances</u> and those in recovery. But some things about pregnancy and parenting are different for people using substances or in recovery. For example, some people find that once they learn that they are pregnant, they want to try to stop using substances.

Substances refers to alcohol and/or drugs. Substance use becomes an issue when it starts to have harmful effects on someone's life. This could mean difficulties at home, school, or work.

Here you will find information about:

- finding support during pregnancy
- reducing your substance use if that is your goal
- reducing harm to yourself and the developing baby if you continue using substances
- how to prepare for safe and successful parenting

1 Finding Support

You don't have to go through pregnancy alone. There are healthcare providers who can support you. These include doctors, nurse midwives, nurses, doulas, and home visitors. It might feel like it's hard to find people who understand your needs. However, there are professionals who are trained to provide support without judgement.

A healthcare provider could be a doctor, nurse practitioner, or nurse midwife. This term can also refer to other kinds of healthcare workers.

Prenatal Care

If you think you might be pregnant or know you are pregnant, it's important to start working with someone who provides prenatal care. They can monitor your health and the health of the baby while providing information about how to have a healthy pregnancy.

A person providing prenatal care could be:

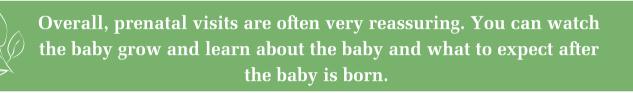
- OB/GYN: A type of doctor who provides care during pregnancy and soon after the baby is born.
- Nurse Midwife: A nurse who also provides care during pregnancy and soon after the baby is born.
- Family Medicine Practitioner: A doctor or nurse who provides support to families.

Attending regular prenatal care visits is one of the most important things that you can do to have a healthy baby. During prenatal visits, your healthcare provider will give you advice about things that you can do to stay healthy and feel well. They will also recommend that you regularly take a prenatal vitamin and eat nutrient dense foods to promote healthy development.





Your healthcare provider will see the baby through ultrasounds and listen to the baby's heartbeat. They will also watch your health. That way they can help you both stay healthy if either you or your baby have a medical concern. Prenatal care also includes testing for infections such as HIV and Hepatitis C. It is very important to know about such infections for your health during and after pregnancy. Knowing about infections also helps your healthcare provider to support you to prevent passing an infection on to your baby.



There are healthcare providers that specialize in helping pregnant people with addiction and in recovery. You can ask your regular doctor, peer support specialist, doula, or a substance use treatment center for a referral. Ask if they can refer you to a sensitive and compassionate OB/GYN or nurse midwife who has experience providing care for pregnant people with who are currently using substances or who are in recovery. Some specialist shave training to provide medication like buprenorphine to help you star two continue recovery while in pregnancy.

Many pregnant people are worried about telling their healthcare provider that they are pregnant and currently using substances. It is understandable to worry about what will happen if a doctor knows that you are pregnant and using drugs or alcohol. Doctors are mandatory reporters which means they must make a report if there are safety concerns for children of any age after birth. The laws in your state determine whether a doctor has to make a report to child welfare during a pregnancy. For example, in Oregon and most states, it is not reportable to use substances during pregnancy. Child welfare only becomes involved if the baby is affected by substances when they are born. If child welfare becomes involved during pregnancy and you think there involvement may not be lawful, you can also file a complaint against child welfare.



If child welfare becomes involved, they will probably see your participation in prenatal care as a positive step that you are taking. If you are connected to child welfare, it doesn't necessarily mean that you will have your child/children removed from your care. Child welfare's goal is usually to support children in staying with their parents. If you are following plans to provide your child with a safe home environment, it is more likely child welfare will support the children staying.

Ending a Pregnancy

Ending a pregnancy is commonly called pregnancy termination or abortion. Making the decision to end a pregnancy is a very personal decision that should be made by the person who is pregnant after talking with their healthcare providers. People who decide to end a pregnancy feel many different emotions. It is common to feel sadness, grief, relief, or guilt. It can be helpful to work with a mental health professional like a therapist, counselor, or social worker if you experience strong emotions after ending a pregnancy.

Pregnancy Support Resources

Prenatal care is not the only source of support to have a healthy pregnancy. Many areas have home visiting programs available that can help you, your home, and your family prepare for parenting – even before baby arrives. One program that is available in many places is the Nurse Family Partnership. This program provides a personal nurse who will offer support, advice, and information during pregnancy and after your baby is born. To enroll or begin services with Nurse Family Partnership, you must be a first-time parent in your first six months of pregnancy. This means the first or second trimester, less than 28 weeks pregnant. Your nurse can help you have a healthy pregnancy in many ways. They may help you find prenatal care, prepare to become a parent, and, generally, find answers to your questions.

Enroll with Nurse Family Partnership

There may be other home visiting resources available in your area. You can find these types of programs online by searching for the name of your state, county, or city plus the term "home visiting program." For example, "Washington home visiting program." If you are interested in a home visiting program but having a hard time finding one, you can also ask your healthcare provider or other community organizations you're connected to for ideas.

Doula Services

Doulas are non-medical providers who give physical and emotional support during pregnancy and birthing. They can help pregnant people feel better supported during pregnancy. During labor, doulas provide continuous support. They can help with pain management, emotional support, and coping during labor. Pregnant people who receive doula care have been shown to be less likely to have birth complications.

It typically costs about \$600-\$2,000 to hire a doula on your own. You can check your health insurance provider to see if doula services will be paid for. Currently, <u>Medicaid</u> covers doulas for families in New Jersey, Minnesota, and Oregon.

Medicaid is health insurance paid by state and federal funding. Some states have different names for Medicaid, such as Oregon Health Plan, or Medi-Cal. <u>See what your state calls Medicaid</u>.

If you are interested in a doula and live somewhere else, there are many programs that offer free or reduced cost services. For example, some areas, like Philadelphia, have free doula programs specialized for supporting pregnant people who are experiencing substance use and recovery.

Find your

local WIC

office

Doulas in training often provide services for families at no cost or at a very low cost. A way to find a low-cost doula is to contact an established doula in your area and ask if they know of any student doulas who are looking to attend more births (you can google "Doula" and your city).

Support for Eating Well

Your nutritional needs change during pregnancy. It is important to drink lots of water and eat healthy foods. The WIC program provides food vouchers to pregnant and parenting people with low to medium incomes. It pays for healthy food like fruits, vegetables, milk, cheese, peanut butter, and more. WIC is also called the Special Supplemental Nutrition Program for Women, Infants, and Children.

Addiction Treatment

Accessing addiction treatment services can be essential for people who are ready to stop using substances. Many people can reduce substance use on their own. However, addiction is a disease that is difficult to recover from without treatment and support. Not everyone who uses substances has an addiction. If your substance use is negatively impacting everyday life and you can't stop using (even if you want to), those are signs of having an addiction.

> It can be dangerous for you and for your baby to stop using substances suddenly.

It is important to get medical help if you are trying to stop. Your prenatal care provider or regular doctor can help you find supports that will help you stop or decrease your substance use while keeping the baby safe.

There are many options for safe treatment for substance use disorders. Substance use treatment typically involves a combination of therapy and medication. Therapy can help you to learn to understand triggers for using and ways to manage cravings. During pregnancy, treatment programs will help to monitor your health and the baby's health during the process of stopping using substances. You can receive many kinds of support for stopping using substances. You can receive many kinds of support for stopping using substances. Most addiction treatment happens through outpatient care, where patients come to a clinic for part of the day to receive support.

If you would like to talk to someone who can help you locate a treatment center, you can call to the National Drug Help Hotline (1-800-662-4357) and the National Alcohol and Drug Dependence Hopeline (1-800-622-2255)

Outpatient

One of the most common forms of treatment is outpatient, meaning people do not live in the treatment center. There are services that are specially designed to help pregnant and parenting people with addictions. Outpatient clinics often offer groups to support people in recovery. There are different kinds of outpatient services, from intensive daily treatment programs to receiving services once a week.

Medication for Addiction Treatment

Medications can be an essential part of addiction treatment. Medications exist for opioid, alcohol, and nicotine addiction. Some medications have been extensively studied in pregnancy, but others have not been studied as much.

- Opioid addiction: Medications approved for treating opioid addiction include methadone, buprenorphine, and naltrexone. Both methadone and buprenorphine are considered the safest and most effective medications for opioid addiction in pregnancy. Doctors have been prescribing methadone for over 50 years and buprenorphine for over 20 years to treat pregnant people. A lot less is known about naltrexone, but what is known is reassuring.
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nicotine use. These products include patches, chewing gum, lozenges, inhalers, and nasal sprays. You can discuss nicotine replacement therapy with your healthcare provider.

If you begin medication assisted outpatient treatment, the appointments may be more frequent at first. Your healthcare providers may want you to start by coming every day for group treatment and/or medication. This is especially true for opioid use. You are often able to start coming into the clinic less often as you move through the program and become more stable in recovery. If methadone is part of your treatment, you may receive take-home bottles so you don't have to come to the clinic every day. Methadone and all other prescription medications should be kept away from children and locked in a secure container.

In-Home Services

In-home services for parents in recovery are available in some states. These services provide both addiction recovery support as well as parenting support. In-home services involve people who come to your home, so you don't need to travel or find transportation in order to get support. These services vary from state to state. If they are available where you live, they are a great option for many families.

Inpatient/Residential

There are inpatient (live-in) services that are specially designed to help pregnant and parenting people with addictions. For example, there are some inpatient programs where pregnant people can live at the treatment center with their young children or live there during pregnancy and bring their baby after birth. These treatment centers often provide individual therapy and groups for stress management, relapse prevention, and parenting. They often have nursing staff on site as well.

Treatment centers provide a safe place for parents to focus on their recovery while also providing daycare and parenting support. This makes them a great option for some families. If you are being hurt in your relationship, entering inpatient or residential treatment can be a good choice so that you are not harmed while you are pregnant. Services can be short-term or longer-term (for example, three months). These services sometimes have waitlists. You may need to call around to ask about openings and wait to be admitted.



<u>Residential substance use disorder</u> <u>treatment directory</u>

Peer Support

It is becoming more common to have peer support services connected to treatment programs and stand-alone peer support programs in the community. Peer support specialists are usually people in recovery from substance use disorders. They provide resources and support to help you in your recovery. They often have shared experience with parenting while in recovery. They are a valuable resource because they are familiar with what you might be experiencing. They know how to help you get access to the resources you need.

Peer support specialists are paid for by Medicaid in most states.

Twelve-Step Programs

There are many different types of twelve-step programs to support recovery. Alcoholics Anonymous and Narcotics Anonymous are the most well-known and well-studied. If you do an Internet search of meetings near you, you will probably find at least one meeting per week in more rural areas. There are sometimes more than 20 meetings a day in bigger cities. If you decide these programs are not for you, other programs exist that might feel more culturally appropriate for you.

Some examples include:

- Refuge Recovery
- Smart Recovery
- Celebrate Recovery

There are also groups for other challenges people with substance use disorders sometimes experience. Examples include:

- Eating Disorders Anonymous
- Overeaters Anonymous

- Sex Addiction Anonymous
- Co-Dependents Anonymous
- groups for specific substances such as cocaine, heroin, and cannabis/marijuana

These types of groups offer supportive networks of people who have had similar lived experiences.

Information on harm reduction strategies

Harm Reduction

Harm reduction is a set of strategies to reduce the risk of negative effects associated with substance use. Harm reduction principles can help at any time. This is true for people who are pregnant as well as those who aren't.

One example of harm reduction is syringe exchange programs that offer unused syringes. These programs typically exchange unused syringes for used ones. Syringe exchange programs also often offer safer sex supplies and free and quick testing for HIV, Hepatitis C, and sexually transmitted infections. If you have HIV or Hepatitis C, they can also help you find a provider to help reduce the likelihood of transmitting these to your baby. Routine prenatal care also includes testing for HIV, Hepatitis C, and other infections like syphilis, gonorrhea and chlamydia.

Fentanyl testing strips are another strategy to reduce harm. These strips test for whether fentanyl is present in a substance. Fentanyl is more powerful than other opioids and more likely to cause harm, so it can be helpful to know if fentanyl is in the substance you are using. These strips are easy to use and cost about \$1 each. Some syringe exchange programs offer them for free. You can also check with your local pharmacy to see if they have any available.

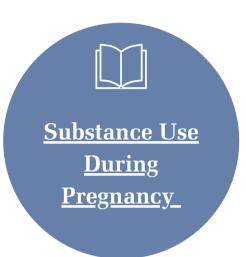
Having medication on hand can save your life if you overdose. Medications like naloxone can help stop an opioid overdose. Syringe exchange programs often provide free access to naloxone. Pharmacies in different states may also be able to provide naloxone without a prescription.



Learning About How Substance Use During Pregnancy Impacts the Baby

Many pregnant people want to learn about the impact of drugs, alcohol, and cigarette use on their baby. It is normal to worry about the baby and how it is developing. Many people look online to try to find this information, but it can be difficult to find accurate information this way. It's important to focus on information from trustworthy sources.

The CDC has more information on substance use during pregnancy. You can always ask your doctor about how your drug use may have impacted your baby.



Pregnancy Loss

In the first trimester, miscarriages are common among all pregnant people. About 1 in 4 pregnant people experience miscarriage.



If this happens, you should know that there are many reasons why a pregnancy loss occurs. While the use and misuse of substances may increase the risk of loss, there are many other potential reasons. It is rare that any single cause of pregnancy loss is determined. Loss may have happened because of a genetic abnormality or other biological factors that were out of your control.

If you have had a previous pregnancy loss or are worried about loss in this pregnancy, talk to your healthcare provider. If a loss does occur, be sure to get the supports you need.

Tobacco

Smoking and vaping during pregnancy can increase the risk of pregnancy loss, preterm birth, stillbirth, and Sudden Infant Death Syndrome (SIDS). It can also increase the risk that your baby might have attention challenges or respiratory health complications as they grow up.

Using tobacco during pregnancy can also be harmful to you. Quitting or cutting back smoking at any point during your pregnancy benefits you and your baby. The greatest benefit occurs when you stop smoking before your pregnancy reaches 15 weeks. However, any time that you can stop smoking during your pregnancy is helpful to the baby's health and your health.

If you have stopped smoking, it is also better if you can avoid being around people who are smoking because secondhand smoke can also affect you and your baby's development. Exposure to secondhand smoke is also harmful to babies and children after birth, so this is an important change to try to make whenever you are able. Even after the baby is born, second and thirdhand smoke can be a health risk to your baby. Thirdhand smoke is smoke that is on your clothes, your couch, or your floor.

Cannabis (Marijuana)

There is still a lot that is unknown about the effects of cannabis on your baby's development and long-term outcomes. Some research suggests it might be associated with increased risk for premature birth, low birth weight, and some birth defects. Experts recommend avoiding even medical cannabis during pregnancy because the effects are unknown. If you have been taking cannabis for nausea, a doctor can prescribe alternative medications that have been studied and have been found to be safe during pregnancy.

Alcohol

Alcohol passes to the baby through the umbilical cord. There is a difference between having occasional alcohol during your pregnancy and constant use. The more alcohol that the baby is exposed to, the greater the risk for the baby. If you have an alcohol addiction, there can be many risks to your baby. Alcohol addiction means you use alcohol frequently, can't stop using even when you want to, and your use of alcohol has a negative impact on your life.

Sometimes when pregnant people with an alcohol addiction drink, the baby is born with Fetal Alcohol Syndrome. This refers to babies having mild to severe challenges as they grow through childhood. Challenges can include low birth weight and minor facial changes like having a smooth area between their nose and upper lip. Some children born with Fetal Alcohol Syndrome may also have challenges with thinking, language, and attention.

Some babies with parents who drink alcohol are born without these challenges. This condition is preventable if you do not drink alcohol during pregnancy and can sometimes be prevented if you stop drinking.

Another condition is Fetal Alcohol Spectrum Disorder. This occurs when the baby is exposed to alcohol during pregnancy that leads to challenges that do not fit with the diagnosis Fetal Alcohol Syndrome. Some children born with Fetal Alcohol Spectrum Disorder can have challenges with thinking and learning. They can also have difficulties controlling their behavior. It can be very hard to tell if a newborn is affected by alcohol exposure and you should tell your baby's pediatrician if this is a concern for you. There usually aren't ways to know how alcohol consumption is affecting the baby while you are pregnant.

Learn more about Alcohol Use and Pregnancy

If you struggle with alcohol use disorder, the best thing that you can do is work with your medical care provider and/or a treatment center to reduce/stop drinking as soon as possible. It is never too late to decrease your use of alcohol or stop drinking. Quitting during pregnancy has been shown to improve outcomes for your baby.

If you experience withdrawal from alcohol, it is important to detox in a medically supervised environment. Unsupervised withdrawal from alcohol can kill you.

Other Substances

Other substances can also impact your safety and health during pregnancy and the safety of your developing baby. This includes methamphetamine, opiates (including heroin and fentanyl), benzos, and cocaine. Many prescription medications can also impact pregnancies. Different substances impact the baby in different ways. If you decide to stop using substances during pregnancy, it is important to have medical assistance. In some cases it can be risky for you and your baby to not have medical support during pregnancy. This is one of the reasons that it is so helpful to work with your doctor to come up with a plan to have a healthy pregnancy.



Learn more about the effects of specific substances while pregnant

Impacts at Delivery

It can be very hard to predict if substance use is impacting a pregnancy before a baby is born. Some babies will have symptoms of withdrawal when they are born. This is sometimes called Neonatal Opioid Withdrawal Symptoms (NOWS), or Neonatal Abstinence Syndrome (NAS). Withdrawal symptoms may happen because some substances pass to the baby during pregnancy. Babies can have withdrawal symptoms when they are born because they aren't being exposed to those substances anymore. Withdrawal symptoms can happen from a collection of substances, including prescription and non-prescription drugs.

Withdrawal symptoms in babies can look like trembling/shaking, difficulty eating, difficulty sleeping, crying more, and being stiff. Overall, one of the biggest risks is that these differences can make it hard for a baby to gain weight. This can become dangerous if it's not addressed. When babies are at risk for withdrawal at birth, they may need to stay in the hospital for several extra days to be closely monitored for signs and symptoms of withdrawal.

At the hospital, the medical staff know how to help babies going through withdrawal feel as comfortable as possible. Medical staff will monitor babies to help them be safe while going through these reactions.

The medical team will often try to use methods that don't require medications to help babies first. For example, medical staff may encourage you to:



Providing your own milk (breastmilk or chestmilk), may reduce withdrawal symptoms for your baby in some situations. You and your care team should work together to decide if providing milk from your body is safe for your baby. This decision is often based on your own health and when and which substances you may have exposure to.

If your baby can eat, sleep, and be comforted with your help, they may not need medication. Some ways that you can comfort your baby are by placing your baby without clothes on your bare skin, keeping your baby with you in your hospital room, and using a baby carrier to wear your baby for one hour a day. The more you hold your baby, often the more comforted they feel. If your child still has trouble eating, sleeping, or being comforted, they may require medications such as morphine to help them manage the effects of withdrawal. Be sure to ask questions to your care team in the hospital if you have them. But overall, the best medicine for your baby is you.

It can be helpful to understand what will happen at the hospital when you prepare for those first few days after the baby is born. You should talk to your healthcare provider who is providing your prenatal care about what to expect. They may be able to connect you with the teams who will provide care in the hospital where you plan to give birth. You can also discuss any worries or concerns ahead of time. If the baby is born affected by substances, your care team may be required by federal and state law to notify child welfare. These laws are different in each state. This does not necessarily mean that your baby will be removed from your care. The best thing that you can do is to work on your recovery journey with your doctor and to help your baby thrive, even if child welfare is involved.

The good news is that babies whose parents used drugs during pregnancy usually grow up to be healthy, happy children, even if they initially go through withdrawal. Often the most important thing that you can do is continue to focus on your own recovery, physical health, and mental health. It's important that your child grow up with the healthiest you possible.

After delivery, you will continue to need care from your prenatal providers. Postpartum care, or care after your delivery, is best thought of as an ongoing process rather than a single encounter. This care will address questions and concerns you may have about your delivery or your body after delivery. It is a very important relationship to support your health as your body undergoes yet another set of rapid changes.

This is also a care team who can discuss your future plans such as future pregnancies and/or their prevention. You should partner with your prenatal provider to plan for connection to other health providers. For example, some people do not see their "regular" or primary care doctor during pregnancy. Your pregnancy care provider can help to identify and connect you to ongoing medical care. This continuation of care is also very important for people who are receiving medication support for recovery through their prenatal care.



Things to do on your own to have a Healthy Pregnancy

There are lots of things that you can do on your own to reduce the possibility of harm to your baby and to have a healthy pregnancy. One of the very best things that you can do is reach out to an OB/ GYN to begin prenatal care. However, there are things that you can do to have a healthier pregnancy even before you begin to work with medical professionals.

Social Support

If you are using alcohol, cigarettes or other drugs and do not feel comfortable talking to a prenatal care provider, you can begin by telling the people that you do trust that you are pregnant and using drugs and alcohol. This could include friends or family members. They can support you, and you can share this website with them so that they know the resources that are available to you.

If you are worried about whether child welfare will become involved, you can talk with family members and friends. They can help provide stability for you and your baby while you get treatment. This will help child welfare identify how your children will continue to be cared for while you receive support to have a healthy pregnancy. Planning ahead about how you will keep the baby safe and take care of yourself is often a sign to child welfare that you will be able to keep caring for your child safely.

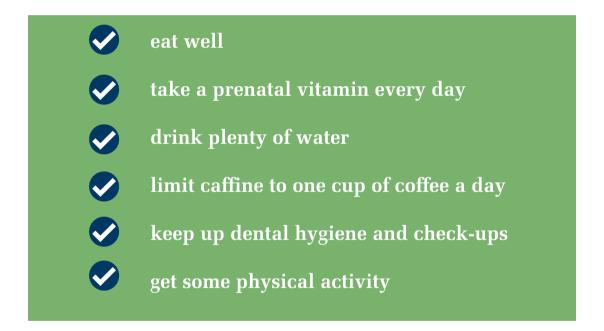
If you are planning to raise the baby, taking time to talk to your baby, read to your baby, and dream about the future can feel good during your pregnancy. These activities can help you enjoy this time, even when its stressful or uncertain.

If you are not planning to raise the baby, it can be helpful to talk with the people who care about you about your plans and get the support you need after the birth. Pregnant people can feel relieved, sad, happy, angry, worried or more than one feeling about deciding not to parent. Deciding not to parent can mean ending a pregnancy or planning to place the child for adoption. There is no one way to feel about your decision, whatever it is.



Taking Care of Your Body

There are also lots of good things that you can do to support a healthy pregnancy.



Even if you are struggling to stop using drugs or alcohol, you can still do these other things to support a healthy pregnancy.



Learning About Your Growing Baby

Some people find it interesting to read about how your baby is developing from week to week. This information can be exciting and interesting, since your body is going through so many changes. For other people, it can feel overwhelming.



If you do not know how far along you are, you can take a guess as to when you had your last period, and then use an online calculator to learn about how far along you might be.



